

## Ireland's National Men's Health Training Programme

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### Background

- Central to the increased focus on men's health have been calls for a greater provision of gender sensitised health related services for men<sup>1-3</sup>.
- Engaging men in health related services, however, poses unique challenges to service providers who often see men as 'hard to reach'<sup>4-6</sup>.
- Consequently, in order to reorient health and social services to effectively engage men, services providers need to be supported to adopt gender sensitive work practices.
- 'ENGAGE', Ireland's National Men's Health Training programme, is a comprehensive 1-day training that aims to increase participants' understanding of best practice in engaging men with health and social services and ultimately seeks to address what many would regard as the current deficit in gender sensitive service provision for men.

### Overview of the Implementation of Engage

- The development and delivery of ENGAGE was informed by the *Diffusion of Innovations Theory*<sup>7</sup>.
- In order to promote maximum diffusion of innovative gender sensitive work practices a 'Training of Trainers' [ToT] cascade model of delivery was adopted.
- A plan for *sustaining* the diffusion of ENGAGE included a) project design and implementation factors, b) factors within the organisational setting and c) factors within the broader community (of Trainers) environment<sup>8</sup>.

### Process Inputs

#### Development

##### Partnership Formation:

- Institute of Technology, Carlow
- Men's Development Network
- Waterford Institute of Technology
- Health Service Executive

##### ENGAGE Team:

- Facilitators (n=4)
- Editor (Men's Health Forum)
- Coordinator
- Researcher

##### Direct Funding:

- €35,000

##### Pilot Phase

#### Delivery

##### Recruitment of Trainers:

- Identification of key organisations
- Remit for training service providers
- Facilitation experience
- Knowledge of men's health
- Geographical spread

##### Training of Trainers:

- Two, two day residential training blocks, one month apart
- Experiential learning and interactive methodologies
- Workshop development and co-facilitation
- Certification

##### Resources: Online and USB Key

#### Maintenance

##### Facilitators ongoing reflective practice and adaptation

##### Technical Assistance for Trainers:

- Facilitator support for delivery
- Appointment of Mentors to support delivery
- Ongoing communication from ENGAGE Coordinator
- Phone call from Facilitator
- Annual Trainer meetings
- Online discussion forum
- Offline networking
- Updated online resource repository

##### Evaluation (Process & Outcome)

### References

- <sup>1</sup>Department of Health and Children (DOHC) (2008). *National Men's Health Policy 2008-2013. Working with men in Ireland to achieve optimum health and wellbeing*. Prepared by; Richardson N, Carroll P. Dublin: Department of Health and Children.
- <sup>2</sup>Department of Health and Ageing (2010). *National Male Health Policy. Building on the Strengths of Australian Males*.
- <sup>3</sup>European Communities, Directorate General for Health and Consumers (2011): *The State of Men's Health in Europe*.
- <sup>4</sup>Wilkins and Savoye (eds) (2009) *Men's health around the world: a review of policy and progress across 11 countries*. Belgium: European Men's Health Forum.
- <sup>5</sup>Caperchione, C.M., Vandelandotte, C., Kolt, G.S., Duncan, M., Ellison, M., George, E. et al. (2012) What a man wants: understanding the challenges and motivations to physical activity participation and healthy eating in middle-aged Australian men. *American Journal of Men's Health*, 6(6), 453-61.
- <sup>6</sup>Carroll, P., Kirwan, L. and Lambe, B. (2014) Engaging hard to reach men in community based health promotions. *International Journal of Health Promotion and Education*, 52(3), 120-30.
- <sup>7</sup>Rogers, E.M. (eds) (2003). *Diffusion of Innovations. 5th Edition*. New York: Free Press.
- <sup>8</sup>Shediac-Rizkallah, M. C. and Bone, L. R. (1998) Planning for the sustainability of community-based health programs: Conceptual frameworks and future directions for research, practice and policy. *Health Education Research*, 13, 87-108.
- <sup>9</sup>Dilley J.A., Reuer J.R., Colman V., Norman R.K. (2009). Steps to a Healthier Washington. From making pamphlets to making policies: results from a collaborative training to increase knowledge, motivation, and self-efficacy for achieving public health policy and systems change. *Health Promotion Practice*, 10(2), 138S-145S
- <sup>10</sup>Pommier J., Guevel M-R., Jourdan D. (2011). A health promotion initiative in French primary schools based on teacher training and support. Actionable evidence in context. *Global Health Promotion*, 18(1), 34-38.



