KEEPING FAMILIES HEALTHY

Every family goes through stressful times occasionally. These challenges while testing resilience can also make them stronger. Maybe you’re dealing with a major life change, the kids are being a handful, your relationship is going through a rough patch or maybe a family member has developed a mental health problem. Learning different ways to cope with stress as a family and better ways to communicate with each other are good strategies for getting things back on track.

In sickness and in health...

The original Latin word, “famuli”, referred to the servants or slaves of a rural estate. Dictionaries provide over twenty definitions of “family”, ranging from blood-relations living together, through genetically similar plants, to your friendly local Mafia. John Howard famously presented the ideal family as husband, wife, 2.3 children, Holden Commodore and a white picket fence. Today anyone who is special to us can be recognised as our family. These are also the ones for whom we care the most when they run into troubles.

The impact of mental illness on families

We are all aware of the importance of families in providing support to someone experiencing a mental health injury or long term illness. However, what is often less recognised, is the impact that living with, or caring for, these individuals can have on those around them. The carers not only have to deal with the pain of seeing a loved one suffer, they also need to deal with the impact of symptoms like social isolation and anger.

Happy Families

‘Happy Families’ was a favourite card game to play with children, back to the 1950s when I was one myself. In that cosy world the card families were a mother and father with a boy and a girl, each family defined by the father’s occupation, like ‘Mr Bun the Baker’ with a Mrs, Master and Miss ‘Bun the Baker’. You swapped cards to complete the four-card family ‘suits’.

WANTED MHPE Volunteers! Turn to page 32 for information on the MHPE program.
Welcome to the Family Issue

I was surprised to find when I looked back over previous issues of the magazine that we hadn’t devoted a complete issue to the family. We all know that a family can come in many forms: they can be fascinating – especially to an outsider, frustrating – especially to an insider, and considered good fortune if you’re part of a loving and supportive one.

As a key structure within our society, ensuring families get the support, education and information they need is a major concern of government, hence why it features prominently at budget time. In terms of health promotion, a family can provide so many benefits, but it also can present challenges that can impact on our health.

Did you know, since 2010 over 24,000 people have transitioned from regular ADF service to civilian life?

Currently there is no data regarding the extent of mental, physical and social health problems experienced after transition. If you have transitioned from regular ADF service since 2010, please consider volunteering so that services can be developed to meet your needs.

To get involved visit www.transitionwellbeing.adelaide.edu.au and click “Registration”.

Naomi Mulcahy
The Committee would like to thank Dr Justin Harding for his support of the MHPE Magazine, and welcome Anthony Hoare and Margaret Bennett who have joined the Committee for a two, and one-year term, respectively.

Veterans’ Health Week 2015

A big thank you to all our MHPE volunteers for their assistance during Veterans’ Health Week (VHW) 2015. This year the theme was Mental Wellness, and VHW is ‘the event’ on the MHPE calendar. In this issue we profile some of the events and activities that were held around the nation.

Finally, on behalf of the MHPE Magazine Editorial Committee, thank you for reading the magazine, and we hope that you’ve found the articles throughout the year to be a good read, informative and useful.

Best wishes for a safe, healthy and happy holiday period.

MHPE Magazine Editorial Committee Membership

Naomi Mulcahy DVA (Editor)
Dr Warren Harrex, DVA Senior Medical Adviser
Dr Stephanie Hodson, CSC, DVA Mental Health Adviser
Chris Jones, DVA
Dr Justin Harding, DVA (outgoing member)
Anthony Hoare, DVA National Health Adviser (incoming member)
Margaret Bennett, VVCS (incoming member)

MHPE Magazine and Reproduction of Content

Just a reminder to our readers, if you would like to include an article that’s appeared in an edition of the magazine in your own publication, please contact the editor to confirm if there are any restrictions on the re-publication of the material.
Every family goes through stressful times occasionally. These challenges while testing resilience can also make them stronger. Maybe you’re dealing with a major life change, the kids are being a handful, your relationship is going through a rough patch or maybe a family member has developed a mental health problem. Learning different ways to cope with stress as a family and better ways to communicate with each other are good strategies for getting things back on track.

• **Make time for your family**
  Life can be very hectic and it’s all too easy to take those closest to us for granted. It’s important to prioritise your family even when it’s hard to find the time. Make it a habit to include the family in everyday activities, such as preparing meals and eating together. It’s important to remove distractions, for example mobiles and the TV, so you can have uninterrupted time talking with your family over a meal or after work.

• **Keep communication lines open**
  Whether it’s tackling big issues or just dealing with the day to day stuff, keep talking! Sharing thoughts, feelings and problems with those close to you helps to keep relationships strong and shows your support for each other.

• **Plan healthy and rewarding activities together**
  Sharing important and meaningful activities can help families stick together. Those activities can easily fall by the wayside when families are under the pump. If your family is going through a stressful period, plan some rewarding activities together – they don’t have to be fun, just important for your family. If the activity is full of laughter, all the better.

• **Stay connected to friends**
  It might seem odd but a great way of improving relationships within your family is to make sure that your outside relationships are healthy as well. In the same way that friends are an important source of support for individuals, communities are important supports for families. Get your family involved in school, sporting or other community groups.

• **Work out what’s important**
  If you’re stressed and overwhelmed, re-evaluating what’s really important to you in the short term might allow you to take some pressure off your family. Talking through what’s important and what can wait gives you breathing room and a sense that you’re working together.

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**Information and support**

The At Ease portal provides information about mental health, resilience and wellbeing as well as information about mental health disorders and their treatment. It will help you understand the effects that mental health problems have and, importantly, what you can do to manage and recover. Visit: [www.at-ease.dva.gov.au](http://www.at-ease.dva.gov.au)

• **Take time to show affection**
  Put aside some time to show affection to your children and partner. Physical affection such as hugs and kisses are important, but affection can also be expressed by talking and listening and doing things together.

• **Spend time with or keep in touch with extended family members**
  A family outing to visit grandparents, aunts and uncles or other relatives is an opportunity for the family to get together and spend some quality time with each other. If visiting is not possible, keep in touch by writing, emailing or telephoning (and get the whole family involved).

• **Look after yourself**
  Make sure you take the time to look after yourself by staying physically active and eating well. Healthy individuals make up healthy families.

If you need assistance, the Veterans and Veterans Families Counselling Service (VVCS) provides free and confidential counselling support and advice. Call 1800 011 046 or visit [www.vvcs.gov.au](http://www.vvcs.gov.au)
We are all aware of the importance of families in providing support to someone experiencing a mental health injury or long term illness. However, what is often less recognised, is the impact that living with, or caring for, these individuals can have on those around them. The carers not only have to deal with the pain of seeing a loved one suffer, they also need to deal with the impact of symptoms like social isolation and anger.

Some insight into the impact can be seen in the results of the Vietnam Veterans Family Study. This study examined the physical, mental and social health of Vietnam veterans and their families, covering a broad range of health outcomes. It included over 27,000 participants, included Vietnam veterans, partners and their children, as well as ADF personnel and families of the same era who did not deploy to Vietnam to provide a comparison group.

Overall, the study found that the majority of sons and daughters born to Vietnam veterans are leading healthy and productive lives. Importantly, however, it also found that the families of Australia’s Vietnam veterans are more likely to have considerable emotional, physical, and social issues when compared to families of those who served in that era but did not deploy. A key factor of this intergenerational effect was the impact of living with posttraumatic stress disorder.

This research highlights the importance of the Veterans and Veterans Families Counselling Service (VVCS) – a legacy of the advocacy of the Vietnam Veteran community – which provides free and confidential counselling and support for war and service-related mental health conditions, but also for relationship and family matters that can arise due to the unique nature of military service.

Similar to the Vietnam cohort, we know most families of serving or ex-serving personnel with a mental health injury or illness experience can cope if they have the support of good community connections, strong relationships within their extended family, and a balanced family life that includes many enjoyable activities. What we need to understand now is how we can enhance this support so that it is available when needed.

