

Dear Mr. Reid and Committee,

I would like to respond to your offer to make a submission to the Senate Select Committee on Men's Health. The draft Men's Health Plan comprehensively considers issues pertinent to the overall health of men. Of particular interest to me is the 'priority for action':- better prepared, more involved fathers. I am a Health Educator, working for North Sydney & Central Coast Area Health Service in the Pregnancy and Early Parenting Education (PEPE) Program.

I am a member of a team of eight male facilitators who conduct a two-hour, all-male forum called Father-time, giving fathers-to-be an opportunity to discuss openly any questions, reservations or observations that they may have pertaining to birth and parenting, whilst providing them with some facts and statistics. Included in this is known statistics relating to breast-feeding, postnatal depression and labour.

The forum invites group discussion by introducing the men to six topics relevant to role of the male partner during labour, life and relationships, postnatal depression, support networks, resumption of sexual activity and their expectations of fatherhood. Inevitably discussion ranges beyond the set structure, as questions and observations are contributed by members of the group.

The forum is overwhelmingly endorsed by the male participants - as Evaluations conducted from the Pilot stage in 1998 to this day will attest. The evidence provided by the Evaluations clearly indicates that first time fathers, as well as experienced fathers receive a stated benefit from the forum. Benefits are both quantitative - e.g facts pertaining to postnatal depression, available Services and breast-feeding, as well as qualitative - such as the satisfaction obtained from being given the chance to talk in an all-male forum. Negative feedback regarding the forum is virtually non-existent - again, borne out by the responses on the Evaluations.

Given that the Father-time forum is held in such high esteem by the hundreds of participants who experience it each year, alongside the measurable benefits to those participants, I submit the following observations and suggestions:

Firstly, that the Father-time forum concept be more widely marketed to new and expectant parents, possibly through inter-Agency promotion combined with information via the general media. The effect of this would be to highlight to both females and males that the opportunity for male specific parent education exists within the PEPE Programs. Whilst information regarding the PEPE Program is sometimes made available to women presenting to a medical practitioner for confirmation of a pregnancy, it is my personal experience that a number of couples purport to have not known about the PEPE Program,

and thus the Father-time forum.

Furthermore, whilst I believe it is recognised within Central Coast Health as making a worthwhile contribution to the Parenting Programs, the Father-time forum has not, as yet, attracted the resources by which any formal reviews of the forum can be undertaken at regular intervals, nor Ongoing Professional Development, specific to the forum content, offered to the male facilitators who conduct the forums. An increase in resources directed towards the forum could rectify that shortcoming.

There is, I believe, a case for expanding the forum in order to allow some topics to be more expansively discussed. Just as three examples; (1) the topic on 'Being a Dad' logically falls as the final discussion subject, as it is the culmination of the information that has been shared during the entire forum. More often than not, however, time has caught up with the facilitator and the group and thus a much truncated discussion on hopes, aspirations and achievable goals as a father takes place, just at a time when the group members are fully confident and keen to make contributions to a thorough discourse on the topic. (2) Breast-feeding - or more specifically, the male support role in successful breast-feeding - falls within another subject area. However discussion time, it could be argued, warrants an increase in allocation. (3) Similarly, Postnatal Depression is a topic that is increasingly of greater interest and importance to expectant fathers, and could be dealt with more fully with more time allocated.

Whist the above examples are my own, any formal review conducted, with input from management, clinicians as well as male and female educators would be in a better position to ascertain those areas of greatest need for expansion of time allocation. Likewise, a review could decide as to how increased time allocated to the Father-time forum could best be accommodated.

Father-time is an initiative of Central Coast Health, and has, I believe, been taken up by some other Area Health Services to be incorporated into their own Parenting Programs. Recognition of the forum as a quality template in advancing the knowledge of expectant fathers, with all of the flow-on benefits such education brings to families, arguably warrants marketing the forum as a package to all other Area Health Services nationwide, as well as other Agencies involved in Parenting and Family education. Similarly I perceive benefits to the greater community in the long-term by incorporating part of the forum, perhaps in a tailored format, to High Schools and even Primary Schools.

A now-defunct post-natal Program that afforded similar discussion forums for new parents also returned Evaluations supporting a tangible benefit to both new fathers and mothers. The structure focused around a two-hour discussion of 'gains and losses' for new parents. The

mothers and fathers separated, with the infants staying with the father, and a female and male facilitator each assisted the two groups in discussion topics. The facilitators employed open-ended questions as a means of stimulating responses in order to gauge how the individuals perceived life with a new baby in the house. The two groups recorded their answers on a white board or butcher's paper and then came together for approximately half an hour at the end of the period to compare and contrast answers and discuss the points raised. Regrettably, a Program that in my belief, could have greatly enhanced the knowledge base and support base for new parents, was unable to continue, largely as a result of financial constraints. I am convinced that this type of post-natal group discussion afforded new fathers the opportunity to mix with others in a similar position, as well as, through discussion, 'normalise' many of the challenges they were facing as a new father. Post-natal discussion forums such as the one described would ideally occur at around six weeks post birth, and then again at three-monthly intervals for the first year of birth to derive maximum benefit. In order to be a balanced and relevant program, links to other service providers by referral would need to be in place. An example of this need would be a parent or parents clearly not coping with a baby who wants and/or needs additional assistance.

In essence, men in general, and new fathers in particular have been left short-changed in terms of assistance and education from Governments over several decades. Any assumption that men will not access programs of the nature described above are, in my view, totally invalid. In my experience males of many and varied ages and backgrounds want to expand their level of expertise and knowledge. When considering this in the context of men as enthusiastic, stable and engaged fathers, the flow-on benefits to society generally, and families specifically, is difficult to overstate.

Australian families, indeed Australians per se deserve programs such as Father-time to be well funded, widely promoted and substantially expanded. Men and Fathers healthy in mind and body are a valuable resource in Society and warrant whatever assistance is needed.

Thank-you for the opportunity you have presented to me to highlight, and hopefully advance, an educational forum that I believe is of the highest quality, one that produces measurable benefits, and which could only be further enhanced and developed, by increased resource allocation.

Regards,

Nick Sivertsen
Health Education Officer
Women's Children & Family Health
North Sydney & Central Coast Area Health.