

22/11/2003

Mr Neil Wildman  
Senior Policy Officer  
Mental Health Council of Australia.

Dear Mr Wildman

Thank you for providing the Mental Health Co-ordinating Council (MHCC) with the opportunity to contribute to the review of the NHMRC publication *Men & Mental Health* -1995.

MHCC is the state peak body for non-government organisations (NGOs) working for mental health throughout NSW. MHCC represents the views and interests of over 130 NGOs in the formation of policy and acts as a liaison between the government and non-government sectors. Our member organisations specialise in the provision of rehabilitation services and disability support for people who experience mental illness.

MHCC strongly supports a review of this document that addresses issues, many of which have changed little during the intervening years, or that have become increasingly serious.

## Comments

### The strengths & weaknesses of the publication.

- The reference document *Men & Mental Health – 1995*, is a broad based document that is both interesting and relevant. The main comment would be that it does require some updating, and the summary and background need to be rewritten to reflect the changes that have occurred since publication.
- It would have been useful had the Executive Summary been referenced / footnoted. The summary made a number of statements that required information as to the source, whether within the document itself or elsewhere. We assumed that statements contained in the summary are supported by evidence included in the following reference sites. However, as these statements are not individually referenced, it is difficult to identify which supporting reference is applicable to a particular statement.
- Consistency throughout the document in referencing and footnoting would have been useful, as this would have made the document easier to read.
- It would have been valuable to have the dates of each of the contributors' papers included.

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*Working For  
Mental Health*

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Body for mental health  
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- Regarding the statement in the summary relating to criminal behaviour as an associated fact in mental health and substance abuse. It is not made clear whether this refers to antisocial disorders leading to criminal behaviour, which may be exacerbated by substance abuse. The document refers to antisocial behaviour in a manner that appears to attribute blame rather than acknowledge the complex socio-economic factors, which contribute to development of this disorder.
- The summary sub-heading, **“Changes within the Family”** contains statements of a generalised and inappropriate nature for a professional document such as this. It appears to lack objectivity, or an evidence base for some statements such as: **“Parents may not only be less willing to invest time in child rearing, but appear more willing to abandon their children together.”**<sup>1</sup> The meaning of **“together,”** in this context is unclear.
- There does not seem to be evidence in the document to support the statement: **“... an apparent increase in the rate at which children are abandoned by parents, with a disproportionate number of these being boys,”**<sup>2</sup> and it is difficult to identify which reference applies to this statement.
- In the summary, the author writes that: **“Some evidence suggests that fathers may be particularly important to the mental health of their sons, but there is still dispute about this issues.”**<sup>3</sup> This statement needs to be reviewed in the light of more current research.
- The summary and several articles refer to the erosion of the traditional male role **‘as breadwinner,’**<sup>4</sup> as having negatively impacted on the mental health of men. However, there have been substantial societal, attitudinal changes relating to women as either joint or sole breadwinner. It could be said that many men welcome the shared responsibilities of income earning and child-care. Whilst older generations may still hold traditional values, the under 40’s seem to show change in role perception.
- In the summary the author states that: **“... suicide is still an infrequent event with a low base rate.”**<sup>5</sup> According to Lifeline, there are 2,500 suicides a year, and it is thought that the actual figure may be 3 times higher, due to unexplained car and other accidents. The author continues: **“ Although it is tempting to inject considerable resources into areas of apparent immediate need, taken in context there is often little scientific merit in some initiatives which at times appear to have been introduced for political expediency rather than based on any rational allocation of resources with the hope of demonstrating the effectiveness of any intervention.”**<sup>6</sup> It would seem, contrary to this statement, that the suicide figures indicate that initiatives for intervention should be considered a matter of some urgency.

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<sup>1</sup> National Health & Medical Research Council, (1995). *Men & Mental Health : Research Document*. Commonwealth of Australia: Commonwealth Department of Human Services & Health. P.17.

<sup>2</sup> *ibid.* p. 18.

<sup>3</sup> *ibid.* p. (xiii).

<sup>4</sup> *ibid.* p. 31.

<sup>5</sup> *ibid.* p. 33.

<sup>6</sup> *ibid.* p. 33.

- The statement that treatment such as medication is available is acknowledged.<sup>7</sup> However, the effectiveness of medication is limited if it is the only method of treatment which is utilised, and there is virtually no long-term psychosocial therapy available under the public health system. There is documented evidence that without therapy, long-term problems are not adequately addressed. A combined holistic approach to mental and physical health is one that requires attention both in terms of education and health funding.<sup>8</sup>
- The author states that: ***“In the view of many health professionals ‘ alcoholism’ is a relatively rare disorder that has poor outcome;”***<sup>9</sup> The document later states that 29% of people suffer alcoholism at some stage in their lives. Such statements seem somewhat inconsistent.
- In several articles there are statements such as: ***“...problems with alcohol and antisocial behaviour may be more military related rather than war related,”***<sup>10</sup> This information is presented in a confusing manner, and requires clarification.

