

NT MEN'S HEALTH REPORT CARD 2019

RATING THE STATE OF MALE HEALTH IN THE NORTHERN TERRITORY



TAKING ACTION FOR MEN'S HEALTH



In April 2019 the Federal Government published the National Men's Health Strategy (2020-2030).

The Strategy calls on all levels of government to take action to address the unique needs of men and boys in the policies they develop, the programs and services they deliver and the initiatives they fund.

One of the guiding principles that underpins this Strategy is that the actions we take to improve men and boys' health must address the "gender inequality issues faced by men".

According to researchers at the University of Canberra the majority of Australians support equality between men and women, but are concerned that men and boys are increasingly excluded from measures to improve gender equality.

The solution to this problem is not to stop working to improve the lives of women and girls, but to increase our efforts to tackle the issues facing men and boys.

One of the barriers to improving men's health is that there is very little research highlighting the gender inequality issues that men and boys face.

The 2019 Men's Health Report Card series is a first attempt to bring some of these issues together and measure how well each State and Territory is doing for men and boys.

The facts are compelling. Our sons are less educated than our daughters. Our brothers die younger than our sisters. Our fathers are more likely to die at work than our mothers. Our male friends are more likely to die by suicide than our female friends.

The 2019 Men's Health Report Card for the Northern Territory highlights 10 key areas where men and boys are not faring as well as women and girls.

The intention of this report is to inspire key stakeholders across the Northern Territory to focus more time, money and energy on improving the lives and health of men and boys in alignment with the National Men's Health Strategy (2020-2030).

This report focuses on average statistics for males and females in Australia and highlights some of the key gender inequalities that men and boys experience. It doesn't measure the inequalities that exist between different groups of men, such as the many gaps that exist between Indigenous and non-Indigenous men.

The health status of men and boys in the Northern Territory cannot be adequately addressed without tackling the social issues that shape the lives and health of Indigenous people in general and Indigenous males in particular.

The Australian Men's Health Forum would welcome more investment into men's health research to ensure that data is made available on all the priority groups identified in the National Men's Health Strategy, including Aboriginal and Torres Strait Islander males.

By taking collective action on the gender issues that impact men and boys of all backgrounds, we can create a healthier future for men and a healthier future for everyone.

STILL DYING YOUNGER

Australia is one of the world's healthiest countries, yet men die six years younger than women on average.

In 2017, the median age of death for men in Australia was 79.1 years, with women living to 85.1 years on average.

Men in the Northern Territory are dying younger than men in Victoria, South Australia, New South Wales, the ACT, Tasmania, Western Australia and Queensland.

NT men are also dying 3.1 years younger than women across the state, whose average age of death is 66.3 years (compared with 63.2 for men).

The good news is that the average age of death for men in the NT has risen by 4.1 years in the past decade, from 59.1 years in 2007 to 63.2 years in 2017.

Looking to the future, the life expectancy of boys born in the NT in 2015-2017 is 75.9 years. This varies from area to area with boys in Darwin expected to live 6.6 years longer than boys in the the NT Outback (79.4 years compared with 72.8 years).

“MEN IN THE NT DIE 3.1 YEARS YOUNGER THAN WOMEN”

The widest regional gap in life expectancy in the NT is the 11.7 years between boys born in the NT Outback and girls born in Darwin (72.8 years compared with 84.5 years).

Overall, men in the NT are eighth in our league table of longevity across Australia, based on the average age of death.

LONGEVITY

RANK	1 st	2 nd	3 rd	4 th	5 th	6 th	7 th	8 th
STATE / TERRITORY	VIC	SA	NSW	ACT	TAS	WA	QLD	NT
MALE	80.5	79.7	79.6	78.4	78	77.8	77.8	63.2
FEMALE	85.7	85.8	85.5	85.2	84.2	84.4	83.9	66.3

Table 01: Median age at death by sex, State and Territory (2017). Source: ABS



MEN OF GOOD HEART

Heart disease is the biggest killer of Australian men. In the NT, 10 people a month die from heart disease.

Three out of four people who die of heart disease before the age of 65 are men. In total, one man aged under 65 dies from heart disease every week in the NT.

Men also account for nearly 75% of the years of life lost to heart disease in the NT every year.

When compared with women of the same age in the NT, heart disease kills three times more men aged 35-64, with men accounting for 49 out of 66 deaths in 2017.