The Transition and Wellbeing Research Program is currently underway and is Australia’s largest and most comprehensive research program into contemporary military service. A key focus of the Family Study within the program is on establishing the family protective factors that need to be strengthened as well as the barriers to care that need to be addressed (see www.Transitionwellbeing.adelaide.edu.au).

We already know that mental health conditions can directly affect family life when there is difficulty in expressing feelings and emotions, which in turns leads to partners, family members, and friends feeling ‘pushed away’ and rejected. Mental health injuries and illness can also lead to reduced participation in a range of activities, making it difficult to have a normal family life. The partner in particular, is often left with the full burden of running the family, with considerable time spent dealing with the injury or illness at the expense of the needs of the family.

If as a veteran, partner or child of a veteran you are aware your relationships and family life are struggling, consider talking to your GP, contacting VVCS on 1800 011 046, or visit the ‘At Ease’ portal (at-ease.dva.gov.au). If you want some tools that might help relieve some pressure, explore the tools in the High Res (High Resilience) section of the portal. More information on these tools is available in the article New eMental Health Products.

All these resources will remind you that the most crucial issue is that you take some time to reach out to friends and other supportive people in your community. In turn, if you know of someone in your community who is a carer or child of a veteran with a mental health injury or illness, consider making contact and seeing if you can provide some practical or moral support.

Dr Stephanie Hodson, CSC
DVA Mental Health Adviser
Sunday 6 September has come and gone – and many of us lucky enough to be fathers will have hopefully enjoyed the day. As our children grow up, we’re much less likely to get presents of socks and jocks – and instead get taken out to lunch or dinner with our partner and adult children.

While enjoying Father’s Day lunch with my family at a restaurant in the historic town of Gundaroo (about 30 minutes’ drive from Canberra), I paused to think about our veterans and in particular, our Legacy families where because of service-related death, the father is absent from these commemorative family events which so many of us take for granted. The impact of service-related death and disability can affect families for a very long time.

On a recent trip to Europe, I took the opportunity to visit the Menin Gate at Ypres in Belgium, where my great uncle, Tom Gardner, is listed amongst the Australians with no known grave. He was killed in his prime in 1917, was never married, and as far as I know, had no children.

When I was small and growing up in Queensland, I had seven maiden great aunts (my father’s aunts), all of whom lived into their 90s. I just accepted this as normal (doesn’t everyone have seven maiden great aunts?), until I realised in my mid-teens that all these strong, vibrant professional women had boyfriends who were killed in WW1 – or who came back as mentally damaged men. Their relationships foundered and none of these women ever married – let alone had children. No Father’s Day celebrations here.

Occasionally in my 40 years of medical experience, I’ve been asked “How best can a father love and support his children?” Apart from the obvious things such as financial support, education, housing, clothing et cetera, a wise person once told me that he should “love their mother”. While we know that there are families where this cannot occur, and many modern families today undergo traumas, dislocation, job uncertainty, chronic ill-health and other issues — but if a man really loves his family, then almost everything can be managed. And we’re lucky to live in a society with the safety nets in place to help families survive and prosper.

DVA understands and acknowledges this through a range of care and support programs including the Veterans and Veterans Families Counselling Service, educational support of our veterans’ dependents, and more recent initiatives, such as the new apps that are available for mental health and resilience (High Res), and alcohol management (The Right Mix).

At the end of the day, our three score and ten years (plus maybe another 10-20) on this earth pass very quickly. But our family legacy continues. Hopefully all our current and ex-service fathers see this as one of the very few enduring attributes of our existence, and a real ongoing contribution to the health of their families and our society.

Dr Ian Gardner
DVA Principal Medical Adviser
The benefits of all creatures great and small

There is a reason that the internet is full of pictures and videos of our pets, including everything from cats wearing costumes to dogs playing sport. These much beloved animals help fulfil some basic human needs that contribute to our wellbeing.

Every day we receive messages about how we can improve our wellbeing. Positive psychology research tells us that three key messages we should be paying attention to are: engaging in pleasurable activities, having purpose or meaning in our lives and being socially connected. Having pets in a family can help meet some of these core needs. Some pets are extremely social and provide a feeling of connection. Importantly, the responsibility of owning a pet (even the less social reptiles) provides a sense of purpose and meaning. Many pets require exercise and have the added benefit of getting their owners off the couch and out into nature.

A study lead by Dr Allen McConnell in the United States and titled “Friends with Benefits: On the Positive Consequences of Pet Ownership” found that pet owners were happier, healthier and better adjusted than were non-owners.

It is important to remember that while there are huge benefits to owning a pet, they are not treatment for individuals recovering from either physical or mental health injuries. In the case of mental health disorders, treatment involves learning behavioural and cognitive strategies to improve emotional control. Owning a pet can assist to motivate an individual to practise the skills learnt, but should only be an adjunct to evidence based treatments.

In short, pets can be therapeutic, but are not therapy. It is also worth remembering that owning a pet is a major responsibility and that someone with a physical or mental health issue may need assistance in their care. With this assistance, however, pets can provide important connection and meaning in an individual’s life.

The right pet in a family will not only contribute to wellbeing but will become a fundamental part of the family unit. To find out more about the benefits of pet ownership and what might be the best pet for your family or as a companion animal, visit www.rspca.org.au

Dr Stephanie Hodson, CSC  
DVA Mental Health Adviser
Like many of my friends, I grew up in a military family, but didn’t know any different upbringing from my other mates.

My Dad graduated from RMC and joined the Royal Australian Engineers. He had a twelve month tour in Vietnam and, on his return, met and married my Mum.

I came along a few years later and shortly after Dad was posted to Papua New Guinea for two years, which is where I apparently gained my penchant for not wearing shoes where I can avoid it. Two years in Canberra followed before another overseas posting, this time to the United States.

To the five year old me this was just a part of life, moving where Dad’s job went. I knew about the Army to the extent that they got to shoot guns and drive tanks, but “Daddy didn’t do that anymore”. The reality of war was so far removed from the romanticised idea a five year old had of “Daddy shooting guns to protect Australia”.

By the time we moved to the US my folks had four kids in tow. One day my Mum should write her story about a 20 hour plane ride with four children under seven. Now that would be a good read!

After the US, Dad was posted to Canberra, and Mum and Dad planned to remain here once Dad resigned from the Army. And here we remain, 32 years later. As I reflect now on those early years, packing up and moving every two years was an adventure for a young ‘Indiana Jones worshipper’ such as myself. But Mum spent our formative years without the support network of her family, something which my wife and I are very lucky to have with both sets of parents offering support to us in the same city.

As a kid I never noticed this. I went to school, dinner was always cooked, had clothes and the latest Star Wars toys, and could never ask for anything. We were a perfectly normal family. And this was only possible with two loving and dedicated parents.

When we settled in Canberra, Dad started studying at night to prepare for life after the Army. Through all this, he coached our cricket teams and he and Mum took us to our rugby, netball and basketball matches. Despite our many demands on his time, Dad earned his qualification and was able to start his professional life immediately after resigning. To me, I didn’t notice any difference. Although I still remember saying to him “Good night Major Jones” and waking the next day to greet him with “Good morning Mr Jones” with a smile on my face. Dad smiled too.

To me he was still Dad, he just had a different job now.

The following year Dad went to Sydney to participate in the Welcome Home Parade for the Vietnam Vets. I am not sure I appreciated the significance at the time. Yeah, pretty sure I didn’t.

Life went on, we kids were growing up and moving into high school, Dad was still Dad and Mum was still Mum. Of course, as teenagers your relationship with your parents changes, but most of that is to do with the woe-be-me teenager, let’s be honest here. To be fair, I could be a tiny bit difficult on the very rare occasion. (I think I just heard my parents choke on their coffee with laughter reading that…)

But through it all my parents remained committed to raising their family in the best way possible. There were small things I noticed about Dad which I attributed to his service, such as his morning routine never faltered to the minute, and woe betide anyone who got in the way of that! But to me he was just like my mates’ dads, even the ones whose dads hadn’t served.

