



2013

MEN'S SHEDS IN AUSTRALIA

EFFECTS ON PHYSICAL HEALTH AND MENTAL WELL-BEING

EXECUTIVE REPORT

MEN'S SHEDS IN AUSTRALIA AND THEIR BENEFITS

INTRODUCTION

In order to investigate the potential health benefits of Men's Sheds in Australia, a large scale research project (involving interviews, focus groups and 2,500+ survey questionnaires) was administered in the Winter of 2013.

The research compared Men's Shed members with a similarly profiled non-Shed group of Australian men to test whether there were differences in physical and mental well-being between the groups.

This report contains the summarised findings of the research. For a more detailed examination of these results, please see the full report.

Finding #1 For many, Shed membership comes about following a significant life change.

"When you work you're amongst other men all the time. You may not be happy with your work but you're still amongst other people. You talk about football and have jokes in the shop and grizzle about the boss. But when you stop it all stops. It's a void. [And it's like,] 'What's to do today?' ... People don't realise that when you retire there's a snap off point from all that company"

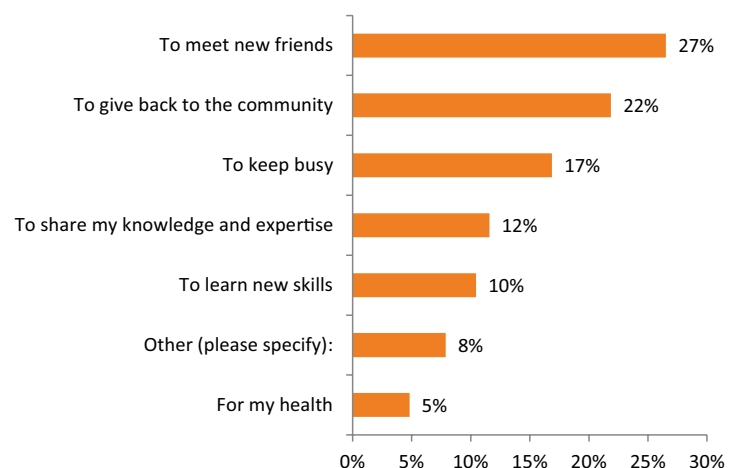
The journey to the shed is often marked by experiences of significant life change – quite often involving retirement, health challenges, changing family circumstances such as the loss of a spouse or divorce or relocation to a new area. The shed environment facilitates coping during this change.

Productivity and the new relationships formed greatly influence feelings of self esteem and confidence. This is also enabled by learning new skills – both practical and social in the shed environment.



Motivations for joining the shed are mostly to do with social interaction with others. Being able to give back to the community is also a core motivator which results in greater purpose and a strong sense of being useful and productive.

Figure 1: Reason for joining Men's Sheds



Likewise, when asked what the greatest benefit of the Shed was, 45% said 'socialising or getting out' and 41% said 'making new friends'.

Finding #2 Men's Sheds are ideally placed to reach some priority populations for health intervention.

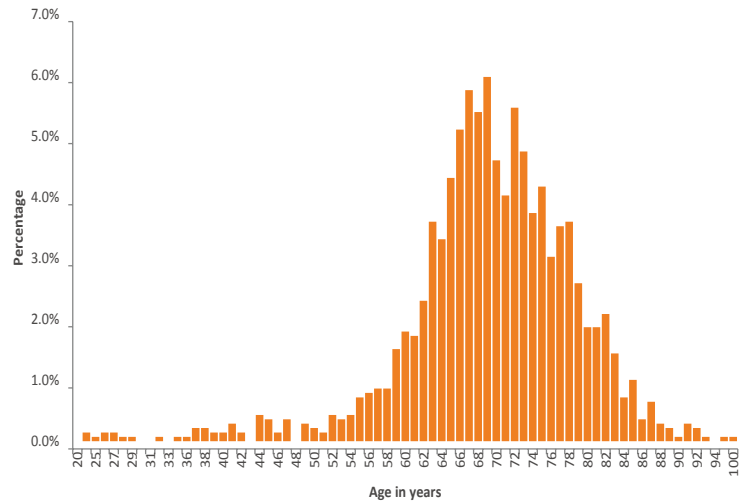
Men's Sheds are in an important position to be able to impact priority health groups, as is indicated by a demographic profile of Shed members. Older men, men from regional areas and men from lower socio-economic areas are all well represented in Men's Sheds.