### Issues that have emerged since the publication date 1995.

- The report refers to the 1992 National Mental Health Policy, which advocated a community – orientated approach. Over the past few years, the further decentralisation of mainstream mental health services without adequate community resources in place, has led to increasingly detrimental conditions for people with mental health problems who are homeless, most of whom are men.
- Since the report was published, the government has sought to hold illegal refugees under much more restrictive detention circumstances. The impact of their experience is detrimental to their mental health. This is further undermined by the inability of services to adequately meet their needs. Whilst, this affects both adults and children of both sexes, it could be deduced that men and boys from more traditionally based cultures, would suffer to a very high degree in circumstances where they cannot work to maintain their families, and would experience extreme anxiety and insecurity.
- The summary states that depression decreases during middle years.<sup>11</sup> There is evidence of growth in the suicide rate in the 45 - 65 age range, probably due to economic factors such as unemployment and increasing age discrimination in the work place.<sup>12 13</sup>

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<sup>8</sup> Tresize, E. (1999). *The Suicide Safety Network: A Community Response to Affect Suicide Reduction*. Mental Health in Australia 19:1, p. 58.

<sup>9</sup> National Health & Medical Research Council, (1995). *Men & Mental Health : Research Document*. Commonwealth of Australia: Commonwealth Department of Human Services & Health, p. 36.

<sup>10</sup> *ibid.* p. 65.

<sup>11</sup> National Health & Medical Research Council, (1995). *Men & Mental Health : Research Document*. Commonwealth of Australia: Commonwealth Department of Human Services & Health, p. 12.

<sup>12</sup> ACOSS Media Release. 13/11/2003.

[http://coss.net.au/news/acoss/1068676871\\_23804\\_acoss.jsp?subsite=acoss](http://coss.net.au/news/acoss/1068676871_23804_acoss.jsp?subsite=acoss)  
Available : URL [Accessed Nov 17<sup>th</sup> 2003].

<sup>13</sup> Lewis, S. Marris, S. (2003). *Rising Interest in a Low Jobless Era*. The Australian, (07/11/2003)

- Economic factors resulting in downsizing company personnel for offshore contract alternatives, has impacted dramatically on sectors such as Telecommunications and Information Technology. Similarly, since 1995, further job losses in manufacturing and the natural resources industries have continued . Since jobs in these areas were predominantly male, this has led to substantial numbers of men being unable to find alternative work in similar fields. This particularly affects older men. Increased employment figures primarily reflect the growth of part-time work, particularly amongst women. The effects of unemployment on the mental health of men, is well documented.<sup>14</sup>
- With the rapid growth of outsourcing, growing numbers of contract workers are employed working from home. There is an increase in social isolation and dependence on the Internet for social interaction. There appears to be reported evidence that there is a generation of young men growing up with less than adequate interpersonal skills, exacerbated by a growth of computer games, mainly focused on the male population. Research needs to be included that outlines the possible detrimental effects of such pastimes on the physical and emotional health of young men.
- The stock market crash, plus the several instances of lost employee benefits over the past few years, has impacted on the security and ability of people to adequately fund their retirement, thus increasing levels of anxiety and depression in the community.
- Stigmatisation and homophobia due to attitudes prevalent during the early years of the AIDS epidemic has now largely been replaced with community understanding and support mechanisms. It appears that this has led to somewhat reduced levels of depression in the gay community in the major cities, although attitudes remain much the same in rural areas.<sup>15</sup>
- Since the marketing of Viagra, it has become apparent that the incidence of impotence is a significant issue in the male population. Since, this drug is unsuitable for many people due to other health conditions, the issues surrounding men and their sexuality need to be addressed so as to minimise the development of mental health problems secondary to sexual problems.
- Since 1995 – The DSM 111 has been upgraded to DSM- IV-TR.<sup>16</sup>
- The article “ ***The Mental Health of Aboriginal Communities,***” refers to research project into Aboriginal mental health under way. Results of this project should be included.<sup>17</sup>

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<sup>14</sup> Prof.(MIT). Kochan, T. (2003). *Life Matters*. Radio National (Nov 2003)

<sup>15</sup> Anecdotal – Employees AIDS Council of Australia, (Nov 2003).

<sup>16</sup> American Psychiatric Association, (1994). *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition*. Washington DC. USA. <http://www.behavenet.com/capsules/disorders/dsm4classification.htm>  
Available : URL [Accessed 16 November, 2003]

<sup>17</sup> McKendrick, J.H. Thorpe, M. (Date unknown). *The Mental Health of Aboriginal Communities*. Department of psychiatry, University of Melbourne : The Victorian Aboriginal Health Service, Melbourne.

**Any other relevant issues to this review.**

- Inclusion is suggested of documentation as to the success and relevance of AA type programs.

The report covers a comprehensive array of issues that mostly remain relevant in 2003. This is demonstrated by the similarity of issues raised in ***The Senate Inquiry into Mental Health, NSW – 2002.***<sup>18</sup> MHCC has been facilitating working groups that are progressing the implementation of the Inquiry's recommendations.

If you would like to clarify any points raised in this submission, please do not hesitate to contact Corinne Henderson on (02) 9555 8388. MHCC would be happy to review any further proposals.

Thank you for considering our comments. We look forward to hearing from you.

Yours sincerely

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Executive Officer  
Mental Health Co-ordinating Council

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<sup>18</sup> The Hon Dr. Brian Pezzutti. (Chair). Senate Inquiry into Mental Health Services, NSW. (2003).