I am 39 now, the same age as when Dad resigned from the Army, and I have a beautiful wife and two beautiful daughters of my own who adore my Dad, their ‘Dadda’. I see now the sacrifices my parents made to raise me and appreciate and love them even more. But I also appreciate the difference an Army life meant for them. As I mentioned before, Mum was without a vital support network for much of her children’s younger years. I couldn’t imagine going through my daughters’ early years without Mum and Dad or my wife’s parents.
here to help. Yet Mum did it with four children. How can I compare with that?

And Dad? I count myself lucky that he came home from Vietnam in one piece, both physically and mentally. I also count myself lucky that the remainder of his service was in peace time. I cannot imagine the emotional hardship that operational service places on our servicemen and women and their families. Being away from my daughters for two days is hard enough.

I think now of my Grandma’s family. Grandpa served in World War 2 and was away on and off for nearly four years before he married Grandma – in his uniform, no less. They were the only clothes he owned! Grandma also had four brothers, three of whom served in WW2. All three returned, although two had been prisoners of war and the third wounded, thought to be dead, only to be rescued the next day.

So I admit I am one of the luckier ones. Dad’s service and Mum’s time away from her family did not affect my upbringing. Even my memories of Grandpa and my great uncles are of war heroes unscathed. My siblings and I are all now happily married with wonderful partners and good jobs. Mum and Dad have four beautiful granddaughters, who they don’t half spoil!

Ok so we’re not the Brady Bunch, and to be honest who would want to be? But we’re not quite the Simpsons either. I am part of a loving family. But that family was built by my parents and their commitment to us. I know I will never thank them enough. Maybe if I give Dad a grandson I would be close…

I see the importance of family and how can it help both within and without the veteran and ex-service communities. I attribute my upbringing to the importance my parents placed on family and value each and every member of my family.

Dad now keeps himself busy with his ESO activities and giving tours at the War Memorial. Each year on Anzac Day we meet up with him after he has marched to have a beer or six. Where I can, I take my daughters to see him march. They buy a poppy or a badge from a charity every time we see them.

As the son of a veteran and a veteran’s wife, I am proud of my Dad’s service. I am proud of my Grandpa’s and great uncles’ service. I am proud of my Mum’s and Grandma’s sacrifices. I am proud that my daughters are beginning to recognise this.

I am proud of all servicemen and women and hope they know their families are there to support them. Because I know there is nothing I or my siblings wouldn’t do to support my Mum and Dad.

And that is just being a family.

Chris Jones, DVA
Mending Broken Relationships with a Family member – what, why and how

“Conflict can and should be handled constructively; when it is, relationships benefit. Conflict avoidance is ‘not’ the hallmark of a good relationship. On the contrary, it is a symptom of serious problems and of poor communication.”

Harriet B. Braiker, Who’s Pulling Your Strings? How to Break the Cycle of Manipulation and Regain Control of Your Life

Families are a great source of emotional support, love, security and protection. Loving family members have an incredible impact on each other’s lives, contributing greatly to maintaining a long, healthy and happy life.

A relationship with a close family member that has become fractured and disorganised however, can cause incredible stress on anyone. Where a breakdown occurs people may move out of touch with one another completely. This can be for a few days or weeks and in extreme cases for years. Often long past the event that caused the initial relationship rift.

As with any family dynamic, there are a variety of situations that can lead to breakdowns and stress amongst family members. For example; a family member could feel slighted or insulted by another family member’s actions or words; another could realise their values may be very different to those of other family members. Additionally, stress could easily occur where there is physical or emotional injury by a family member in the past or present; criticism of yourself, your significant other or your children; disagreements about how family situations can be handled such as care of elderly parents and care of children after separation or divorce. These are only a few situations which can cause ongoing breakdown in family relationships and communications.

When you feel hurt by the actions of another family member, it can be easy to focus on the past, collecting ‘evidence of injustices’ and ‘mistreatment’ that provide fuel for maintaining arguments. While helping you to feel justified in your position, this does nothing to solve the problem and can make the issue that started the relationship breakdown worse.

Apart from situations involving extreme physical and emotional abuse, many people wish to repair issues with family members – particularly with elderly parents or siblings. Siblings are often the longest continuing relationship we have in our lives and can be a source of support throughout our lives when facing difficult times.

It is important to be clear about your reasons for wanting to repair any relationship. The act of repairing a relationship can assist us in learning to manage conflict effectively (i.e. facing concerns rather than avoiding them). Making attempts to repair a relationship can strengthen relationship bonds. This can increase mutual trust and respect.
Some steps in repair

The process of mending a broken relationship begins the moment one person takes steps to re-establish contact. This sends the clear message that they care more about the relationship than proving their side of the dispute (‘being happy is better than always being right’).

1. **The place of apology.** A good beginning may be as simple as acknowledging you have not been in contact with the other person, saying sorry and meaning it!

2. **Focus on the present.** Push aside the temptation to go down that history road. Zero in on the here and now – the current problem, your current worry, the present. Focus on what can be done now. Are both people willing to work on repair?

3. **Avoid the blame game.** When relationship problems occur it’s easy to think in terms of who is right, and who is wrong. This isn’t usually helpful and can undermine attempts to repair the relationship.

4. **Own your part.** How may you have contributed to the breakdown of the relationship? When both of you are willing to own your own part in the dysfunction, you’ll find an opening, a place for negotiation, an opportunity for change and healing arises. It will also diffuse some of the resentment, disappointment, or anger you may both feel.

5. **Stay calm.** Be responsible with your emotions and take action. Above all do not harm others. Taking responsibility for your problems ultimately means we need to deal with and manage situations rather than expecting others to do it for us. It is also realising that issues aren’t always about us, that maybe the other person was just having a bad day or is struggling with other unconnected issues.

6. **Try again another day.** Sometimes despite the best intentions in the world, the situation may not be able to be resolved immediately. If this is the case, let the other person know how appreciative you are they were willing to speak with you and make an agreement about when to continue the conversation if appropriate.

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**The language of repair**

Following the suggestions inevitably means talking about what isn’t working for you in the relationship. Let the other person know why it is important to you to bring up the issues such as ‘I really want us to be closer than we have been’. Ask the other person what is or is not working for them and be open to hearing what they say.

Focus your language on how the situation or actions that have occurred have impacted negatively on you. This is best achieved by using “I” language as much as possible. ‘I feel ____ when I see/hear _____’ or When _____ occurred, I felt _____.

In this sentence only a one word feeling word is needed and avoid “You” language such as ‘You did ______ to me’ to avoid the person feeling defensive in the conversation.

There is a saying ‘no shame, no blame’ and remembering this can help our communications be more heartfelt and genuine.

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**When you need support**

Sometimes issues are so large or so much time has gone by that more than one attempt at repair may be needed. This is OK – the first steps in the repair process are the hardest.

Make sure you have support for yourself during this process. Perhaps don’t place other family members in this role, but do consider support from a neutral third party.

Also consider counselling for yourself, and maybe invite your family member to go along, sometimes it is easier when a professional, objective third party is there to guide and support you both. A third party can assist with helping each person to say what they want to say and help you notice the impact of the way you say things on other people. Again this is about learning and not blame.

Veterans and Veterans Families Counselling Service (VVCS) counsellors are available 24 hours a day, 7 days a week by phoning 1800 011 046.
In sickness and in health......

John Howard famously presented the ideal family as husband, wife, 2.3 children, Holden Commodore and a white picket fence. Today anyone who is special to us can be recognised as our family. These are also the ones for whom we care the most when they run into troubles.

When somebody becomes seriously ill, family members are important parts of the treating/caring team. Apart from providing love and supportive actions for the sick person, family members can be advocates for the patient, asking questions about treatment and consequences which patients may be unwilling or unable to voice.

If the sick person is incapable of expressing their own wishes about care, it is ideal if they have appointed a “substitute decision maker” – someone who both knows these wishes, and is authorised to speak for them. This is the central principle of Advance Care Directives or Living Wills.