AGE and GENDER

There are well known and researched differentials in health in terms of sex. Males have a shorter life expectancy, higher mortality from many causes of death and a higher lifetime risk of many cancers and chronic conditions. Males are more likely than females to engage in risky lifestyle behaviour and are more likely to be overweight and obese. Health service utilisation is lower amongst males, particularly services associated with preventative health.

As Men's Sheds are made of from a large proportion of older men there is an opportunity to provide practical health benefits to help older men improve their health.

Figure 2: Age of Shed Members (mean=67)

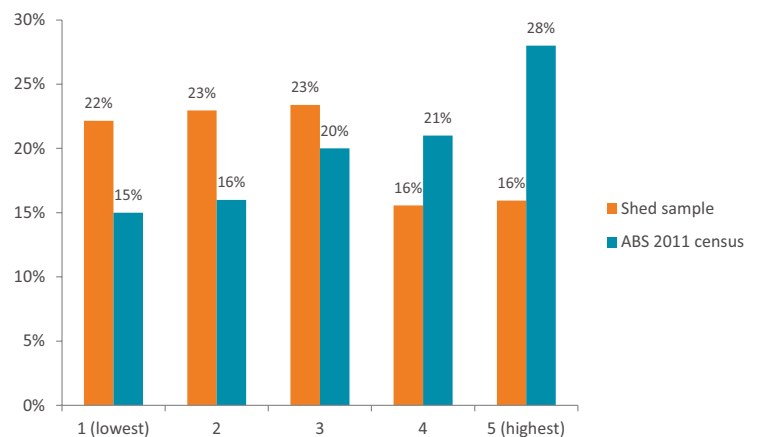


SOCIO-ECONOMIC STATUS

A number of studies have shown that there is an association between socio-economic advantage or disadvantage and health. In general, relatively disadvantaged members of the community live shorter lives and have higher rates of illness, disability and death than those who are relatively advantaged.

SEIFA is a product developed by the ABS that ranks areas in Australia according to relative socio-economic advantage and disadvantage. A total of 45% of Shed members are from areas in SEIFA quintiles 1 and 2 (indicating lower socio-economic areas), a higher proportion than the Australian population in general.

Figure 3: SEIFA Quintile of Shed Members

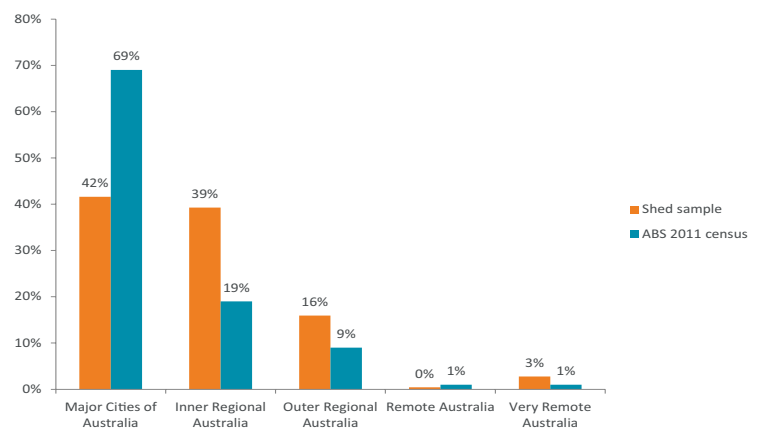


REMOTENESS AREA

Health outcomes, as exemplified by higher rates of death, tend to be poorer outside major cities. The main contributors to higher death rates in regional and remote areas are coronary heart disease, other circulatory diseases, motor vehicle accidents and chronic obstructive pulmonary disease (e.g. emphysema). These higher death rates may relate to differences in access to services, risk factors and other possible environmental factors in regional/remote areas.