For people aged 65 to 94, men were more than twice as likely to die from heart disease in the NT than women in 2017.

Overall, the rate of heart disease in men is 102.3 per 100,000, which is higher than the national average of 78.7.

“3 IN 4 HEART DISEASE DEATHS UNDER 65 ARE MEN”

Men in the NT have the highest rate of heart disease in Australia.

In terms of our league table of male heart disease, men in the NT are currently in eighth place.

HEART HEALTH

RANK	1 st	2 nd	3 rd	4 th	5 th	6 th	7 th	8 th
STATE / TERRITORY	WA	ACT	VIC	SA	NSW	QLD	TAS	NT
MALE DEATH RATE	72.8	74.1	76	77.3	86.2	88.3	93.6	102.3
FEMALE DEATH RATE	38	45	40.9	41.3	65.5	50.4	47.3	52.4

Table 02: Standardised death rate for ischaemic heart disease per 100,000 population (2017). Source: ABS

BEATING MALE CANCER

Cancer is a leading cause of poor health in Australia. One in two men will be diagnosed with cancer before their 85th birthday and in the NT nearly three in 10 men (28.2%) and women (27.7%) die from cancer every year.

Nationally cancer kills nearly 500 men and 400 women a week. Closing that gap would save the lives of around 5,000 men a year.



“3 IN 10 MEN DIE OF CANCER”

In the NT, cancer kills around 180 males and 130 females every year with men and boys accounting for 58.4% of all cancer deaths.

One of the leading causes of cancer deaths in the NT is bowel cancer which can be detected and treated early through the National Bowel Cancer Screening Program.

Screening rates vary from region to region. In general, screening programs are better at reaching women, with 43.2% of women aged 50-74 accessing screening compared with 39.4% of men.

In the NT, 27.2% of men and 29% of women access screening for bowel cancer. The number of people accessing screening increases with age, with fewer than one in five men (18.7%) aged 50-54 in the NT being screened compared with more than one in two women (37.1%) aged 70-74.

In terms of our league table of male cancer, based on the National Bowel Cancer Screening Program, men in the NT are currently in eighth place.

CANCER PREVENTION

RANK	1 st	2 nd	3 rd	4 th	5 th	6 th	7 th	8 th
STATE / TERRITORY	SA	TAS	ACT	WA	VIC	QLD	NSW	NT
MALE PARTICIPATION	44	44	41.7	41	41	39.2	36.6	27.2
FEMALE PARTICIPATION	45.1	48.8	45.1	45	45.4	42.3	39.8	29

Table 03: National Bowel Cancer Screening Program participation for people aged 50-74 (2016-2017). Source: AIHW

PREVENTING MALE SUICIDE

Suicide is the leading killer of men under the age of 55 in Australia. It takes the lives of eight people a day, six men and two women.

Nationally, three in four suicides are men.

This pattern is repeated in the NT. In 2017 there were 51 deaths by suicide, 38 male suicides and 13 female suicides.

Every week, an average of nearly six men die by suicide in the NT, with men accounting for 74.5% of suicides.

Overall, the rate of male suicide in the NT is 25.9 deaths per 100,000 people, which is higher than the national average of 18.5 per 100,000. Men in the NT have a higher rate of suicide than men in VIC, NSW, the ACT and SA, WA, QLD and TAS.

In our league table of male suicide prevention around Australia, the NT is currently in eighth place.

“3 OUT OF 4 SUICIDES ARE MEN”

MALE SUICIDE

RANK	1 st	2 nd	3 rd	4 th	5 th	6 th	7 th	8 th
STATE / TERRITORY	VIC	ACT	NSW	SA	WA	QLD	TAS	NT
MALE SUICIDE RATE	15.3	16.1	16.1	19.6	21.8	23.3	23.8	25.9
FEMALE SUICIDE RATE	5.1	5.2	5.1	6.8	7.7	6.9	7	12.2

Table 04: Standardised death rate for intentional self-harm per 100,000 population (2017). Source: ABS



