INTRODUCTION

Men’s mental health and well-being continue to be overlooked in policy and practice despite increasing evidence of men’s distress and its consequences, such as alcohol and drug misuse, gambling and other addictions, body image disorders, aggressive and violent behaviours, and, and suicide. This webinar explored some key issues in male mental health and what needs to happen if progress is to be made. It will contribute to GAMH’s policy work on the issue, including a forthcoming report informing our advocacy programme.

This webinar was organised by Global Action on Men’s Health in collaboration with the Center for Men’s Health Equity at Georgetown University (USA), Equimundo (USA), Canadian Men’s Health Foundation, and the International Journal of Men’s Social and Community Health.

PROGRAMME

• Black men’s mental health – Professor Derek M. Griffith, Founder and Director, Centre for Men’s Health Equity and Professor of Health Management & Policy at Georgetown University (USA)

• Men and trauma – Cody Ragonese, Senior Program Officer at Equimundo: Center for Masculinities and Social Justice

• MindFit Toolkit and digital resources – TC Carling, President and CEO, Canadian Men’s Health Foundation

• Discussion

The webinar was chaired by Steve Robertson, Emeritus Professor of Men, Gender and Health at Leeds Beckett University (UK) and Editor, International Journal of Men’s Social and Community Health. In his opening comments, Professor Robertson pointed out many unmet needs in men’s mental health. Globally, the suicide rate is twice as high in men than in women. Many men attempt to deal with their emotional problems with alcohol, drugs, and other addictions and are often reluctant help-seekers for mental health problems. Masculinity, which leads many men to deny their vulnerability and not to display their so-called ‘feminine’ emotions, does not make it easy for men to address their mental health issues.

There are clear differences in presenting some common mental health problems in men. A number of mental health issues are important for men even though they affect fewer men than women, such as post-natal depression and body image disorders. COVID has also had a major but little-discussed impact on men’s mental health. Professor Robertson stated that there is growing evidence about engaging men in mental health services and programmes. In some countries, Men’s Sheds have played an important role in improving well-being, especially among older men. Movember has been very active in this field. There’s been pioneering work in Denmark on depression in new fathers – they are now routinely screened alongside mothers by health services.

A recording of the webinar can be viewed here.
PROMOTING WELL-BEING IN YOUNG BLACK MEN: MOVEMBER’S ROOTED & RISING COLLECTIVE

Derek M. Griffith

Young American Black men face several historical and contemporary barriers to being mentally healthy, happy, and well. Structural racism and the economic and social context concurrent with the COVID-19 pandemic are among the most important. In the United States, among 15-19-year-old, 20-24-year-old, and 25-34-year-old Black men, homicide, suicide, and legal intervention (being in contact with law enforcement) are the top 10 leading causes of death. Moreover, black males in these age groups die from these causes at higher rates than men and women of other races and ethnicities. And yet, interventions to promote the mental health and well-being of young Black men are few and rarely consider this structural and historical context.

There is a need to mobilize the resources ubiquitous in young Black men’s lives to promote their mental health and well-being, increase access to this population, and reach more of the population with these health promotion messages and tools. The Rooted & Rising Collective is such a program. The Rooted & Rising Collective was funded, designed, and led by the Movember Foundation to promote the mental health, well-being, and self-care of 18- to 25-year-old Black men in the United States. The program aims to develop and implement a program that provides mentoring, education, support, and financial resources to equip 18-25-year-old Black male digital creators with the tools to enhance and grow their businesses without compromising their well-being. The Movember Foundation team also sought to help young Black men who are digital creators learn, practice, and incorporate culturally relevant self-care behaviors that they can incorporate into their lives, and to create digital content that inspires and motivates their audiences to adopt behaviors that will improve their well-being.

The inaugural cohort of 10 young Black men were from the Los Angeles, California (US) metropolitan area. These pilot program participants used their own voices, genres, and forms to produce 20 units of digital content incorporating self-care. When compared with the digital creators’ standard content, viewers of the digital creators’ self-care content were statistically significantly more likely to give more thought to their well-being, have a greater sense of how to engage in self-care, be inspired to improve their own well-being, and believe that self-care is more important for young Black men overall. Viewers of the self-care content were 2.5 times as likely to intend to engage in self-care than those who watched other content from the digital creators. When the digital creators included self-care content, viewers found their content more relatable and interesting than when they did not include self-care content. Knowing that the digital creators prioritized their own well-being increased viewers’ interest in the digital creators’ content. Digital creators’ self-care content received more likes, comments, and shares than their standard content.

The success of the Rooted & Rising Collective is indeed promising and warrants more research. Future efforts to promote well-being and intentional self-care practices among young Black American men should more explicitly consider how structural racism may shape their mental well-being and need for self-care, particularly social support and social connectedness. Explicitly attending to anti-Black gendered structural racism will help them recognize, understand, and mitigate the myriad structural and socio-political threats to their health and well-being.