A total of 55% of Shed members live in regional Australia. When comparing these percentages to ABS data for the Australian population, we see that Sheds are comprised from a greater percentage of those in regional areas.

Figure 4: Remoteness area of Shed Members



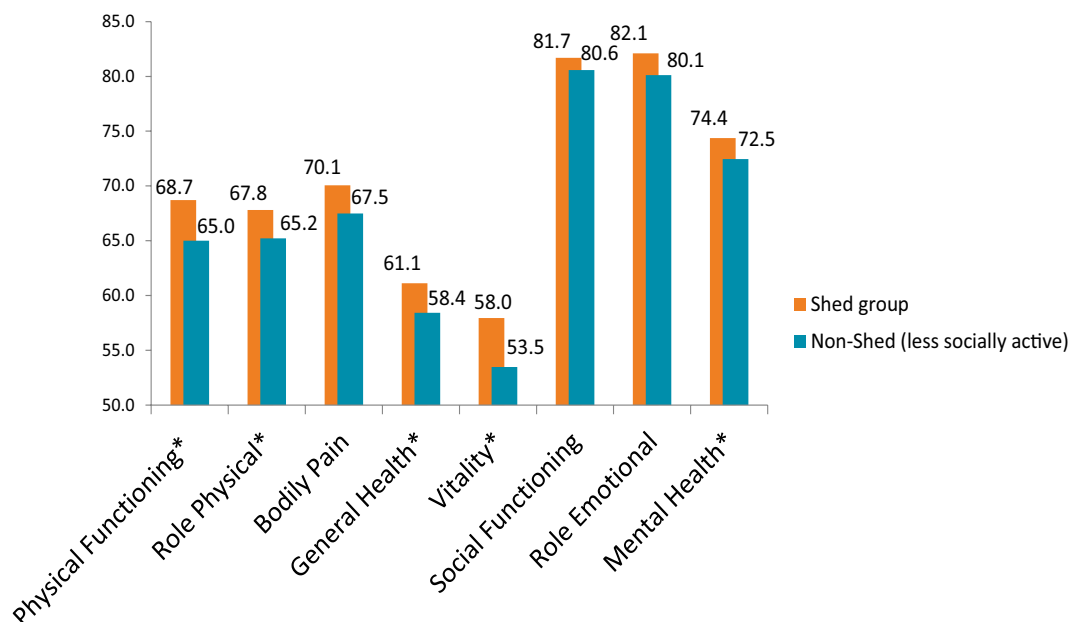
Finding #3 There are clear health benefits associated with Men's Sheds, particularly when compared with less socially active men.

Sheds facilitate health interventions in both direct and indirect ways. Although health benefits are not amongst the main motivations for attendance at Sheds, most members acknowledge that these benefits exist.

Direct means of health intervention include organised health checks, the distribution of leaflets and information and health talks. Indirect health interventions include members "looking out" for one another; the recognition of symptoms and mutual advice. This peer advice is seen as relevant, believable, understandable and endorsed by men in Sheds.

Shed membership appears to be related to health. When comparing Shed members with a similarly profiled non-Shed sample who are less socially active, the Shed members scored significantly higher physical functioning, physical roles, general health, vitality, and mental health than non-Shed members as measured by the SF-12 instrument.

Figure 5: SF-12 scores, Shed vs less socially active non-Shed groups



Mental health and wellbeing is a clearly articulated benefit in the minds of Shed members when discussing the issue in a qualitative context.

In other words, Shed membership positively impacts on the experience of mental health and well-being. How this is described differs from person to person and from shed to shed. Many members were found to attribute one aspect of their experiences to improved mental health overall.

Aspects that are frequently said to contribute to better mental health include better physical health and energy levels, improved confidence, better partner relationships, new friendships, etc.

"The shed gives you a reason to get up. It keeps you mentally active and physically active."