As a doctor caring for very sick people, families would often tell me “we want (don’t want) this”. I would explain (nicely!) that their task was to either support the patient’s preferences, or for patients unable to speak and without an appointed substitute, to help my team understand what these preferences might be. Perhaps by recalling a previous conversation: “Isn’t it wonderful how doctors keep people alive” or – “It was awful what they did to my brother”.

Again, families can often describe the daily experiences of living with the illness, and provide insights into the patient’s previous identity, interests and values – the “whole person”. This can be invaluable in helping the treatment team to make the best decisions.

As part of the treatment of complex or serious illness, “family conferences” are often arranged – with the consent and presence of the patient if possible. These are opportunities for all family members to share questions and concerns and receive a common message about what is happening. Families of course can be difficult. Times of tension and anxiety can make us quick to find fault in others, even those we love. It is not helpful if long-running feuds or prejudices play out around the sick bed. The best results for patients come when families have discussed their differences and attitudes, agreed on questions to be asked and preferably appointed a spokesperson to liaise between the treating team and other family members.

Being the family of a sick person can be demanding, threatening and exhausting. While doing our best to help, it is necessary to recognise our own limits and to look after ourselves. Health professionals are increasingly aware of the burden placed upon families and particularly carers. Many, as in palliative care, include family members as part of the ‘patient’ and have services directed to maintaining family welfare, both during and after the period of illness. Don’t be afraid to express your personal concerns and to ask for help.

At the end of the day, family members may indeed be emotionally knackered, but most will feel an equally strong sense of satisfaction. They may even have come to know and like each other better than before.

Dr Tony Ireland, DVA Medical Adviser

Advance care planning entails thinking about and discussing with your family and close friends the health care you may or may not wish to receive if you become seriously ill and/or unable to speak for yourself.

Ideally advance care planning involves:

1. **Appointing a person** who can make health care decisions if you are unable to do so.

2. Writing your wishes in an **advance care directive** (‘living will’). www.advancecareplanning.org.au
The issue of family and domestic violence has again been brought to the Australian public’s attention this year through the devastating stories that have been reported across the media. Violence within families and intimate relationships is never acceptable. Importantly, a focus of the current attention nationally on this issue is on prevention but also greater understanding and promotion of the support systems available.

Family and domestic violence can affect people of any age, gender or background, however women and children are the most vulnerable. This violence is about power and control and there are many ways it can be expressed. It is important to recognise that domestic violence within a family can take a number of forms including:

- physical violence
- verbal, emotional, sexual or psychological abuse
- controlling money
- stalking
- serious neglect
- harm to an animal or property
- restricting spiritual or cultural participation.

Various situational factors, while not direct causes and never an excuse, may increase the risk of domestic violence. Situations include: relationship problems, financial problems or unemployment and recent stressful events or circumstances, such as the death of a family member. It’s important that individuals with anger management issues when faced with these situations seek support early.

Alcohol misuse is also a significant risk factor for domestic violence, as the consumption of alcohol may facilitate an escalation of an incident from verbal to physical abuse, because it lowers inhibitions and increases feelings of aggression. There is also research suggesting that, because of the impact of alcohol on aggression, the severity of injuries and risk of death increases, with almost half of all intimate partner homicides found to involve alcohol.

Information on how to proactively deal with emerging anger management or alcohol issues can be found on the At Ease portal: www.at-ease.dva.gov.au

If the situation has reached a level that harm is being done to you, or a family member or a friend is experiencing domestic violence, there is help. To find out more about the support available contact the Department of Human Services through a Centrelink service centre or visit www.humanservices.gov.au/customer/subjects/domestic-and-family-violence.

Depending on the circumstances, they can provide payments, counselling and third party referrals. Importantly, their social workers offer counselling and support, as well as helping the person to work out options, and where necessary, can facilitate connection to other support services in the community. Community services that can help include:

1800RESPECT – is the national family violence and sexual assault counselling service. It is a free, confidential service available 24 hours a day, 7 days a week. Call 1800 737 732 to speak to a professional counsellor.

Kids Helpline – is a free, private and confidential, telephone and online counselling service specifically for young people aged between 5 and 25. Call 1800 551 800, 24 hours a day, 7 days a week.

Lifeline – provides crisis support services for domestic abuse and family violence. Call 131 114, 24 hours a day, 7 days a week.

MensLine Australia – provides telephone and online support, information and a referral service. They also provide specialist support to those who use or experience family and domestic violence. Visit their website www.mensline.org.au or call 1300 789 978.

Veterans and Veterans Families Counselling Service (VVCS) – provides counselling for war and service related mental health conditions to eligible ADF members, veterans, and their families. Visit their website at www.vvcs.gov.au or call 1800 011 046.

Dr Stephanie Hodson, CSC
DVA Mental Health Adviser
‘Happy Families’ was a favourite card game to play with children, back to the 1950s when I was one myself. In that cosy world the card families were a mother and father with a boy and a girl, each family defined by the father’s occupation, like ‘Mr Bun the Baker’ with a Mrs, Master and Miss ‘Bun the Baker’. You swapped cards to complete the four-card family ‘suits’.

My own family was ‘Mr Clarke the Journalist’, with Mrs Clarke and a long suit of five boys and five girls. But by the birth of the last, there was only ‘Mrs Clarke the Full-Time Mother of Ten’.

My father had died of a heart attack at 46, after an already full life in which he had been a monk, an army officer, a journalist, set up a publication company, and was elected to the local council as well as proud of his family. I am still coming to understand what my mother went through to raise us, and the loss to her of that fine man.

We had a lot of fun even then, and it was a wonderful upbringing. Our sense of identity embraced the family, and was less individual than now. Asked who I was, I would have replied “One of the Clarkes”. We had distinct natures and interests, and family positions, but it was a tight and absorbing world which connected us.

We were healthy, with only the usual childhood ailments. My practical mother would even engineer us to catch together those illnesses we would then have immunity to, as nursing three at a time was easier than one after the other. We were not fussed over, and ran pretty free, bruising the odd knee when young learning to judge hazards, rather than breaking bones later.

She was an inventive mother of children. To settle the ‘little ones’ to sleep, she spread them around our bedrooms rather than together keeping each other awake. So we older ones became adept at moving a sleeping child from our bed to theirs at our bedtime, and they at staying asleep through the transfer. I have wondered since what it was like to go to sleep in one bed, and wake in another!

Because of inherited factors in health, it is useful to know the medical history of our families. I am on medication for blood pressure and cholesterol, and have prostate cancer tests as my uncles were prone. When I was diagnosed with osteoporosis, I told my siblings, and encouraged them to test.

My parents intended to have a large family – we knew few others. I did not plan for a family, but innocently trusted that it would come if meant to be. I married for life, and assumed children were likely. It did not work out that way. Life is a mesh of circumstance, and we do not know how things will fall, though we imagine that we choose our destiny.

Not having children brings some regrets. The thread of life connecting us to future generations is broken. My early life was full of children and I am fond of them. I think I would have been a good father, as mine was.

But it has led to other gifts. I value children, more perhaps than some who have them, because to me they are a miracle beyond reach. They may recognise this in their easy engagement with me.

And ‘Mr Clarke the Public Servant’ is still part of his first long and collectible suit in Happy Families!

Chris Clarke, DVA
Over the years, I have met and treated people from many walks of life. Some sick, some poor, some lost, or most, just like you and me. Some you know well, others you never really know: their shutters are down.

One patient I accompanied on a particular overseas trip was defensive and not particularly forthcoming. Individuals who knew him well described him as intemperate, mean spirited, insensitive to others, and a whole lot worse. I am sure you get the picture. While successful career wise, in his personal relationships he seemed to have few redeemable features. I guess we all put up with his behaviour, and never really got close enough to help him or understand him better.

