



Summer 2008/2009

# Men's Wellbeing Matters

*Promoting good health and wellbeing for men on the Mornington Peninsula*

## Governor the Patron of Men's Wellbeing Matters

**The Governor of Victoria and respected men's health expert Professor David de Kretser has become the Patron of Men's Wellbeing Matters.**

Three members of MWM's committee of management met with Professor de Kretser at Government House on 24th September after a documented proposal was presented to him earlier.

Greg Holding (chairman), Dr Mark Sujecki (deputy chairman) and Dr John Murphy (secretary) spent an hour with Professor de Kretser discussing the goals of Men's Wellbeing Matters and how his valuable involvement as Patron and mentor would help MWM to achieve its goals.

MWM's main aim is to make a major contribution to improving the health and wellbeing of men and their families on the Mornington Peninsula.

Established in October 2007, MWM has conducted four very successful men's health and wellbeing events on the Mornington Peninsula featuring some of Australia's most esteemed men's health experts and advocates.

Each event has had a capacity audience and received strong praise from those in attendance.

The major men's forum held at the Peninsula Community Theatre in June achieved an audience of nearly 500. MWM raised \$30,000 from a wide range of sources to run the event.

Dinner with Normie Rowe, on 11th September was booked out in less than a week.

Further events are planned in Dromana in December and Sorrento in January.

Professor de Kretser's patronage of MWM is important recognition of the group's achievements and potential to play a major role in improving men's health and wellbeing on the Peninsula.

It is recognition also that grass-roots community groups such as MWM, whose members work mainly on a voluntary or pro bono basis, can play just as important a role in health promotion as highly-government-funded organisations.

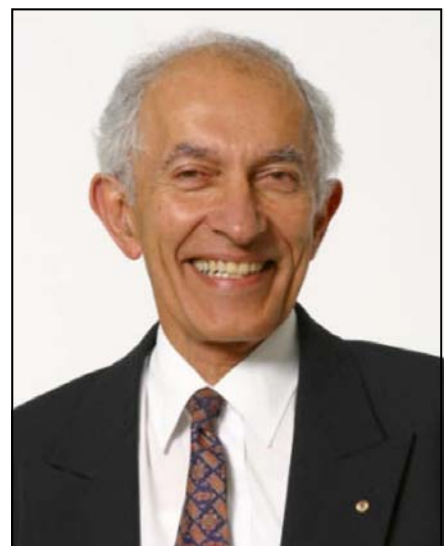
Professor David de Kretser was born in Colombo, Sri Lanka, and migrated to Australia in 1949. He was educated at Camberwell Grammar School and Melbourne and Monash Universities.

His academic career bridged medicine and anatomy having held positions at Monash University as Professor and Chairman of Anatomy, Founding Director of the Monash Institute of Reproduction and Development and Associate Dean for Biotechnology Development.

His research into reproductive biology, infertility and endocrinology has been recognised nationally and internationally. With Federal Government support, he initiated a highly successful program of community and professional education in male reproductive health called Andrology Australia.

He is a Fellow of the Royal Australasian College of Physicians, the Australian Academy of Science and the Australian Academy of Technological Sciences and Engineering.

He was made an Officer of the Order of Australia in 2001 and a Companion in the Order of Australia in 2006, and received the Centenary Medal in 2003.



**Professor David de Kretser**

**NEXT EVENT**  
**Dinner at Café Jett**  
Wednesday 3rd December 7.00 pm - 9.00 pm  
**Psychologist Dr Michael Carr-Gregg**  
Five Central Challenges for Today's Parents  
\$35.00 for two-course dinner  
Bookings essential 0359 87 1911  
See website (page 4) for further details

# Normie Rowe joins MWM

**Entertainer and Vietnam War veteran Normie Rowe AM has joined the committee of management of Men's Wellbeing Matters specifically to advise the group on its work with veterans.**

On 11th September Normie was the keynote speaker at MWM's dinner at Hickinbotham of Dromana which focussed on men's depression.

During his visit to the Peninsula, Normie indicated a strong interest in and support for the work of MWM, culminating in an invitation to join the management committee.

His nomination was ratified at MWM's October committee meeting.

During the mid-1960s, Normie was Australia's most popular male singer. Today he remains one of the busiest performers of his generation, travelling throughout Australia as an entertainer.