CREATING A HEALTHIER FUTURE FOR MEN AND BOYS

A CONCEPTUAL FRAMEWORK FOR TAKING ACTION TO IMPROVE MEN AND BOYS' HEALTH

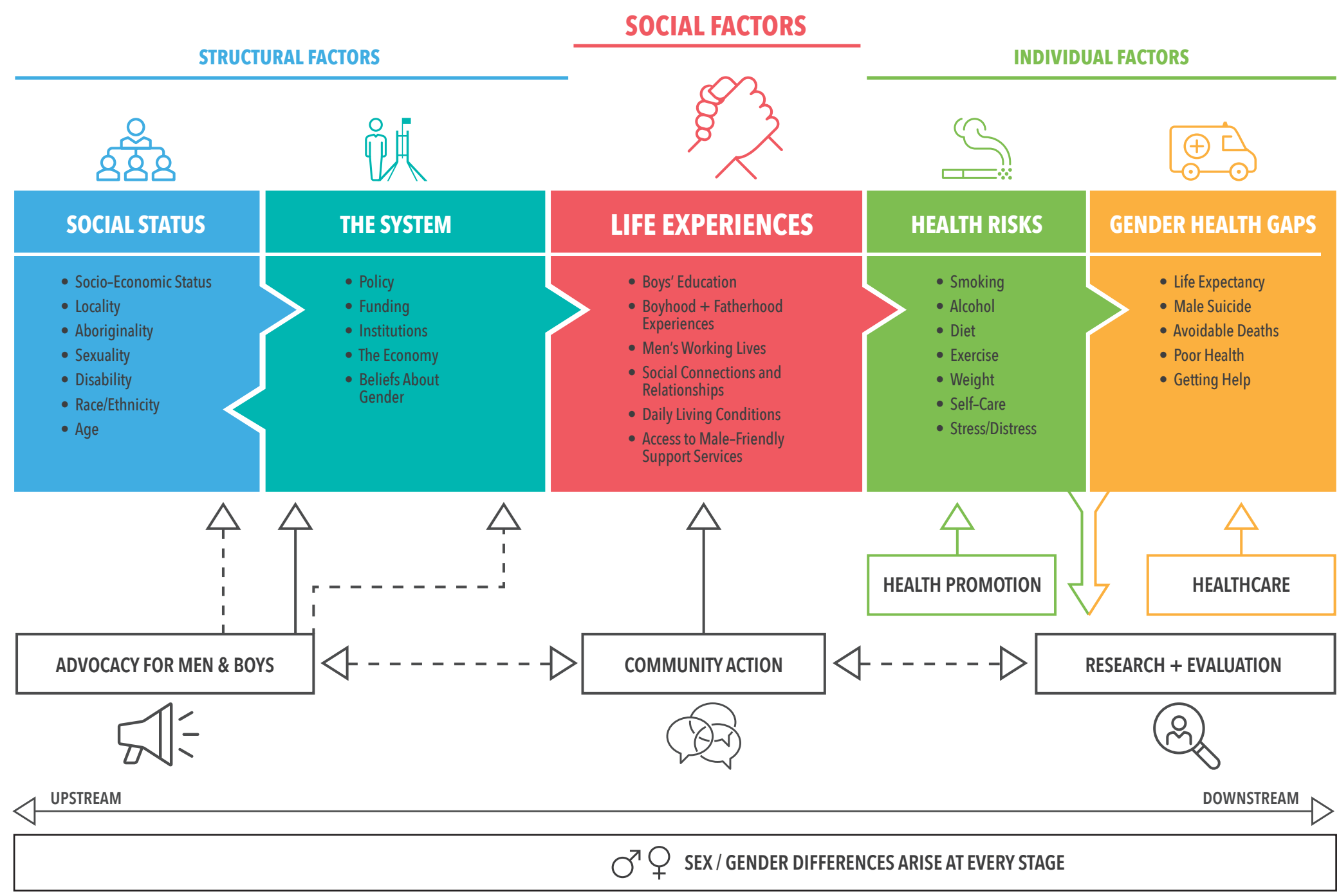
FRAMEWORK FOR A HEALTHIER FUTURE

When tackling a complex social issue, such as improving men's health, a conceptual framework can help us to create a map of the many different factors that are at play. Most people understand that having a detailed and accurate map can help us plan the best route to a chosen destination.

In a similar way, creating a conceptual framework around an issue like men's health, helps us to understand the territory we are operating in and map out a range of pathways we could take to try and tackle the issue.

Our Framework for a Healthier Future builds on the work of existing conceptual frameworks and introduces two additional features that are generally overlooked:

- It places a specific focus on the factors that are known to shape men and boys' health;
- It acknowledges the fact that there are many different views about gender issues.