I might add, I was not his regular doctor and only accompanied him on this overseas trip. As part of our itinerary we visited this war grave in El Alamein, North Africa. It was only then as he stood for the first time beside his father’s grave, did his life journey open up. This was the father he never knew, as his mother was pregnant when his father went to war and he never returned.

The apparently tough, insensitive individual crumbled in front of our eyes and broke down into a torrent of tears, loss and despair. It was terribly painful for all to behold. As it later turned out, he had no siblings, his mother died when he was young and he was brought up by relatives.

Many have similar stories, and this does not provide an excuse for his behaviour, but it does, however, demonstrate the scars that we can carry for the duration of our lives. The story also highlights the benefits of stable and predictable family relationships and support. We all need them but so often we take them for granted. We all treated our fellow traveller differently after this unexpected and rather confronting event. He was better for the catharsis, and interestingly, so were we. I guess we really just understood and looking at one another, we were enveloped in shame by our judgmental behaviour.

I guess we all carry some level of emotional burden throughout our lives. It colours our attitudes behaviour and relationships in and outside the family. In this particular case there was a great unanswered void, a fundamental underpinning of self, expressed as loss, anger and frustration. This burden had been carried far too long and seeking appropriate help was long overdue. It’s never too late.

Dr Graeme Killer, AO
DVA Medical Adviser
In Australia, we all know that periods of extremely hot weather are common during summer, yet we don’t often think about how the heat affects our health. Some medicines can affect how the body responds to heat, and people taking these medicines may be more susceptible to developing heat-related illness. If you take medicines, there are many things you can do to stay well and prevent heat-related illness. Together with your doctor and pharmacist, it’s a good idea to make a plan to stay healthy in the heat before the hot weather starts.

STAYING WELL IN THE HOT WEATHER

In Australia, we all know that periods of extremely hot weather are common during summer, yet we don’t often think about how the heat affects our health. Some medicines can affect how the body responds to heat, and people taking these medicines may be more susceptible to developing heat-related illness. If you take medicines, there are many things you can do to stay well and prevent heat-related illness. Together with your doctor and pharmacist, it’s a good idea to make a plan to stay healthy in the heat before the hot weather starts.

What are the symptoms of heat-related illness?

Hot weather places a great deal of stress on the body, which can cause heat-related illness. Heat-related illnesses range from dehydration to very serious heat stress. Symptoms include:

- Thirst
- Urinating less
- Dizziness
- Feeling faint or weak, which may lead to falls
- Excessive sweating
- Headache
- Muscle cramps
- Nausea

More serious symptoms:
- Vomiting
- Confusion
- Hot, red dry skin

If you experience more serious symptoms immediately call 000 for an ambulance or go to the nearest hospital emergency department.
How can we prevent heat-related illness?

Here are a few tips for how we can keep the home environment, and ourselves, cool and prevent heat-related illness.

Keep your home cool

- Close windows and shut curtains during the heat of the day
- Let the cool air in at night
- Don’t hesitate to use your air-conditioner; make sure it is set to cool
- If you can’t cool your house, spend time in an air-conditioned place like a library, shopping centre, cinema, or the home of a family member or friend

Keep up your fluids

As we age, it is common for our sense of thirst to lessen. This means we may not feel thirsty even when it is very hot. Make sure you drink enough fluids during hot weather to prevent dehydration, even when you do not feel thirsty.

- Drink plenty of fluids such as water or diluted fruit juice even when you do not feel thirsty
- Drink often throughout the day, rather than drinking large amounts at once
- Avoid drinking large amounts of tea, coffee or alcohol
- Suck ice cubes
- Eat smaller cold meals (e.g. salads)
- Eat foods with high fluid content, such as vegetables, fruits and jellies

Keep yourself cool

- Wear light loose clothing
- Use wet towels to wipe your face, neck and arms
- Minimise physical activity
- Stay out of the sun
- If you must go outside, go early or late in the day and wear a hat, sunglasses and sunscreen

Medicines and hot weather

Some medicines can affect the way your body reacts to hot weather; other medicines interfere with your body’s ability to sweat and cool itself. They may reduce thirst or increase fluid loss. These medicines include:

- blood pressure and heart medicines
- medicines for mental health conditions
- seizure medicines
- incontinence medicines
- some pain medicines
- diuretics (fluid tablets)

What should I talk to my doctor about?

Make an appointment with your doctor before the hot weather starts. Ask about any medicines you are taking that may increase your risk of developing heat-related illness. Plan how you can take your medicines safely and reduce your risk of heat-related illness.

Talk to your doctor about how much fluid you should drink during hot weather.
Plan ahead to stay safe and well in the heat

**Make an appointment before the hot weather starts**

- Discuss with your doctor any medicines you are taking which may increase your risk of heat-related illness.
- Your doctor may decide to review your medicines to determine if you need to change the medicine or the dose during the warmer months.

**Store medicines safely in the heat**

- Some medicines lose their effectiveness in the heat and need to be stored below 25°C.
- Store your medicines in a safe cool dry place away from direct sunlight.
- Do not leave medicines in a warm place such as above the stove, on a windowsill or in your car.
- Talk to your pharmacist for advice about how to store your medicines.

**Talk to your doctor and make a plan**

- Tell your doctor about any symptoms that concern you, such as sweating more, feeling the heat more, feeling thirsty or urinating less.
- Ask your doctor about how much fluid you should be drinking during the hot weather, particularly if you take medicines that affect fluid loss such as fluid tablets, or you are on a restricted fluid intake plan.
- Your doctor may decide to develop a personalised fluid intake plan for the hot weather to prevent dehydration during the warmer months.
- Your doctor can recommend support services to assist you at home during hot weather.
What else can I do?

If you live alone:

- Know who to call if you need help during extreme heat. Talk to your family, friends, neighbours or carers about how they could help you. It could be as simple as checking in on you, stocking your fridge with cool drinks or helping you turn on the air-conditioner.
- Talk to your doctor about the services available in your community that can assist you at home during periods of hot weather.

More information

- Read the factsheets about coping with hot weather from Australian Red Cross (www.redcross.org.au/emergency-resources.aspx)
- Visit the NPS MedicineWise website (www.nps.org.au/how-to-prevent-heat-exhaustion), or
- Have a family member or friend check the health department website in your state or territory.

Remember:

- Talk to your doctor before changing, stopping or starting any medicines.
- If you feel unwell in the hot weather seek medical advice from your doctor or the nearest hospital.
- In an emergency call 000 for an ambulance.
Stressors that you have been managing can tip over into crisis during the holiday period. Between the ‘bells jingling’ or the carollers ‘singing’ even a visit to the supermarket at this time of year can be fraught. Add in the pressures of finding perfect presents and mandatory attendance at family and work functions and, well, it’s no surprise that some of us face the Christmas season with feelings of dread.

When you’re managing depression, anxiety, adjustment disorder or PTSD, the holiday season can be especially tough. Christmas celebrations may trigger feelings of loss and isolation often associated with sad memories. This is not uncommon, especially if you’re dealing with the impact of your service.

Being aware of possible triggers and taking a few extra steps to take care of yourself over this period is important.

If you have a smart phone, use an app like High Res or PTSD Coach to monitor how you are tracking each day. As an added bonus these apps can be set up to remind you to do a daily breathing exercise or meditation – it works!

Try to keep up with your regular exercise routine – this can be tough as the days get hot, but the stress reducing benefits of exercise will be worth it.

Attending social functions can be one of the hardest things you do. Each small step you take to avoid social isolation, especially during holiday periods, is a big step towards recovery.

The most important thing to remember is that you are not alone! Reach out and talk to friends or connect with family. The Veterans and Veterans Families Counselling Service (VVCS) is also here to support you over the holiday period, just call 1800 011 046 anytime of the day or night, and talk to one of our clinicians.
The Department of Veterans’ Affairs (DVA) has recently expanded its range of online mental health resources with the release of three new exciting products. The new High Res resilience website, Operation Life app and redeveloped The Right Mix website are part of DVA’s commitment to better meet the needs of contemporary veterans by providing online support and self-help tools.