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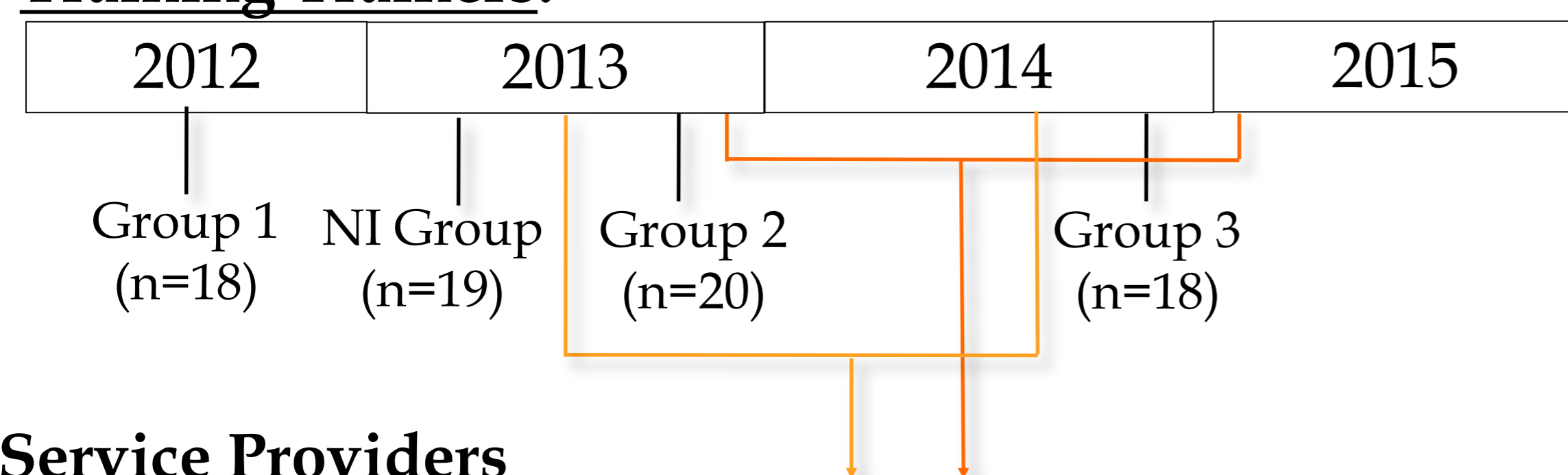
### Outcome Evaluation: Research Aims

The dual aims of this research were to investigate the;

1. Effectiveness of the 'Train the Trainers' cascade model of training in terms of the 'reach' of the Trainers training.
2. Impact of the Trainers' training on frontline service providers.