Normie has been a long-time supporter of community causes. He is a long-serving member of Variety Clubs of Australia, for which he is now a national ambassador, and he has won several awards for his work with them, including the Heart and Soul of Variety Award in 1996.

In 1994 Normie was appointed as a Member of The Order of Australia for services to Vietnam veterans, entertainment and the community.

Like many Vietnam War veterans, Normie struggled on his return to civilian life, suffering from post-traumatic stress disorder (PTSD) and depression.

Army service had effectively ended his career in the pop industry and this was exacerbated by the tragic loss of his 8-year-old son Adam in 1979 in a road accident, marriage breakdown and his daughter's mental health problems.

Already Normie has made a number of valuable contributions to the work of Men's Wellbeing Matters.



Normie Rowe AM

## Helping other men's health groups

**An important role of MWM will be to assist other grass-roots groups interested in promoting men's health and wellbeing with advice on how to conduct a successful local event.**

Several local health promotion events have achieved poor audiences recently despite their having had well-known presenters and generous budgets.

It is disappointing and embarrassing for organisers as well presenters when audience numbers are much less than anticipated.

### *'Men's Wellbeing Matters' event advisory service'*

Recently, for example, one local group hired an 800-seat venue and, despite a good speakers list and extensive promotion, achieved an audience of only 150, many of whom were professional workers from the group itself rather than members of the general public at whom the event was aimed.

Usually, there are three main reasons for poor audience numbers. The first is organisers overestimating public interest in the event's subject matter, the second is engaging speakers largely unknown or unappealing to the target audience, and the third is inadequate promotion.

MWM is keen that all efforts to promote health and wellbeing in the community are successful.

MWM's event advisory service will commence early in 2009. Watch our website for further information.

## Regular health checks with your GP

**MWM's most important message to men is to have regular health checks with their GP.**

Despite the availability of health services in the community and improved screening processes for conditions such as heart disease and cancer, men are not using health services early enough for treatment to be effective.

Many serious illnesses such as prostate cancer, heart disease, and others can be prevented or treated successfully through early identification.

Prostate cancer, for example, has now overtaken breast cancer as a cause of death in Australia. However, prostate cancer need not be a death sentence for men if discovered early enough and treated.

An annual health check with your GP is important for a healthy lifestyle.

A Federal Government rebate is available to enable people between the ages of 45 and 49 to be tested for chronic disease for free.

Contact your GP for further details.



# Dysthymia - low-level depression

**Slightly less common than major depression, dysthymia can be difficult to recognise and difficult to treat.**

Less severe than major depression, it usually lasts longer. Often people with dysthymia report being depressed for as long as they can remember.

Like major depression, dysthymia occurs twice as much in women than it does in men. However, because men generally are more reluctant to acknowledge their problems, dysthymia can go unnoticed more in men than women.

Sometimes dysthymia can originate early in childhood because of grief, loss or emotional trauma and affect the person for the rest of their life. It is not uncommon for people with dysthymia to have parents with major depression.

Symptoms of dysthymia are low mood, irritability, pessimism, loss of energy, sleeping too much/difficulty sleeping, poor self image, shyness, social withdrawal, poor work or school performance, conflict with others, lack of interest, loss of appetite or over-eating.

Most often people with dysthymia do not think of themselves as depressed and do not speak about it. Commonly family, friends and colleagues believe that the symptoms are simply part of their character.

The longer dysthymia lasts, the longer the recovery period. If not treated, dysthymia may lead eventually to major depression, alcoholism and/or suicide.

Dysthymia may be difficult for GPs to diagnose, especially if only physical symptoms are presented.

While generally mental health professionals are better equipped to diagnose dysthymia, usually they are not consulted until major depression develops.

Antidepressants may be helpful for dysthymia. Psychotherapy may help to overcome sufferers' negative thoughts. Behavior therapy may assist sufferers to develop a more positive approach to life including improved communication with family, friends and colleagues.

Men visiting their GP should mention if they are experiencing ongoing low moods.

## Men must take responsibility for health

**A major aim of MWM is to encourage men to take greater responsibility for their health and wellbeing.**

*Women work hardest for men's health.*

Currently, however, women play a much bigger role in the area of men's health at personal, policy and service levels than do men.

Women encourage and sometimes harass their men to seek medical support because of men's traditional passivity regarding personal health matters.

Many health promotion professionals in the men's health field are women.

Women manage men's health services, community programs and run workshops and other events for men.