**HIGH RES**

DVA’s new High Res website is an eToolbox with a range of interactive tools and resources to help people cope better with stress, build resilience and bounce back. The website offers a personal dashboard where people can develop a resilience plan, set goals and track their progress. It complements the High Res mobile app which was released earlier this year.

The High Res tools include:

- **CONTROLLED BREATHING** – helps you manage physical reactions to stress by controlling your breathing;
- **HEALTHY SLEEP** – allows you to review your sleep behaviours and offers tailored advice and tips for improving your sleep;
- **CHALLENGING THOUGHTS** – will help you to examine your thoughts and get you thinking in more helpful and productive ways;
- **DEFUSING/CONTROLLING ANGER** – gives you strategies to help control your anger so you can stay focused and make the best choices in difficult situations.

The High Res website is available on DVA’s At Ease mental health portal at www.at-ease.dva.gov.au/highres.

The High Res app is free from the iOS App Store and Android Google Play.

**OPERATION LIFE**

The new Operation Life mobile application is designed to help those at risk deal with suicidal thoughts and is recommended to be used with the support of a clinician.

The app provides on-the-go access to emergency and professional support. It also contains self-help tools such as a grounding tool to help people regain control if they are feeling distressed, as well as a positive reminder tool to help someone remember the good things that make their life worth living.

Ask your health professional if the DVA Operation Life mobile application would be useful to support your treatment.

The app is available free from the App Store or Google Play. Please note that some features of this app may not be accessible on earlier model iOS and Android phones.

To learn more visit the At Ease Portal at www.at-ease.dva.gov.au/veterans/resources/mobile-apps/op-life-app/

**THE RIGHT MIX**

The Right Mix website has been updated with a greater range of interactive self-help tools, motivational goals and useful strategies to help people learn about how they can achieve the right balance of alcohol, diet and exercise.

The interactive tools allow people to quickly measure how much they drink, compare their drinking habits against low risk levels and find out how much exercise is needed to burn off the kilojoules.

The new My Mix section enables people to develop self-management plans and goals and track their progress. The alcohol consumption data collected by the ON TRACK with The Right Mix app can also be imported and added to the online plan.

The Right Mix can be accessed through the At Ease Portal via www.at-ease.dva.gov.au/therightmix and the ON TRACK with The Right Mix app is free to download from the iOS App Store and Android Google Play.

You can find the full range of DVA’s online mental health support tools on the At Ease Portal www.at-ease.dva.gov.au.
Veterans’ Health Week 2015 & 2016:

A big thank you to all the organisations and individuals who committed their time and put in the effort to run an event. As a result, this year’s Veterans’ Health Week was the biggest ever, with 235 events across Australia and approximately 17,500 people attending an event.

The week’s primary focus was on mental wellbeing and it commenced with the Minister for Veterans’ Affairs, Stuart Robert, at the RSL WA Branch Annual State Congress on 10 October 2015, talking about how the mental health challenges faced by veterans and their families is a priority for the Australian Government.

Mr Robert also released two documents that set out what the Government is doing to support ex-service people to improve their health, and stay connected to their community. These documents were the:

- Social Health Strategy 2015–2023 for the Veteran and Ex-service Community,


Following the official launch, the Week saw a record number of events ranging from Vet’s Go Surfing activities in NSW and QLD, adaptive sports, walks and other physical activities, mind challenges, a number of health and wellbeing expo’s and activities, gardening activities and garden tours, bowls and golf days, laughter and happiness sessions, as well as yoga and many other events.
The success of this, and previous years, Veterans’ Health Week is based on the support of countless volunteers from across the ex-service and Australian community. This included a large number of the Men’s Health Peer Education (MHPE) volunteers who are the backbone of the Department of Veterans’ Affairs MHPE program. The MHPE volunteers either ran events or provided support to other organisers at events across Australia.

Veterans’ Health Week focuses on encouraging current and former servicemen and servicewomen to improve their health and wellbeing through participation in such events, and by accessing ongoing veteran community programs and resources.

Whilst Veteran’s Health Week 2015 is over, it’s never too early to commence planning for next year’s week where the key theme will be Social Connection.

Activities in 2016 will highlight the importance of being connected with your family, friends and the community. Additionally, the three other themes that will continue to be explored throughout the week include: physical activity, nutrition and mental wellness.

So keep an eye on www.dva.gov.au/health-and-wellbeing/health-events/veterans-health-week or DVA’s Facebook and Twitter social media pages to keep yourself abreast of what is happening and how you can become involved.
BOOKS

RAISING STRESS PROOF KIDS / SHELLEY DAVIDOW
A compelling and informative guide for every parent, Raising Stress-Proof Kids offers practical advice on how we can significantly and positively impact the lives of our children as they move through developmental phases and become mature, self-regulated and composed beings ready to succeed in our increasingly complex world.
Exisle, 2014
RRP $24.99 eBook $16.99

RINGLEADERS AND SIDEKICKS / ROSALIND WISEMAN
Rosalind Wiseman provides expert advice that will help any parent understand their teenage son and help him cope with classroom politics, bullying, girls and growing up. The book covers timely issues as video games, online identities and social networking sites. This is an essential manual that will help any parent build a stronger, more meaningful relationship with their son.
Piatkus, 2013
RRP $32.99 eBook $19.99

HE’LL BE OKAY: GROWING GORGEOUS BOYS INTO GOOD MEN / CELIA LASHIE
In this honest, no-nonsense and best-selling book, Celia Lashlie reveals what goes on inside the world of boys, and that it is an entirely different world from that of girls. With clarity and insight, she offers parents practical and reassuring advice on raising their boys to become good, loving, articulate men.
Harper Collins 2015
RRP $32.99 eBook $15.99

MAKING COUPLES HAPPY / JOHN AIKEN & ALISON LEIGH
There is a 5:1 ratio of positive to negative comments and gestures in stable marriages. Marriages where the husband resists sharing power are four times more likely to end or to continue unhappily than when he doesn’t. The more possible it is to compromise with your partner, the more influence you will have over him or her. Making Couples Happy, the companion to the ABC-TV series, uses science to help couples rediscover happiness in their relationships and get them on the path to enduring love. ‘Making Couples Happy’ readers who follow the easy steps and activities can expect a significant improvement in how they relate to their partners, and learn to communicate more effectively, argue less, be kinder and achieve new levels of trust and intimacy.
RRP $29.99 eBook $18.99

HEAR ME ROAR: THE STORY OF A STAY-AT-HOME DAD / BEN ROBERTSON
Ben Robertson was a successful journalist when he and his wife decided to have children. In a life-changing move, Ben enthusiastically volunteered for the role of Mr Mum while his wife became the main breadwinner. Written with an engaging mix of humour and brutal honesty, Ben’s story covers the raising of his two sons over five years. As a stay-at-home dad, Ben is pushed to the depths of tiredness, frustration and despair, moments shared equally with the heights of great joy and energy. What emerges is a unique understanding of the price many women pay when they stay at home to look after the children. Hear Me Roar offers insight into the deeper emotional territory of the effects of children on relationships and the changing role of men in families.
UQP, 2015
RRP $29.95 eBook $19.80
ONLINE RESOURCES

HOW FATHERS AND FATHER FIGURES CAN SHAPE CHILD HEALTH AND WELLBEING / LISA WOOD AND ESTEE LAMBIN

The University of Western Australia

Father’s have a significant impact on the social, cognitive, emotional and physical well-being of children from infancy to adolescence and with lasting influences into their adult life. This review focuses on the evidence relating specifically to the influence fathers and father figures on their children.