### Methodology

#### Training Trainers:



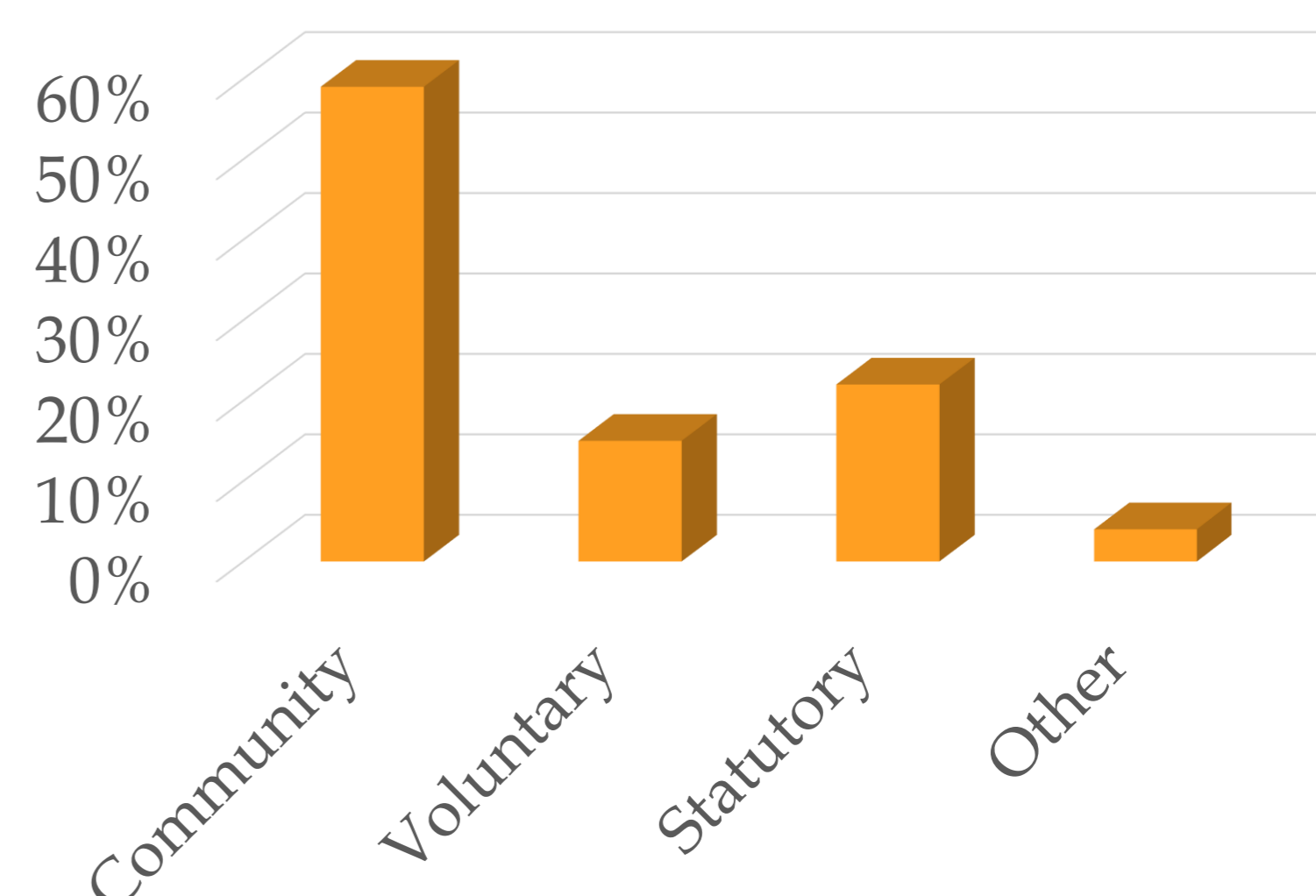
#### Service Providers

##### Evaluation:

Pre and Post Surveys (n=297)

5 month post surveys (n=129)

#### Service Provider Organisation:



### Results [To Date]

#### Logic Model and Indicator Results

(Adapted from Diley et al., 2009<sup>9</sup> and Pommier et al., 2011<sup>10</sup>)

Service providers who answered good-excellent	Baseline - Pre Training	Short Term Outcomes - Immediately Post Training	Intermediate Outcomes - 5 Months Post Training
Knowledge/ Belief	32%	79%	71%
Skills/ Capacity	48%	74%	72%

#### Long Term Outcomes - not measurable in this study

- Cultural change in the provision of services for men
- Gender competent services
- Greater use of services by men
- Reduction in health inequalities experienced by men

Between May 2013 to August 2014, 26 1-day ENGAGE Trainings were delivered by Trainers to 300 front line service providers. Attendees of these Trainings consented to participate in this study.

### Conclusions

1. ENGAGE is reaching both male (43%) and female (57%) service providers aged 18-74 years (median 45 years), with the majority (61%) working in community organisations.
2. Service providers who attended a 1-day ENGAGE Training improved their knowledge in respect to men's health and skills in engaging men therefore improving their self efficacy in relation to engaging men in health.

### Further Information:

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