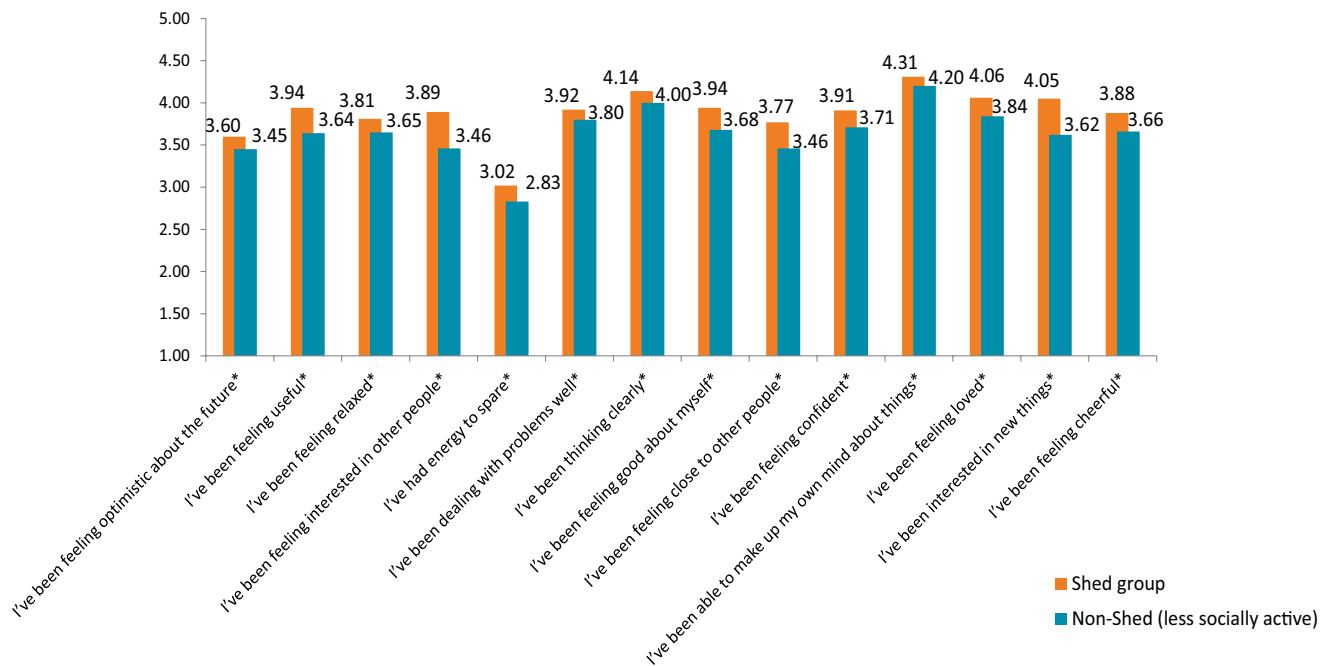
"We encouraged a friend of ours in a similar situation (lost his wife) he did come along for a while, whether it is grief, anxiety we don't know how to deal with these issues ... [but] when doing things you can empathise with things, talk about things you might not otherwise talk about"

The Warwick-Edinburgh Mental Well-being Scale (WEMWBS) is a scale of 14 positively worded items for assessing a population's mental wellbeing.

When comparing the individual scores for these items we see statistically significant differences in all variables between the shed and the less socially active non-shed groups. An overall measure of mental well-being is calculated by summing the individual WEMWBS scores giving a score in the range of 14-70.

The shed group's overall score for mental well-being was **54.3**, while the less socially active non-shed group's was **51.0**.