ACTIONS

ADVOCACY FOR MEN & BOYS

- Develop narratives and messages that make the case for action on men's health
- Give voice to the health and social needs of men and boys
- Make the case for more resources for men's health

STRATEGIC PARTNERSHIPS

- Develop men's health policies / put men's health in all policies
- Promote theories on sex, gender and health that translate into best practice
- Build strategic partnerships, frameworks and networks

COMMUNITY DEVELOPMENT

- Build community awareness of the social factors that shape men's health
- Develop community support for action on men's social issues
- Work to expand the availability of male-friendly services

HEALTH PROMOTION / HEALTH CARE

- Identify risk factors in men for targeted health promotion
- Identify links between social factors and individual factors
- Identify opportunities for advocacy work, partnerships and men's health campaigns

RESEARCH / EVALUATION

- Identify specific outcomes for targeted intervention (e.g. male suicide rates)
- Undertake gender impact assessments to ensure resources reach both men and women
- Evaluate interventions to help identify best practice

THE ROAD TO NOWHERE

Transport accidents kill around four people a day in Australia and three of them are men and boys.

In the NT, the ratio is higher with men and boys accounting for four out of five road deaths.

There were 38 road deaths in the NT in 2017 (31 male and 7 female).

In total, 81.6% of people who die in transport accidents in the NT are male.

Road deaths are the second biggest killer of boys and young men in the NT after suicide. In 2017, six young car occupants (aged 15-24) were killed in transport accidents and all of them were male.

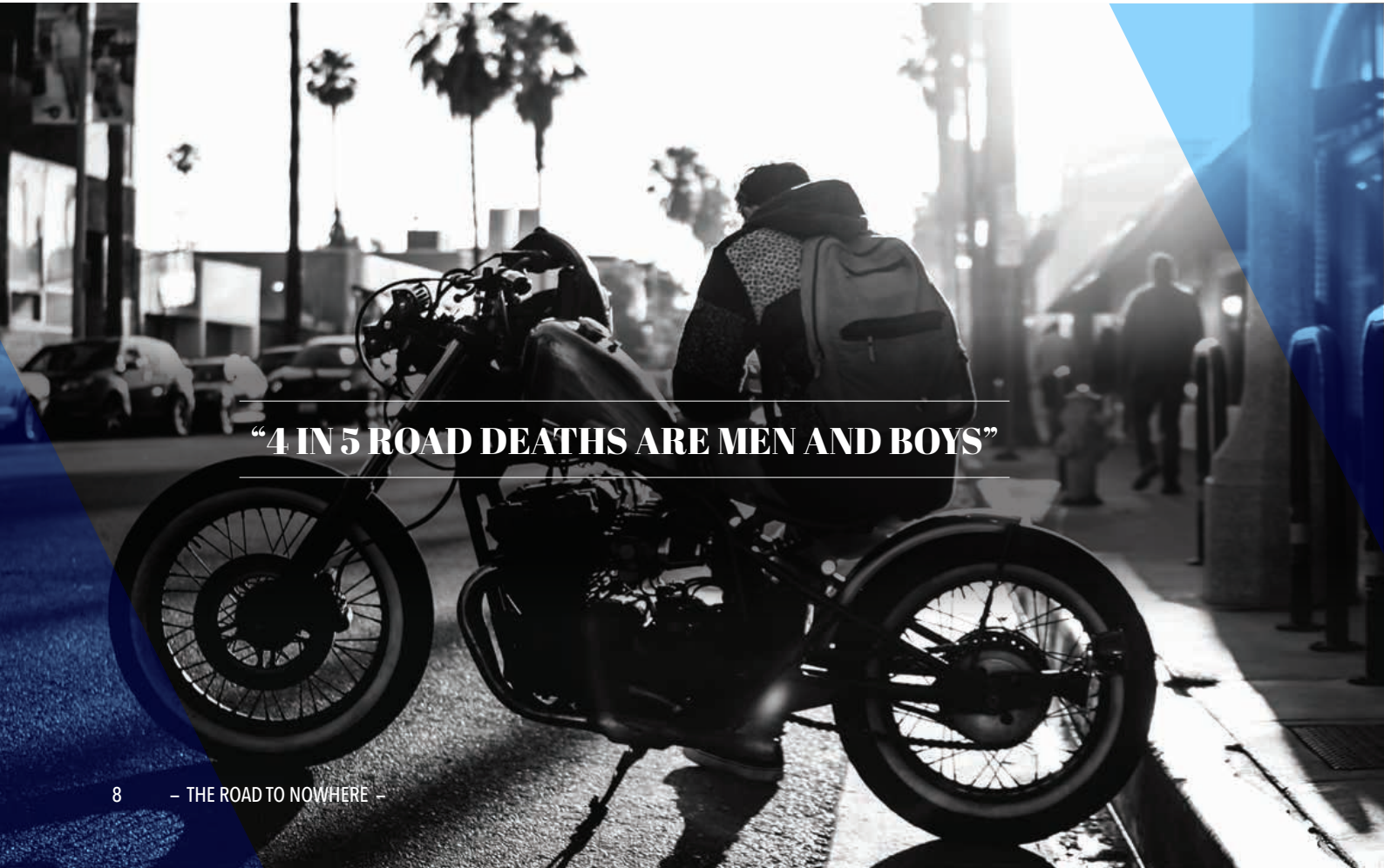
Men and boys in the NT are more likely to die on the roads than males in any other State or Territory.

