



THE MEN'S TABLE
MEN SERVING MEN

The Men's Table
Funding Submission to The Treasury

“Suicide prevention and workforce capacity building
in mental health through national expansion of The
Men's Table program”

Vers 1.0

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Project Executive Summary

The problem

1. Suicide rates of men are 3.5 times higher than women
2. Men are reticent help-seekers; 40% of men do not see through a Mental Health plan
3. The mental health workforce is under strain; wait times are long, providers have staffing pressures

The solution

1. **A proven, evidence based model;** The Men's Table program is a rapidly growing evidence based suicide prevention model
2. **Overcoming men's help-seeking reticence;** Important approaches are being implemented into The Men's Table program to support men who are reticent help-seekers. These are based on findings arising from a research project just completed in December 2021, conducted by The Men's Table and commissioned by the National Mental Health Commission.
3. **Efficient workforce deployment utilising a local community led model;** A highly leveraged workforce growth model is being deployed through The Men's Table. This is because the community led, facilitated peer group model means that preventative men's mental health support is being delivered at low cost, with trained and supported volunteer men.
4. **A plan for national scaling;** The model can be readily scaled from the current locations of NSW Metro and Regional, Northern Tasmania, Melbourne and ACT, to grow a national footprint of Men's Tables over 3 years and triple the number of men and communities being served.

Implementing the solution - a 12 month funding contract as a pilot

Funds are needed for the next stage of national expansion of The Men's Table model to grow a national footprint of Men's Tables, double the number of men and communities, with a presence in all States and Territories..

1 Year of funding is sought from the Department of Health in support of this growth plan.

This can serve as a pilot project, with the intention of additional Year 2 & 3 funding provided the organisation and program can achieve targeted milestones.

Budget

A total grant request of \$ 1,000,000 for a 12 month contract.

The problem - in detail

1. Suicide rates of men are 3.5 times higher than women

- a. Men's mental health and suicide risk
 - 2,384 Australian male deaths by suicide in 2020 , three times more than women
 - The cost per suicide is estimated to be between \$709,000 & \$ 4 mil
- b. Social isolation, loneliness and lack of meaningful friendships
 - Socially connection is associated with improved mental health
 - Only 40% of men in Australia feel a sense of belonging in their community.
 - Men report higher levels of loneliness than women
 - The role of positive relationships in healthy ageing is more important than physical activity, avoidance of smoking and alcohol abuse

Men are lonely, disconnected and don't have a safe place to talk openly. The Men's Table Model of Care 2020 document provides research evidence underlying the issues for men. These include Mental Health and Suicide Risk, Social Disconnection, loneliness and lack of meaningful friendships, and the masculine norms that restrict men from sharing feelings and seeking help.

Whilst the evidence is stark, we hear it first hand at Men's Tables. Here are some quotes;

- "I sit on the couch watching TV and listen to my wife organising her social life."
- "After my divorce, I found myself alone again."
- "I moved here from interstate and have found it hard to make friends"
- "I'm lonely. I've got mates, but we just talk about footy and shit"

2. Men are reticent help-seekers; 40% of men do not see through a Mental Health plan

- a. Help seeking reticence and Restrictive masculine norms
 - Conformity to a strong masculine identity is a predictor of social isolation
 - Males learn to hold back emotions rather than expressing them
 - Men are generally less likely than women to seek help

Men seem to experience and manage mental health symptoms in different ways to women (Seidler et al., 2016). They are less likely to report mental health symptoms and more likely to minimise the severity of symptoms (Affleck, Carmichael, & Whitley, 2018). Men have a well-established reputation as less likely to seek help for health concerns than women. Assumptions are made that they are less aware of health or less interested, yet there is no depth of understanding of why men seem to avoid health services (Smith, Braunack-Mayer and Wittert, 2006).

Reticence means a reluctance to reveal personal thoughts and feelings. This has implications for help-seeking, as men may avoid situations in which they will be asked personal questions. It also impacts on the way men interact in friendship groups. The established view is that men don't talk about health, especially to other men (Smith and Braunack-Mayer, 2014).