Dr. Derek M. Griffith is a Founder and Co-Director of the Racial Justice Institute, Founder and Director of the Center for Men’s Health Equity, and Professor of Health Systems Administration and Oncology at Georgetown University. Trained in psychology and public health, Dr. Griffith’s program of research focuses on developing strategies to improve Black men’s health and to achieve racial, ethnic and gender equity and justice in health and well-being. Dr. Griffith is Vice Chair of Global Action on Men’s Health, and on the editorial boards of AJMH and IJMSCH. He is a contributor to and lead editor of Men’s Health Equity: A Handbook (Routledge, 2019), and author of over 150 peer-reviewed manuscripts.

Author Note
Derek M. Griffith (ORCID Number: 0000-0003-0018-9176) has no financial disclosures. Correspondence concerning this article should be sent to Derek M. Griffith, PhD, Professor of Health Management and Policy, School of Health, St. Mary’s Hall, 3700 Reservoir Road NW, Washington, DC 20057, Georgetown University, Email: derek.griffith@georgetown.edu, Phone: (202) 687-0813

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MEN AND TRAUMA

Cody Ragonese

Much of the international attention surrounding war and violence concentrates on civilians – mainly women and children. Although necessary, this narrative leaves out often untold stories of trauma and loss from combatants, who are often male. For centuries, boys and men have been targeted for war recruitment, socialized to fight, and encouraged to remain resilient in the face of trauma and adversity.

Equimundo’s new “Making the Connections” report explores the specific gendered aspects of male trauma and adversity, including the collective vulnerability of boys and men to such experiences and their ability to cope with trauma healthily and sufficiently.1 Through this report, the authors examine how internalizing a subset of masculine norms simultaneously reduces men and boys’ ability to effectively cope with trauma. Equally important, it defines how support services are offered (if any are offered) to men and boys who have experienced trauma.

On the battleground, traumatic events such as witnessing, causing, or experiencing death or injury have a wide range of implication on men and boys’ mental and physical health. In addition to observing PTSD, soldiers have found an increased risk of depression, chronic pain, anxiety, and other behavioral disorders, often leading to substance abuse and suicidal ideation.2

Consistent with notions of hegemonic masculinity, honor, aggression, and heroism are central to many interpretations of manhood globally. For many, the role of protector and defender – whether it be for a family, ethnic group, country, or ideology – is the epitome of masculinity. In general, men who ascribe to hegemonic masculine norms are less likely to acknowledge trauma and seek and engage with mental health treatment.3 Within militaries and armed groups, these masculine norms are omnipresent and exaggerated in all aspects of service. Perceived weakness by peers and superiors plays a role in a male service member’s unwillingness to seek care and treatment.4,5

The report contains various recommendations to address the absence of a trauma-informed masculinities lens on research, policy frameworks, and healthcare service provision. In general, we must highlight trauma and adversity experienced by men and boys and intentionally address their specific needs through a lens of masculinities.

Cody Ragonese is a Senior Program Officer at Equimundo Center for Masculinities and Social Justice. He has been the lead author of two reports in Equimundo’s Making the Connections series — one detailing links between masculinities and men’s health behaviors and the other exploring its connections with male’s ability to cope with trauma. In this role, he partners with organizations to design, implement, and evaluate gender transformative projects aimed at fostering critical reflection on masculinities and gender norms. He leads Equimundo’s work in the United States, including a comprehensive sexuality education program designed for older adolescents in Washington DC. He also manages several violence prevention projects working primarily with fathers and their sons in Jordan and the Kurdistan Region of Iraq.

References
Both confidential and free, the online MindFit Toolkit also includes an anxiety screening tool where men can anonymously complete questions and receive a score with suggested next steps (which might involve counselling offered through TELUS Health MyCare™). By allowing men to use the tool on their own time and in their own place, we can help hard-to-reach, underserved men with mental health issues. We built the MindFit Toolkit to be a barrier-free resource available to all Canadian men — no matter where they live, what they do or how much they have. Nothing should stand in the way when mental health is on the line.

CMHF believes with quality advice, accessible tools, and motivation, every man can make changes to be healthier. Healthy men make for healthy families and healthy communities.

TC Carling is the President & CEO of the Canadian Men’s Health Foundation (CMHF), a national, non-profit, providing information, resources, and motivation for men and their families to lead healthier lives. Under TC’s leadership CMHF is building an integrated approach to men’s health that involves both mental and physical health. He and his team are committed to connecting mind and body health together to deliver programs and services, giving men a full slate of resources to improve their well-being. Previously, TC has gained valuable leadership experience holding executive roles with Canucks Sports & Entertainment, GSL Group, and most recently as President & CEO for Fortius Sport & Health. He also has experience in the non-profit sector serving on the Board of Directors for GAMH, Anxiety Canada, Big Brothers of Greater Vancouver, and the CMHF.