MILITARY FAMILY LIFE PROJECT: ACTIVE DUTY SPOUSE STUDY: LONGITUDINAL ANALYSES 2010-2012 PROJECT REPORT / DEPARTMENT OF DEFENSE (US)

The Military Family Life Project is large-scale longitudinal survey of military families, which was established by the Department of Defense (US) in 2010. The survey aims to better understand the impact of military deployments and relocation on families, spouses, and children over time. This report analyses data from the first 3 years of data collection. It discusses spouse wellbeing and mental health, spouse education and employment, spouse satisfaction on military life and support for active duty, financial wellbeing, child attachment and reconnection, child behaviour problems and wellbeing, which outcomes change or remain stable over time, the impacts of deployment over time, permanent change of station moves, and the impact of child and spouse factors.


WEBSITES

STRONG FATHERS STRONG FAMILIES / AUSTRALIAN INDIGENOUS HEALTHINFONET

This program promotes the role of the Aboriginal and Torres Strait Islander fathers, partners, grandfathers and uncles, and encourages them to actively participate in their children’s and families lives.

http://www.healthinfonet.ecu.edu.au/key-resources/programs-projects?pid=2057

THE FATHERING PROJECT / UNIVERSITY OF WESTERN AUSTRALIA

The Fathering Project is a non-profit organisation whose aim is to help fathers realise how important they are in a child’s life and give them advice on how to encourage their children.

http://thefatheringproject.org/about-the-fathering-project/

VIETNAM VETERANS FAMILY STUDY / DEPARTMENT OF VETERANS’ AFFAIRS

The Federal Government commissioned the Vietnam Veterans Family Study to gain a better understanding of the effects of Vietnam War service on the physical, mental, and social health of the family members of Australian Vietnam veterans, and to help guide future policy and initiatives. Over 27,000 Vietnam veterans and their families participated. The findings are presented in four volumes. Volume 1 introduces the study and summarises the findings. Volume 2 investigates the intergenerational effects on the health and wellbeing of veterans’ children. Volume 3 presents two analyses of data from the Children of Vietnam Veterans Mortality Study. Volume 4 presents four qualitative studies, on the family dynamics affecting health and quality of life, the self-reported experiences of daily life, and health status risk and protective factors.

**MHPE National Round-up**

**MHPE NT**

The NT MHPE volunteers recently held a Pit Stop at the NT Motor Vehicle Enthusiasts Club annual Father’s Day event. It was hoped that the combination of Father’s Day and vintage cars would be the perfect type of environment to attract men and to use the metaphor of a Pit Stop to conduct men’s health assessments! Five of NTs MHPE crew volunteered at the Pit Stop and were assisted by the expertise of two volunteers from the NT Cancer Council and the NT Heart Foundation, and supported by DVA staff.

The Pit Stop was held outside on a hot and sunny Darwin day. Despite taking plenty of sensible sun precautions, such as providing shade tents, hats, sunscreen and bottled water, the Pit Stop was confined to 10am to 12 noon to ensure both volunteers and participants did not overheat (which would not be a good look when trying to promote health!).

The Pit Stop had 21 men participate ranging in age from 20 to 80 years. A quarter of these men identified as being a current or ex-serving veteran. Of these 21 participants, one third did not ‘pass the pits’ and so received a yellow sticker and were given advice to take action, such as to visit their GP. The other two thirds were given a blue sticker and told that their motor vehicles were ‘hot to trot’. Participants also had the opportunity to chat with the volunteers at each station and obtain further health information to put into their complementary show bags.

Overall the day was very successful with both participants and volunteers giving positive feedback on their experience with the Pit Stop program. Most participants also agreed to a follow up call in a few weeks’ time to see if they had made any changes as a result of attending the program. NT MHPE volunteers would definitely like to run another Pit Stop in the future!

**MHPE WA**

The MHPE volunteers from our shop at Forrestfield recently had an invitation from our Local MLA to visit and have lunch at Parliament House in thanks for the great job we do, and the time committed to fostering veterans’ health. On arrival we were met by one of their tour guides and taken for a walk around Parliament House before meeting our host, Nathan Morton MLA for lunch. We were treated to a wonderful three course luncheon in a private room, during which we had a visit from our State Minister for Veterans’ Affairs, Joe Francis MLA who is very supportive of our efforts and is willing to help whenever he can. Following lunch we were invited to attend the chamber for question time, and Nathan mentioned us to the house, and thanked us for a job well done, so we are now recorded in Hansard as attending!. A great day was had by all and it was very reassuring for us knowing that our politicians are aware of MHPE and willing to give us the support we need.

W.A. MENS SHED ANNUAL CONFERENCE 2015

We had an opportunity recently to display MHPE at the West Australian Men’s Shed Annual Conference, although it was on a Monday there was a great turnout, estimated at 230 guys from sheds all over W.A. We arrived there at 0800 to set up and enjoyed a bacon & egg sandwich that they were selling for $2.00, good value. Lunch was provided, a good old fashioned banger in a bun with fried onions (accompanied by a healthy salad!). We stayed until mid-afternoon when they went off for their AGM. I was very ably assisted on the day by Bill Southall & Phil Lear. It was a great opportunity for us to show off the new table cover, and it was very well received, many comments from other contributors wishing they had something so eye catching! We had quite a few enquiries, people showing interest in what we do and how we go about it, it’s nice to know that we are getting known around the traps; hopefully some invitations may come in to speak at Men’s Sheds. A surprise to me was the large number of sheds that have Veterans as members, most of them Vietnam Vets.
MHPE NSW & ACT

Coffs Harbour
The Coffs Harbour area Men’s Health group have had two successful stalls recently. The Living Well Expo which was held at the Coffs Harbour Ex-Service Club on 19 August was a great experience with hundreds of people attending. By the end of the day we had managed to clear the table of handouts and the response was terrific. On 16th September the Nambucca and Macleay Pension and Welfare Network held their annual information day at the Country Club in South West Rocks at which 100 ex-service people from around the area attended and once again we had a great response. An International Men’s Day will be held at Bunnings in Coffs Harbour on 19th November, 2015 and we hope to have a stall at this event.

Mid North Coast
MHPE volunteers were involved in the Foster Tuncurry Family Fun Day held on Fathers Day 6th September. The event was hosted by the local member Stephen Bromhead at the John Wright Park with the intention of raising funds and awareness for the Prostate Cancer Foundation of Australia. There were a variety of stallholders from Men’s Sheds and health groups across the region, and entertainment provided by a brass band. The event featured an auction of items made at the sheds to raise money for Prostate Cancer Foundation. The MHPE table distributed goodies and information staffed by MHPE Regional Rep Adrian Button and his wife.

New England
On Friday 19th June, Des Bowlay helped organise a Men’s Health day in conjunction with the Men’s Shed at Glen Innes. At Ease information folders were a valued handout to the 35 attending. Not all our shed members are veterans, but it was a good way for the non-vets to appreciate the resources and help available through DVA sources and contacts (ageing and health problems don’t discriminate!). The day covered physical health issues with the support of two community health workers, and a hearing specialist, and Des was able to add some commentary on mental health issues. As they also had a chaplain among the members the matter of spiritual health was not forgotten.

Hunter/Newcastle
During Heart Week we had the opening of the Anzac Walk in Newcastle where we had a joint display with the Heart Foundation.

Left to right: Deborah Moore and Kerrie Avery (Heart Foundation); Mrs Galaxy Australia; Peter Huber (MHPE volunteer) and Sharon Claydon MP

Tiny Small (WA MHPE Volunteer Representative) and Phil Lear (MHPE volunteer)
MHPE SA

Ray Benzie and Bob Kelly (MHPE volunteers) kindly teamed up with Margie Gutteridge and Neil Davies (DVA) to deliver a talk and promote the MHPE program whilst also promoting Veterans’ Health Week (VHW) at a Friday night dinner at Salisbury RSL, South Australia. There was a strong turn out with approximately 60 people in attendance and Ray and Bob did the program proud! Ray will be kindly helping out at the Salisbury RSL ‘Come n Try’ Bowling event in VHW.