In our league table of road safety, the NT is currently in seventh place.

ROAD SAFETY

RANK	1 st	2 nd	3 rd	4 th	5 th	6 th	7 th	n/a
STATE / TERRITORY	VIC	NSW	QLD	SA	TAS	WA	NT	ACT
MALE DEATH RATE	6.2	6.7	9.4	11	11.5	12.2	22.9	n/a
FEMALE DEATH RATE	2.4	2.3	3.4	2.7	n/a	2.8	n/a	n/a

Table 05: Standardised death rate for transport accidents per 100,000 population (2017). Source: ABS



“4 IN 5 ROAD DEATHS ARE MEN AND BOYS”

DYING TO WORK



The world of work has a major impact on everyone’s lives and health and can promote and prevent good health.

Research shows that while work can impact everyone’s health, the health risks and health benefits of work have a more profound impact on men. The reasons for this include the fact that men are more likely to be employed, work full time, be their household’s main earner and work in high risk environments.

Men spend twice as many hours in paid work as women, doubling their exposure to the risks and benefits of work. For example, men account for 72% of work-related disease and two in three serious claims for workers’ compensation.

In 2017, six workers were killed at work in the NT and 83.3% (five fatalities) were men.

The rate of workplace fatalities in the NT is 5.1 fatalities per 100,000 people. This places the NT eighth in our league table of the safest places to work.

“83% OF WORKPLACE DEATHS IN THE NT ARE MEN”

SAFEST PLACES TO WORK

RANK	1 st	2 nd	3 rd	4 th	5 th	6 th	7 th	8 th
STATE / TERRITORY	ACT	VIC	WA	NSW	SA	QLD	TAS	NT
NUMBER MALE DEATHS	0	33	19	56	14	43	5	6
% MALE DEATHS	0%	91.7%	95%	90.3%	100%	95.6%	100	85.7%
DEATH RATE PER 100,000	0.4	1.1	1.5	1.6	1.7	1.9	2	5.1

Table 06: Work-related traumatic injury ‘worker’ fatalities by state/territory of death (2017). Source: Safe Work Australia

DAD’S THE WORD

The evidence that involved dads positively influence their children’s health, social success and academic achievements is compelling and robust. Involved fatherhood has also been linked to improvements in men’s and women’s health.

To date, we have identified three possible ways to compare levels of father involvement across Australia. None of these measures are entirely satisfactory, but we hope their inclusion in this report will help start a conversation about the health and social benefits of involved fatherhood.



“1 IN 4 CHILDREN ARE LIVING IN LONE-PARENT FAMILIES”

The first measure is the number of births in 2017 where the biological father was not acknowledged on a child’s birth certificate. In the NT, 14.6% of children born each year have a father who isn’t acknowledged on their birth certificate. This is the eighth highest rate in Australia.

The second measure is the proportion of children born outside of marriage, which is now around one third of births nationally. In the NT, three in five births (57.6%) occur outside of marriage, the eighth highest rate nationally.

The third measure is the proportion of children living in lone-parent families in each State and Territory, as a majority of these families are headed by mothers.

In the NT, nearly one in four children (22.7%) are living in lone-parent families. This is the second highest rate in the country.