3. COVID has put the mental health workforce under considerable strain; wait times are long, providers have staffing pressures and costs are rising.
- a. Mental health workforce shortages due to COVID and an increase of low intensity mental health issues.
- Wait times for psycho social services are extending; services are under pressure
 - Mental health workers with lived experience add a unique value and are sought by many programs, yet present challenges in regard to staffing and training
 - Mental health care plans are expensive, and current wait times are lengthening.

For example: A Clinical Psychologist cost \$250ph (The Australian Psychological Society recommends \$267ph)

Mental Health Care Plan rebate is \$129.55 per visit

Over ten visits the rebate total is \$1295.50

Over ten visits the cost to the client is \$1204.50

Mental health workforce shortages are coupled with growing community demand, including significant increases in low intensity mental health issues arising through the COVID pandemic. The Men's Table offers a low cost preventative solution that is community driven.

The solution - in detail

1. A proven, evidence based model;

- a. Refer *The Men's Table Model of Care 2020* - A research project commissioned by NMHC
- b. The Men's Table offers a unique, evidenced based, low cost preventative model that provides a significant economic leverage effect, avoiding the high costs of dealing with depression, suicide and other disabling men's mental health issues and instead enabling men's mental health and wellbeing.

Results from our Model of Care research show that many men start from self-interest in the search for friendships and support for mental wellbeing, and result in a collective sense of mutual-responsibility and community. The narrative shifts from specific mental health issues, such as depression and loneliness, to mental wellbeing, healthy masculinities and healthy communities.

As outlined in The Men's Table Model of Care 2020 report, the evidenced based outcomes of our model for men at Tables include:

- I. Psychological safety; being heard, courage and competence in sharing feelings, cathartic release, normalising difficult emotions
- II. Mutual self disclosure; valuing the give and take of sharing and listening of feelings
- III. Social connectedness; a sense of belonging, friendship, feeling connected
- IV. Community belonging; commitment to others, ours not mine, serving the whole

These outcomes are enablers of men's mental health and wellbeing, resilient and healthy communities and greater help-seeking in men.

2. Overcoming men's help-seeking reticence;

- a. Refer *Couch to Community 2021* - A research project commissioned by NMHC
- b. The Couch to Community pilot project has shown that;
 - i. Men are actively looking for opportunities to connect with other men.
 - ii. Men do talk about personal thoughts and emotions in the right circumstances.
 - iii. Once at a Table, the peer-to-peer environment substantially changes men's tendencies toward help seeking, leading them to be more comfortable and able to reach out when feeling stuck or troubled.



- iv. The process of outreach and sustained engagement is of value to the men's wellbeing even when it does not lead to the man joining a specific program.
- v. An invitation to serve others and be served is more appealing than an opportunity to simply seek help.

3. Efficient workforce deployment utilising a local community led model;

- a. With 4.6 FTE as of December 2021, The Men's Table organisation has been able to launch 48 Men's Tables and sustain them over their first 1 - 3 years so far.
- b. Of the community of over 500 men, more than 15% of the men are contributing voluntary services to support other men with preventative men's mental health
- c. The leverage effects of these numbers reveal that within The Men's Table model, 1 FTE is;
 - i. enabling over 100 men to be served with enduring support; and
 - ii. catalysing over 40 volunteers to contribute to men's mental health outreach and care

4. A plan for national scaling;

- a. Refer attached: The Men's Table 3 year National Expansion Plan
- b. The Men's Table is an economically sustainable and low cost model. With each Table costing approximately \$ 20,000, equating to less than \$ 2,000 per man, this is a small investment to mitigate against the massive costs of addressing depression, suicide and other negative impacts.

Budget - in detail; National Expansion plan; 1st July 2022 - 30th June 2023

Activity	Detail/ Notes	Budget
Staffing	Continuation & expansion of FTE Expansion of Regional Co-Host Team in NSW/ ACT, Vic, WA, SA/NT, Qld & Tas. Expansion of National Table Program support team	\$730,000
Expenses; Table program field operations	Expenses required to support delivery of the Table growth program including travel and accommodation, local marketing/engagement initiatives including social media	\$ 75,000
Expenses - Project Management and Table Expansion infrastructure	Support for resource and staffing growth; IT & project management; Management, mentoring, training; Governance & regulatory	\$ 100,000
Expenses - Overhead and Administration	Finance, HR, Continuous Improvement, Business Development, Marketing, Insurance, Other Costs	\$ 95,000
	Total	\$1,000,000

Year 2 and 3 continuation of funding 2023/24 & 2024/25

After a successful acquittal of the 2022/23 funding, The Men's Table would look to further expand the number of Tables across Australia with subsequent funding from The Department of Health and will also look at other co-funding opportunities.