MHPE VIC

MHPE volunteers were well represented in the list of 70 activities held in Victoria for Veterans’ Health Week (VHW), including:

- Bob Soutter (Combined tramways/East Melbourne RSL): The Yarra Bend Discovery Walk provided an opportunity to re-connect with old friends, and the walk and mini golf got the group active and ready to appreciate the health BBQ lunch.
- Dennis and Sandy Reeves (Lyrebird Day Club, Warburton): 2 events – Veterans BBQ Picnic and Games Day, plus Veterans Lunch and presentation on social connection for mental wellbeing.
- Wendy Bateman (Anzac House): Happiness Is... lunch followed by therapy/assistance dogs and their handlers, focussed on the range of benefits for mental wellness provided by interaction with these dogs.
- Frank Hoff (Hillview Bunyip Aged Care): Healthy Eating/Healthy Living Expo and cooking demonstration – in conjunction with the Bunyip and District Men’s Shed.
- Kevin Bate (Lara RSL): Healthy Mind, Healthy Body – Helping Men Experience Better Health. Presentations by beyondblue and an exercise physiologist covered the different aspects of healthy body and mind

Many other MHPE volunteers were involved with their local ESOs supporting more informal events and activities across VHW.

Alan White, MHPE VIC Volunteer Representative, recently paired up with well-known ex-AFL coach David Parkin, to present to RSL groups in Bairnsdale and Traralgon, areas with high rates of aggressive prostate cancer. The key messages of staying fit and healthy, having regular check-ups and not ignoring health problems or waiting till symptoms appear, were delivered in a forthright and unambiguous manner. Alan also joined with the Bayside-Kingston prostate cancer support group at a recent information stand at Bunnings in Mentone. Information from key health promotion groups, as well as copies of the MHPE magazine, were provided in show-bags, an effective way to provide a take-home message to those who visited the stand, including a number of women and also some veterans.

If you’re interested in being a MHPE volunteer, turn to pages 31-32 for information on the MHPE program and to read more about what volunteers do.
KEEPING YOUR MIND ACTIVE

WORD SEARCH

CHALLENGING YOUR BRAIN WITH PUZZLES AND GAMES CAN KEEP YOUR BRAIN ACTIVE AND IMPROVE ITS PHYSIOLOGICAL FUNCTIONING.

EXTRA CHALLENGING WORD SEARCH

Words can run forwards, backwards, up and down and diagonally in the grid. Letters may be used more than once.

SIBLING       WELLBEING       FATHER       BROTHER
TOGETHER      ACTIVITIES     HEALTHY      RESILIENCE
CONNECTED     DOMESTIC       GRANDPARENT  ASSISTANCE
CARER         FAMILY         COMMUNICATION MOTHER
ADJUSTMENT    CHILDREN      RELATIONSHIP SISTER
SUPPORT       TOGETHER
Health Technology

John Hall, DVA

AURORA (FREE, APPLE AND ANDROID) Family and domestic violence is, finally, gaining the appropriate national attention, and the Aurora app is an excellent resource for individuals to have on their smart device. An initiative from the NSW Government, the app is for people experiencing domestic and family violence or for those worried about their relationship. It is also a valuable resource for those worried that a friend or family member is experiencing domestic and family violence.

The app contains useful and potentially life-saving information including emergency contacts, information on the sorts of behaviour considered to be domestic and family violence and vital information and links to support services available (generally in NSW, however most of the organisations are national and can be contacted from all locations).

Importantly, the app also allows the user to message their trusted friends and family members or call emergency services immediately.

While the app is aimed for women to use, it should be one that men should be recommending to their female friends and relatives, a small but meaningful way of displaying their support to eliminate violence against women.

ENERGY RATING (FREE, APPLE AND ANDROID) Modern families want to be a friend of the environment, as well as being able to save on power costs for their ‘big ticket’ appliances. Energy Rating is an initiative from the Commonwealth Department of Industry, and allows the user to determine how much it will cost to power televisions, fridges, air conditioners, washers and dryers, dishwashers and computers. The app allows you to compare the power costs and energy ratings energy for most major appliance brands, as well as the power costs over a period of years. We all have most of these appliances in our homes, so now there’s no excuse to not being eco-friendly (and to save some money if possible)!

NATIONAL PUBLIC TOILET MAP (FREE, APPLE ONLY) Let’s be honest here – who hasn’t been ‘caught out’ and needed to find a toilet quickly?! This unique app (funded by the Commonwealth Department of Social Services as part of the national Continence Management Strategy), shows the locations of over 14,000 public and private toilet facilities across Australia, together with opening hours, accessibility for those with disabilities and baby change facilities. You can search around your current location, by address or postcode and the closest facilities will be listed, and you can then display these on a map. So, next time you’re out and about with the family, you may become the hero and save the day!

TRIPOMATIC (FREE, APPLE AND ANDROID) Is there no better feeling than going on holidays? Maybe the time leading up to a holiday is a close second, especially when you’re planning how you (and the family) are going to spend your time at your destination. Tripomatic allows you to pick attractions that you want to see and create a day-by-day itinerary in more than 100,000 (yes, you read that correct!) destinations in over 150 countries. Does your partner fret about the weather? Are you worried about getting back to your hotel after touring around? Do you wonder which subway line will get you to your new-favourite museum? The beauty of this app is that you will spend you precious holiday time on travel, not on planning!
**MHPE volunteers – What do they do?**

MHPE volunteers share health information. For example: one-on-one chats; health week events; working with Men's Sheds; distributing health information; running a stand at a community expo; or giving a talk at a local community group or ex-service organisation meeting.

To talk to a volunteer, please contact the relevant MHPE State/Territory Volunteer Representative below:

<table>
<thead>
<tr>
<th>NAME</th>
<th>STATE/TERRITORY</th>
<th>PHONE NUMBER</th>
<th>EMAIL ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sean O'Mara OAM</td>
<td>North Queensland</td>
<td>(07) 4952 4960 or 0427 524 960</td>
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<td>Alan White</td>
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<tr>
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<tr>
<td>David Francis</td>
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</tr>
<tr>
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<td><a href="mailto:jmaca@bigpond.com">jmaca@bigpond.com</a></td>
</tr>
<tr>
<td>Malcolm ‘Tiny’ Small</td>
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<td>(08) 9337 8773 or 0428 935 687</td>
<td><a href="mailto:tinos@westnet.com.au">tinos@westnet.com.au</a></td>
</tr>
</tbody>
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**Keeping your mind active answers**

D __ R __ Y H T L A E H S I T E R __

D __ O __ S E __

M __ E H Y L I M A F __ S U P P O R T __

A __ E __ I __ T __ M __

D __ S __ T __ A __ O __ C __

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P __ U __ I __ V __ H R M __

I __ C __ S __ C __ I __ E __ A __ M __

H __ W __ H __ T __ T __ R __ N __ U __

S __ E R I __ M __ C __ D N S __

C __ N __ L E L E __ A __ P __ I __ E __

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The Men’s Health Peer Education (MHPE) program aims to raise the veteran community’s awareness of men’s health issues and encourages men to manage their own health and wellbeing. The program trains volunteers from all age groups to provide health information to members of the veteran community.

MHPE volunteers share this information via many channels, for example, giving a talk on a health issue at a local community group, holding a stand at a community expo or speaking person-to-person with a veteran, such as a friend at a barbeque. The MHPE program is open to any member, male or female, of the veteran, ex-service, or general community, who is able to volunteer their time and has a genuine interest in helping veterans to learn about healthy lifestyle choices.

For information about the MHPE program, visit our website www.dva.gov.au/mhpe.htm or contact the relevant DVA MHPE Coordinator below:

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone Number</th>
<th>Email Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>DVA QLD MHPE Coordinator</td>
<td>(07) 5630 0203</td>
<td><a href="mailto:MHPEQLD@dva.gov.au">MHPEQLD@dva.gov.au</a></td>
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<td>DVA NT MHPE Coordinator</td>
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<td>DVA SA MHPE Coordinator</td>
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</tr>
<tr>
<td>DVA TAS MHPE Coordinator</td>
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<td>DVA NSW &amp; ACT MHPE Coordinator</td>
<td>(02) 9213 7661</td>
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