Commonly women advocate to governments and the community for more appropriate policies and services for men as well as decide what and how services are provided.

Women have taken up the cause of men's health by default given men's reluctance to do it. Often it has been influenced also by women's traditional nurturing and caring roles in society.

The most significant advances in women's health over the last 40 years can be attributed largely to women themselves taking responsibility for their own field of health.

If men's health is to progress similarly, then men must start to take greater responsibility for their health and wellbeing at all levels, from their personal health to advocating for appropriate health policy and programs, and being actively involved in the planning and operation of men's services in the community.

This does not mean that women should discontinue their interest or involvement in the men's health field. Nor does it mean that men should actively pursue the exclusion of women from the area of men's health.

It does mean, however, that men must take primary responsibility for developing their own field of health and wellbeing.

## Younger men's wellbeing a priority

**The health and wellbeing of younger men, or 'the invincibles' as they like to think of themselves, will be a major focus of MWM.**

Younger men experience a range of health and wellbeing issues, but often do not have the knowledge, maturity or sense of urgency to address them.

During our busy establishment phase, MWM has been running events for older men who could be described as 'the converted' or 'almost converted'.

However, once our main setting-up tasks are done, we will be examining strategies to address the health and wellbeing needs of younger men.

All the evidence about successful health promotion and education for younger men indicates that we will have to go to the places where they congregate rather than invite them to our venues.

This includes their schools, sporting clubs, pubs and clubs, shopping centres, and so on.



# Men's Wellbeing Matters

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## The Committee



Greg Holding  
Chairman

Dr Mark Sujecki  
Deputy Chairman

Dr John Murphy  
Secretary

Joe Cauchi  
Treasurer

Stuart Marshall

Normie Rowe AM

Ted Kay

Andrew  
Hickinbotham

The Committee comprises men who are concerned about and committed to the cause of men's health and wellbeing. Their membership is independent of the interests of any other group or organisation with which they may be associated, including their employers.

*The aim of Men's Wellbeing Matters is to make a major contribution to the wellbeing of men and their families on the Mornington Peninsula.*

*MWM will achieve its aim by undertaking community strengthening, health promotion and education activities in partnership with others who are interested in men's health and wellbeing.*

*While 'health and wellbeing' usually refer to physical and mental health, MWM's priorities are based on a more holistic approach and are interested in how men are coping in a range of areas of their lives such as family, education, employment, income, housing, sport, recreation and community.*

*MWM was formed in November 2007 by a group of professional men concerned about the state of men's health on the Mornington Peninsula.*

*Members of the committee undertake their work for MWM mostly on a voluntary or pro bono basis and pursue funding for events and activities on a project-by-project basis.*

## About diabetes

**Diabetes is Australia's fastest-growing chronic disease with nearly 900,000 Australians affected by the condition.**

It is the sixth leading cause of death in Australia and around 275 people develop diabetes every day.

A hormone called insulin converts glucose (sugar) from food into energy. When people have type 1 diabetes (IDDM), insulin is no longer produced by the body or not in sufficient amounts to do its job.

As a result, when people with diabetes eat glucose, which is in foods such as breads, cereals, fruit, starchy vegetables, legumes, milk, yoghurt and sweets, it cannot be converted into energy.

Instead the glucose stays in the blood which is why people with diabetes have higher glucose levels. Unless treated with daily injections of insulin, people with type 1 diabetes accumulate dangerous chemical substances in their blood from the burning of fat. This can be life threatening.

Type 2 diabetes (NIDDM) is the most common form of diabetes, affecting 85-90% of all people with diabetes. In type 2 diabetes, the body produces some insulin but not enough.

Although it mostly affects older adults, because of increasing obesity among younger people, more children are getting type 2 diabetes.

Type 2 diabetes results from a combination of environmental and genetic factors with the risk increased greatly by lifestyle factors such as

overweight and obesity, high blood pressure, insufficient exercise, and poor diet.

Initially, type 2 diabetes may be managed with healthy eating and regular physical activity. However, eventually most people with type 2 diabetes will need tablets and many of them will need insulin. This is a natural progression of the disease, and taking tablets or insulin as soon as they are required can result in fewer longer-term complications.

For more information about diabetes see [www.diabetesaustralia.com.au](http://www.diabetesaustralia.com.au) or telephone 1300 136 588.

The best place, however, to obtain information about diabetes and your personal risk is from your GP.