In future, we may look to compare how much parental leave fathers are taking, how many dads are primary carers, how many hours dads spend on childcare and how involved separated dads are in their children’s lives.

Based on the data we’ve used this year, the NT is currently placed eighth in our table of fatherhood involvement nationwide.

FATHERHOOD INVOLVEMENT

RANK	1 st	2 nd	3 rd	4 th	5 th	6 th	7 th	8 th
STATE / TERRITORY	ACT	VIC	NSW	SA	WA	QLD	TAS	NT
FATHERS NOT REGISTERED	2	1.9	3.4	2.8	4	5.4	3.7	14.6
EX-NUPTIAL BIRTHS	26.2	30.1	31.5	36.2.	37.8	42.3	50.5	57.6
LONE PARENT FAMILIES	13.2	15.5	20.5	20.3	17.9	20.4	24.5	22.7

Table 07: Rate of confinements by nuptiality (2017); Proportion of children aged under 15 years living in lone-parent families (2011). Source: ABS

IMPROVING BOYS’ EDUCATION

Education is one of the key social factors that shape our lives and our health.

Lower levels of education can be linked to shorter life expectancy, poorer physical and mental health, lower wages, higher risk of unemployment and greater exposure to crime.

In general terms, the better your education the better your health (and the longer you stay at school, the longer you’ll live). As far as boys are concerned, the education system across Australia delivers better results for girls at every stage.

In the NT, the latest NAPLAN results for Year Five students found that compared with the national average boys are:

- 4.7 times more likely to be below minimum reading standards
- 3.1 times more likely to be below minimum writing standards
- 4.6 times more likely to be below minimum numeracy standards

“NT BOYS ARE TWICE AS LIKELY TO DROP OUT OF SCHOOL BEFORE THE END OF YEAR 12”

Boys in the NT are also nearly twice as likely (1.8 times) than the national average to drop out of school before the end of Year 12.

The latest data on the number of men working in schools in the NT found that just one in four (26.3%) teaching staff in the NT are male.

Overall, we placed the NT eighth in our boys’ education league table.



BOYS’ EDUCATION

RANK	1 st	2 nd	3 rd	4 th	5 th	6 th	7 th	8 th
STATE / TERRITORY	ACT	VIC	SA	NSW	QLD	TAS	WA	NT
BOYS / GIRLS WRITING	11.6% / 5.3%	9.3% / 3.7%	19.4% / 9.5%	12.4% / 5.2%	17.1% / 7.8%	20.9% / 7.4%	19.4% / 9.5%	43.4% / 33.4%
MALE / FEMALE DROP OUT	9.4% / 4.9%	19.4 % / 11%	13.6% / 4.7%	27.8% / 19.5%	14.2% / 10.1%	30.9% / 22.4%	17.5% / 12.3%	37% / 32.7%
MALE WORKFORCE	27.4%	26.9%	28.1%	25.2%	24.8%	28.5%	23.5%	26.3%

Table 08: Percentage of Year 5 students below national standard (2018); Apparent percentage of students not retained from Year 10 to Year 12 (2018); Percentage of male in-school staff, full-time equivalent (2018). Sources: NAPLAN / ABS

DEVELOPING MALE-FRIENDLY SERVICES

The statistics outlined in this report portray an alarming landscape in the state of men and boys' health. The good news, however, is that Australia is a world leader in developing male-friendly approaches to working with men and boys.

The National Men's Health Strategy supports this approach by making the provision of "male-centred information, programs & services" its guiding principle.

But what does a male-friendly approach to men's health look like? Some of the common ingredients that have been shown to make services more accessible to men are listed below:

- they target men directly – not patients, not parents, but men!
- they go where men already are
- they make use of male-friendly activities
- they use male-friendly language
- they take a strengths-based approach that is positive about men.

You'll find some or all of these characteristics built into the design of male-friendly services around Australia. Here we provide eight examples of good practice representing every State and Territory in Australia.

The Men's Health Educational Rotary Van (MHERV)

MHERV is custom-built caravan with two consulting rooms and a dedicated registered nurse who travels around the state of New South Wales. It targets regional and rural men directly, offering free health screenings to cover approximately 2,000 men a year in over 50 communities. It goes where rural men are, often targeting male-friendly events like country shows.