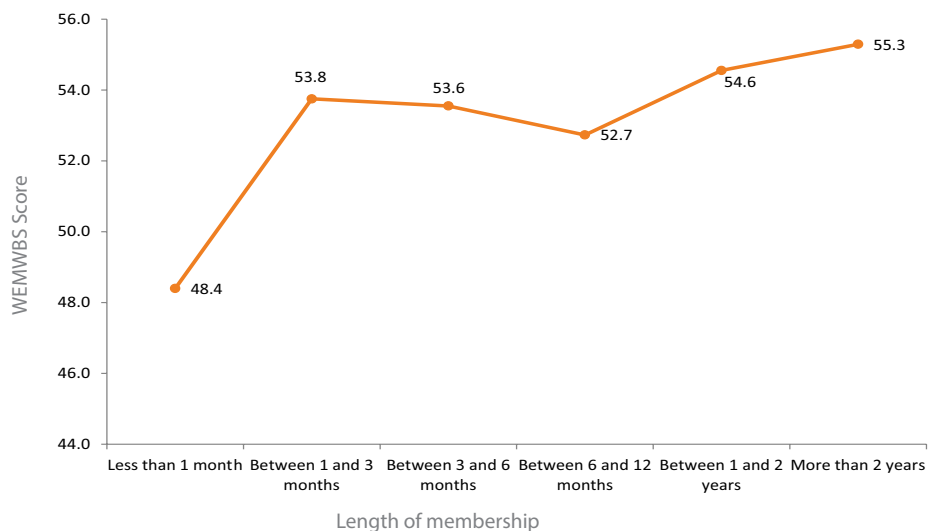
Figure 6: WEMWBS scores, Shed vs less socially active non-Shed groups



*Statistically significantly higher than non-shed score at $p < .05$.

There also appears to be a relationship between length of Men's Shed membership and mental well-being, with overall WEMWBS score increasing with time:

Figure 7: WEMWBS scores and length of Shed membership



Finding #4 Awareness of mental health issues like depression and anxiety is improved through Shed membership

As part of the quantitative survey, awareness of depression and anxiety was measured in order to test whether there are significant differences between the Shed and non-Shed groups in terms of recognition, and hence awareness, of depression and anxiety.

Correct identification of depression and anxiety is seen as indicative of greater awareness of the conditions. Raising awareness of depression and anxiety can help to reduce the impact and the stigma towards these conditions. This understanding is therefore seen as very important in the improvement of mental health.

Although awareness and perceptions around depression are not very different between Shed members and non-Shed members, Shed members are more likely to recognise anxiety.

LOW STIGMA TOWARDS DEPRESSION AND ANXIETY OVERALL

Although stigma towards depression and anxiety was found to be low for both groups, there are indications that Men's Shed members are more likely to consider depression and anxiety as health conditions rather than personal choices.

Men's Shed members are also more likely to socialise with, make friends with and work closely with someone suffering from depression or anxiety than non-Shed members. This is consistent with the strong qualitative reports of the Shed as a safe place where everyone accepts each other and a place where people come to "mend".

MEN'S SHED MEMBERS MORE LIKELY TO SEEK HELP FOR DEPRESSION AND ANXIETY

Men's Sheds appear to have an impact on help-seeking behaviours. Shed members demonstrate a greater willingness to consider a far wider range of sources as suitable to approach for help – beyond the GP, which both groups agree is the main source of help.

Shed members are significantly more likely to think discussing the issue with a counsellor, a pharmacist, a telephone counselling service, a psychologist, a psychiatrist, a close family member, a friend, a priest or other religious person and a social worker would be helpful. It could be said that Shed members are more likely to think that discussing an issue like John's is helpful, no matter with whom, than non-Shed members.

Figure 8: Identification of depression, Shed vs. non-Shed

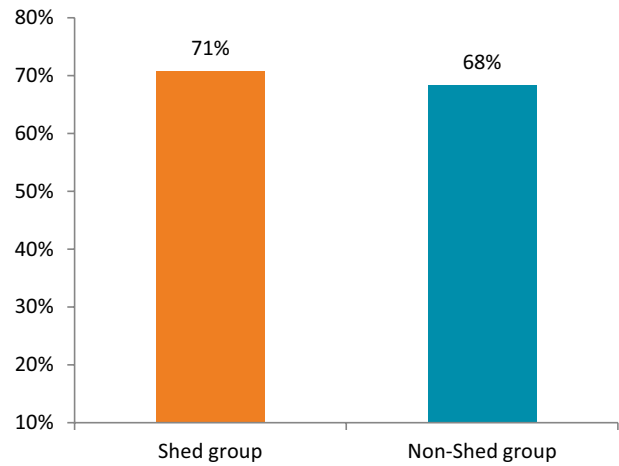


Figure 9: Identification of anxiety, Shed vs. non-Shed