Testimonials and case studies

"I shared something with my Table last month that I've never shared with anyone else." - Peter, MT2

"I keep coming back to the Table each month because of the developing friendships and the increasing instances of men 'opening up'." - Bob, MT11

"This is a safe zone. What gets shared here stays here. Guys normally only share openly when they're pissed, but here we're allowed to be open. You can see we have similar issues, similar problems." - Harry, MT7

"The men at my Men's Table have helped save my mentality through difficult and dark times concerning family, business and relationships. The group of 12 really diverse guys has also helped me to overcome the isolation that afflicts so many men after life-changing events." - Phil, MT1

"This is my only opportunity to share my issues at this level and not feel alone. This sharing makes me happy" - Norm, MT3

"The Men's Table helps me get things off my chest in a non-judgemental space. I can expunge without fear of retribution." - Derek, MT4

"The Table is helping our men to move from transactional to emotionally connected relationships." - Steve, MT6

"When everything feels like it's going to hell around me, one constant for me is The Men's Table. There, I'm heard, I'm seen, and I'm helped if I ask for it. I'm trusted with what's going on for others and there's accountability amongst close, constant and trusted men." - Ed, MT 1

Brock's Story

I was attending my business networking breakfast group one morning when the idea was floated of a Men's Table: a place for men to be able to meet on a monthly basis and share a few personal things that you would not mention to anyone in the world.

As we developed some rules of listening without comment unless invited, the men who were only there to deepen business relationships dropped away. This was when The Men's Table really began to start as we had a committed group of 12 members.

We then started to really introduce ourselves; not who we are professionally or who we are perceived to be, but to really talk about ourselves personally and drop some of the masks we wear, and show a deeper more authentic version of ourselves.

I remember being asked initially how many children I had as a simple question and the emotion welled up inside me. I had always wanted to be a father, however my wife and I at the time were unable to produce a child and then in my fifties I could feel the grief of a life ambition that had drifted away. For this first time at the Table I struggled to speak and my eyes watered as I had never shared this feeling with anyone else in my life, including my wife.

This was a beginning for me to let it go! A place where I was no longer a senior corporate man or a successful small business owner. I began to share things at the Table I would never say even to schoolmates who I had stayed in contact with over many decades. The important point for me was the absolute privacy! It was 'in the vault' of the Table where I could ask for advice if I wanted it. Or just simply share, get things off my chest and drive home after a good meal and a glass of wine – knowing that what was said at the Table remained at the Table. I've left the Table sometimes feeling uplifted, but drained. But afterwards, that offloading has really helped because I'd unburdened myself. It was better than confession, with no judgement!

From when I first joined the Table, my marriage was troubled. By sharing about it I got to move through different ways of seeing what was happening. For a time, I got clearer that I should really give it my all and try to make it work. By having the Table and the monthly opportunity to get real, this helped me make a decision that could have taken me 10 years longer.

*When, later, my new partner was diagnosed with a terminal illness that took her from me in four months, I could let go of my emotions, and cry and sob at the Table without fear. Recently when I found one of my staff had been sabotaging my business I could feel the empathy of the other men, I could say "F***!" and drive home relieved.*

Each and every member has had their own roller-coaster ride. We have seen it all from divorce, losing children, losing partners and parents, to our work or businesses thriving and crashing. There have been a few wins along the way for us all, however, the roller-coaster ride continues.

We all have diverse backgrounds, education, interests, faiths, beliefs and outlooks on the world. I do not agree with all men at our Table all the time, however, this is a very unique space where we get to be the people we are as individuals, irrespective of social standing or life circumstances.

We're now almost nine years on, and if I had to endure on my own the trials and tribulations of what has happened in that time, life would have been much more difficult and I fear would have resulted in me having a much harder outlook than I do today. Instead my outlook is more calm and considered, and I feel privileged to be part of my Men's Table.