Prick 'n A Pint

What could be more male-friendly than a pint down at the pub with your mates? Prick 'n A Pint is a Victorian project delivered to male-only groups over a pint (or non-alcoholic drink) in a pub. The 10 weekly sessions are guided by a GP in line with RACGP guidelines. The Prick (in case you wondered) is a blood test that is referred to throughout the program.

MATES In Construction

MATES In Construction is a workplace suicide prevention project that started in Queensland and has expanded all over Australia.



By focusing on a male-dominated industry, it takes its services where men already are. MATES is designed around the principle that providing help is a male strength. A central plank of the MATES' model is training and encouraging construction workers to offer support to co-workers who show signs of suicide risk.

Royal Flying Doctor Service (RFDS)

The Royal Flying Doctor Service (RFDS) in South Australia launched a male-friendly health prevention service in 2017. The service targets men directly by sending medical teams to outback events like rodeos, that attract a large male crowd. As well as being on hand to deliver first-aid, medical teams offer health checks to men which include measuring blood pressure and glucose levels. They also promote cancer awareness by providing guidance on how to check for testicular cancer and skin cancer.

First Track Pit Stop

The 'First Track Pit Stop' program is a classic example of a program that uses male-friendly language to improve men's health. Delivered by The Regional Men's Health Initiative, the program is built out of the back of a branded ute that travels around regional WA. The service offers health awareness, a listening ear and a number of services themed around the servicing of a vehicle including waist measurement ('chassis'), blood pressure tests ('oil pressure') and coping skills ('shock absorbers').

The Blokes Book

The Blokes Book is a male-friendly guide to support services that have been doing the rounds since 2005, when it was developed by a network of men's workers in Western Sydney. There are now various versions of the book in circulation in Australia and New Zealand. In 2014 a version called the Mooditj Marmun book was developed to promote services for Aboriginal men in WA. The most recent upgrade is the Tasmanian Blokes Book, which provides an extensive directory of information to help men deal with a range of health issues and life crises.

StrongBala

The StrongBala Justice Program based at the Wurli-Wurlinjang Health Service in the Northern Territory, recognises the fact that men's health is shaped by a broad range of social and cultural issues. StrongBala, which is based in Katherine aims to give Indigenous men regular access to culturally appropriate holistic health, justice and drug and alcohol counselling services. It provides educational sessions through a personal development program and refers men to internal and external health providers and other agencies as required.

OzHelp

OzHelp is a leading provider of workplace well-being programs, based in Canberra and delivering nationally. It targets male-dominated workplaces and specialises in mental health and suicide prevention. The fear that revealing mental issues to an HR department could have career-limiting implications is very real and so OzHelp provides male-friendly tools such as its Workplace Tune Up, which are both personalised and private.

BUILDING MEN'S ECONOMIC SECURITY

Our health is closely linked to our economic wellbeing. Broadly speaking, the better your economic status, the better your health.

In March 2019, 78.4% of men and 69.1% of women in WA were participating in the labour force, with men accounting for 58% of people working full time and 43% of those working part time.

“2 MILLION MEN EXPERIENCE ECONOMIC INSECURITY”

There are around two million men in Australia who are experiencing some form of economic insecurity. Having secure, well-paid work, is one of the key ways to improve the health of our finances.

ECONOMIC SECURITY

RANK	1 st	2 nd	3 rd	4 th	5 th	6 th	7 th	8 th
STATE / TERRITORY	ACT	NSW	VIC	QLD	TAS	NT	SA	WA
UNEMPLOYMENT RATE	4.1	4.3	4.5	5.6	6.1	4.8	6.4	6.5
% UNEMPLOYED	55.8	54	51.4	49.5	48.6	58.7	57.5	59

Table 09: Trend male unemployment rate by State/Territory (March 2019) / Percentage of unemployed persons who are male (March 2019)



Men also account for more than half of those who are unemployed, with 59% of those who are unemployed and 55% of those who are looking or full-time work being male.

The number of men who are not in the labour force (NILF) rose by 190% from 7,500 to 21,800 between 1978 and 2019. In the same period, the number of NILF women rose by 90%.

As of March 2019, the male trend unemployment rate in the NT was 4.8%, lower than the national average of 5%. More than half of unemployed people (58.7%) and the majority of unemployed people looking for full-time work (55%) are men.

Based on the male trend unemployment rate and percentage of unemployed people who are male, we placed the NT sixth in our league table for economic security.

