

New National Male Health Policy

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NTV has recently written to Warren Snowdon, federal minister for indigenous health, rural and regional health, and regional service delivery regarding the first *National Male Health Policy: Building on the Strengths of Australian Males*.

NTV noted that the National Male Health Policy is a vital initiative, and has some important positives. NTV is pleased to see that the policy:

- raises the issues of men's health as key concerns for state governments, public health authorities and health promotion foundations and not-for-profit organisations
- focuses on prevention initiatives within a social determinants model of health
- addresses the relationship between men's gendered health behaviours (except for their use of family violence, to which I have provided comment below) and health outcomes
- recognises the important role that men (including gay men) can play as fathers
- acknowledges the injustices faced by Aboriginal and Torres Strait Islander communities

However, NTV believes that as it currently stands, the policy misses some key social determinants of health that impact significantly on men's health, as well as on others in the community.

NTV is quite surprised that the policy makes absolutely no mention of men's use of family or domestic violence as a significant health issue, despite the fact that:

- it is well established that at least one in three women experience violence from an intimate partner at some point in their lives, meaning that a significant proportion of men use intimate partner violence
- men's use of family violence has major detrimental effects not only on women and children, but also on the men themselves – men's use of family violence destroys the trust, intimacy and overall health of relationships, and as your policy emphasises, healthy relationships are a major determinant of men's mental and physical health outcomes.
- it is also well established across family violence sectors throughout the world that men's use of family violence, and disrespectful and controlling ways of relating to their partner, can have major mental and physical health effects on children including male children.

In relation to the last point, NTV is also surprised that the policy makes no mention of the importance of boys and young men learning non-violent and respectful ways of relating to girls and to women, despite the federal government's commitments towards funding respectful relationship education programs and campaigns. Indeed, the only reference in this context is fathers' relationships with boys only. These programs and campaigns represent important opportunities to prevent men's use of violence before it occurs, thereby enhancing the ability of boys and men to have successful and rewarding relationships.

NTV's second concern is that in some areas, the policy has the potential to reinforce existing gender inequalities that disadvantage women. There are specifically two issues here that I wish to highlight.

First the policy states that "Research has consistently shown that married males have better physical and mental health outcomes than males who are divorced, bereaved or single. A 'well functioning and stable' marriage or committed couple relationship brings many benefits to

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individuals, families and communities, including enjoyment of life, 'greater resilience to stressful events, better physical and mental health, and greater work productivity'. In addition to providing emotional and physical support, women have been found to have a role in monitoring male health and encouraging males to visit a doctor."

This paragraph implies that men should enter relationships with women, in part, so that women can take responsibility for men's health. It implies that women should continue to carry the burden of the un-negotiated role of taking responsibility for their male partner's health, with no consideration of the effects of this invisible expectation on their capacity and time to do other things. This sends alarming messages that contradicts a key theme of the policy – that men should take greater responsibility for their own health.

Second, this section, titled 'Relationships and fathering', also notes that "Caring and involved fathering is crucial for children's health and wellbeing, and has a strong intergenerational effect, including through males providing a parenting role model for their sons."

A glaring omission from this statement is the need for children to be and feel emotionally and physically safe. The statement also implies that fathers should always be actively involved in their children's lives regardless of fathers' past (or continuing) inappropriate behaviour (including the use of violence), or indeed regardless of the wishes or needs of their children.

Furthermore, the reference to fathers' involvement with their children being 'crucial' implies that children's lives and experiences are somewhat compromised without a father's involvement. NTV is also concerned about the notion of fathers being positive role models as a matter of course, as there is no definition or discussion regarding what appropriate role modelling could or should be. This statement provides implicit support for the mythology concerning boys requiring strong male role models, implying that women are not as capable of raising sons and they should perhaps recruit men to assist in this role. As far as NTV is aware, there is no evidence that describes causality of diminished experiences or outcomes for children due to an absence of an adult male in their family. To the contrary, there is substantial evidence that describes poorer outcomes for children, women and men when men use violence towards their family members. NTV notes that Victoria's draft men's health and wellbeing strategy document raises the issue of gender as of direct importance to promoting men's health.

NTV's final concern is that the policy ignores the issue of homophobia, despite this being a significant social determinant affecting the physical and emotional health of gay and bisexual men. NTV believes that the report's credibility is significantly compromised though the omission of such a vital social determinant of health for a notable proportion of males in our community. NTV notes that Victoria's draft men's health and wellbeing strategy document makes clear mention of the specific health issues facing gay or bisexual men in our community.

Men's use of violence is a significant health issue, and should not remain invisible in men's health policies nor in men's health work. NTV acknowledges the strengths-based approach of the report, but the experience of our members in having worked with thousands of men who use violence is that there is tremendous opportunity and gain for men to acknowledge and change their violent and controlling behaviours. Doing so can result in men achieving the trust, safety, love, connection, belonging and respect that they so deeply yearn for their relationships with their partner and children.

NTV has invited the minister to provide feedback and to consider the ways in which issues of family violence might be addressed as a national men's health concern in the future.

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