STRATEGIC SUPPORT FOR MEN'S HEALTH

All levels of government in Australia place greater focus on improving the lives and health of women and girls than men and boys.

There is a comprehensive framework of activity at federal, state and territory level that ensures time, money and resources are focused not just on women's health, but on the social issues that shape women's health.

At a national level, the Office For Women works on three priority areas: women's economic security and workforce participation, women in leadership positions and preventing violence against women and children. The Office for Women funds six women's alliances representing women's organisations across Australia.

Other Government initiatives include a women's health strategy, a national plan to prevent violence against women, the Workplace Gender Equality Alliance and the Australian Human Rights Commission, which address sex discrimination against women.

Funding for health initiatives often overlooks men. In 2014 it was revealed that the National Health and Medical Research Council had invested four times more money into research on women's health than men's health. In 2015-2016, an estimated 93% of the \$409m spent on cancer screening was targeted at women.

“WE NEED MORE FOCUS ON IMPROVING MEN'S LIVES”

This doesn't mean we should stop working to improve the lives of women and girls. It does mean there is much more we could be doing at a collective level to improve the lives and health of individual men and boys.

STRATEGIC SUPPORT

RANK	1 st	2 nd	3 rd	4 th	5 th	6 th	6 th	6 th
STATE / TERRITORY	WA	NSW	NT	VIC	SA	ACT	QLD	TAS

Table 10: Level of strategic support given to men's health (2019) Source: Australian Men's Health Forum

Our league table on strategic support for men's health, places WA in first place because of its comprehensive Men's Health and Wellbeing policy, with NSW a close second because of the development of its Men's Health Framework.

The NT is third because of the work of its Men's Health Strategy Unit in recent years, though as this unit no longer exists the NT risks losing ground on other States and Territories.

VIC comes fourth because its Gender Equality, Health and Wellbeing Strategy does place some focus on men and boys. Fifth is South Australia for engaging Port Adelaide player Robbie Gray as a men's health ambassador.

We placed QLD, TAS and the ACT in equal sixth place, as we were unable to identify any significant strategic work focused on men and boys' health.



WORKING TOGETHER FOR MEN’S HEALTH

There are many areas of life where men and boys in the NT are not faring as well as women and girls.

Men die 3.1 years younger than women; three in four heart disease deaths under 65 are men; three in four suicides are men; four out of five road deaths are male; five out of six workplace deaths are men; boys are nearly twice as likely not to complete Year 12 than the national average and the number of men not in the labour force has risen by nearly 190% since 1978.

At the same time, we continue to invest less time, money and resources into improving the lives of men and boys than women and girls.

The intention of the report card is to inspire key stakeholders across the NT to take collective action to tackle the gender issues that impact

men and boys, in alignment with the National Men’s Health Strategy (2020-2030).

This work needs to focus on men and boys in general, as well as targeting all of the priority groups identified in the Strategy including Aboriginal and Torres Strait Islander men.

When compared with other States and Territories, the 2019 Men’s Health Report Card ranked the NT in eighth place.

By working together to improve the lives and health of men and boys, we can build from this position and help create a healthier future for everyone in the Northern Territory.

MEN’S HEALTH REPORT CARD

RANK	ACT	VIC	NSW	SA	WA	QLD	TAS	NT
LONGEVITY	4	1	3	2	6	7	5	8
HEART DISEASE	2	3	5	4	1	6	7	8
CANCER	3	5	7	1	4	6	2	8
SUICIDE	2	1	3	4	5	6	7	8
ROAD SAFETY	n/a	1	2	4	6	3	5	7
WORKPLACE SAFETY	1	2	4	5	3	6	7	8
FATHERHOOD	1	2	3	4	5	6	7	8
EDUCATION	1	2	4	3	7	5	6	8
ECONOMIC SECURITY	1	3	2	7	8	4	5	6
STRATEGIC SUPPORT	6	4	2	5	1	6	6	3
OVERALL	1 st	2 nd	3 rd	4 th	5 th	6 th	7 th	8 th

Table 11: 2019 National Men’s Health Report Card. Source: Australian Men’s Health Forum

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A photograph of an Indigenous Australian man with a long grey beard and white body paint on his chest and arms. He is wearing a red headband and a red cloth around his waist. He is sitting on a wooden stool and playing a didgeridoo. The background shows a green metal fence and a paved area. The image is overlaid with a teal and blue geometric design.

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