

MODULE 3: HAVING THE CONVERSATION

TIPS AND TECHNIQUES TO HELP YOU START A CONVERSATION, AND KEEP IT GOING.

TOPIC 1: Why won't he talk about it?

Many men are hesitant to, and have difficulty talking about, depression and anxiety. A major reason is stigma.

Stigma is a mark of disgrace that sets a person apart from others. When someone is labelled with anxiety or depression, they're no longer seen as an individual but as part of a stereotyped group. Negative attitudes and beliefs toward this group create prejudice, which can lead to negative actions and discrimination.

STIGMA = STEREOTYPING → PREJUDICE → DISCRIMINATION

Stigma brings experiences and feelings of

- Shame
- Blame
- Hopelessness
- Distress
- Secrecy
- Loneliness, isolation and social exclusion

These feelings can be caused by

- Stereotyping and derogatory labels
- Misrepresentation in the media
- Being treated differently than the rest of society
- Discrimination in housing, employment or services.

Stigma can make it difficult for men to speak about their experiences of anxiety and depression and is a barrier for men seeking assistance.

Other reasons men may not seek help are

- Perceived lack of skills and support
- Need for control
- Preference for action over introspection
- Lack of tools to express themselves or instigate conversations on mental health
- Absence of social support and community
- Feelings of helplessness
- Difficulty accessing services.

“Depression is stigmatised. When people know, they treat you differently.”

– Huy, a man with lived experience of homelessness and depression

You can challenge these barriers and reduce the impact of depression and anxiety simply by changing the conversation. Here's how:

- Frame 'help-seeking' as courageous, self-determining, performance-enhancing, responsible and collaborative
- Discuss his condition, impacts and treatment options in specific detail and avoid general terms. Having a detailed 'understanding' of a condition is more likely to prompt action rather than only having a vague awareness of a broad concept.
- Provide 'instructions for action' rather than 'help-seeking information'.

Is it different for men speaking to men versus women speaking to men?

Not necessarily. While some men feel comfortable talking about their mental health with a male support worker, others prefer to expose their vulnerability to a female. Either way, it's important to build a level of rapport.

Useful resources

- [beyondblue: Men's help-seeking behaviour tuneinnow.com.au/resources/Beyond%20Blue%20Man%20Therapy%20Rationale%20-1098%2005-13.pdf](https://beyondblue.com.au/resources/Beyond%20Blue%20Man%20Therapy%20Rationale%20-1098%2005-13.pdf)
- [Lifeline: What is help-seeking? lifeline.org.au/Get-Help/Facts---Information/Facts-and-Information](https://lifeline.org.au/Get-Help/Facts---Information/Facts-and-Information)
- [Lifeline: Men experiencing difficult times lifeline.org.au/Get-Help/Facts---Information/Facts-and-Information](https://lifeline.org.au/Get-Help/Facts---Information/Facts-and-Information)

TOPIC 2: Conversation GUIDE principles

Recommended by *beyondblue*, these GUIDE principles will help you start, and follow through with, a conversation:

- **G**et ready
- **U**nderstand the situation
- **I**nitiate the conversation
- **D**o try different approaches
- **E**valuate and reflect.

Get ready

Before you 'have the conversation', make sure you're prepared by asking these questions:

What would I do if this were a physical health issue?

Consider the approach you'd take if the person had a physical illness, as many of the principles will be the same.

Have I read the information in Module 2 about depression and anxiety?

Having a better understanding of depression and anxiety can help you identify warning signs or changes in the person.

What's the goal of the conversation?

From something simple like making a connection, to something more detailed like filling in an online depression screening tool, goals will vary depending on the circumstance.

Have I prepared actions I might be able to suggest?

These can include:

- Completing a depression or anxiety screening tool
- Making an appointment with a general practitioner
- Organising a visit from a mental health worker
- Encouraging in self-help activities like physical exercise, or taking part in an organised recreation activity
- Making referrals to men's behaviour change programs, like parenting, relationship and anger management courses
- Suggesting enrolment in e-therapy courses, like e-couch
- Talking with a mental health professional by phone or online

Useful resources

- ➔ *beyondblue*: Telephone counselling
1300 22 4636
- ➔ *beyondblue*: Online counselling
beyondblue.org.au/get-support/get-immediate-support

Understand the situation

Here are some questions you can ask yourself to help you better understand the situation.

Am I the right person to have the conversation?

Who's the best match for this man? Is it a male or female support worker, or someone who already has a rapport with him? It's worth considering cultural differences too (see below for more information). Be aware that the status of men and women in some cultures may impact on the decision regarding who has the conversation.

Either way, it's important to build a relationship before talking about depression and anxiety. Mutual respect and trust will help you recognise if a man is struggling with anxiety or depression.

What's the best time and place to talk? How do I create the right environment?

Depending on the circumstances, the best time to talk could be the morning, lunchtime or end of day. Whatever you choose, privacy is important. You could meet at an office, where the person is living or a nearby café. For some, a café may be stressful and intimidating so it's best to use your judgement.

What else is going on?

Are there other issues which need addressing such as physical ill health, substance use/misuse or some other crisis that might add to the challenge of getting him to talk about his mental health.

What else should I consider?

Make sure basic needs have been met, like food, clothing and shelter. If a man feels valued and important, he's more likely to be open to a chat. Also, turn your phone on silent so you can give him your undivided attention.

Cultural considerations

Men from different cultures may face unique barriers when seeking help for depression and anxiety. There may be a stigma associated with mental health, a lack of knowledge about available services, language difficulties and social isolation.

You don't need to be an expert, just be culturally sensitive. Get the man to help you understand their culture, and read about their beliefs and traditions. It may shape the way you approach the conversation.

Handy tips when talking to men from culturally and

linguistically diverse backgrounds

- Consider whether a male or female worker may be more appropriate
- Link with culturally appropriate services
- Consider culturally specific attitudes towards depression and anxiety
- Gain an understanding of religious and spiritual attitudes of specific cultures
- Consider the importance of family in certain cultures and the need to include them in these conversations and referrals
- Use networks, such as migrant resource centres, to allow men to chat in a culturally appropriate setting
- In working with CALD communities consider the impact of men 'owning' or having a mental health issue
- Ask about their heritage and community to help understand their background, and get them to educate you about their culture
- Find out how their culture might respond to someone who has depression and anxiety
- Highlight and stress confidentiality.

Handy questions

"Do you need an interpreter?"

"Can you tell me some things that are important to you about your culture? They could be beliefs, rituals and even important dates."

Understanding a man's beliefs and cultural differences means you avoid giving him information that may be irrelevant or disrespectful.

"You come from [country]. What major differences would you say there are, if at all, with [country] and here in how people respond to and talk about depression and anxiety?"

It's important to note that some cultures and languages don't have words for depression or anxiety. Try talking about emotional distress or emotional wellbeing, as well as physical symptoms of psychological distress.

Once you know the differences, it's easier to break down barriers about what he may expect from Australia.

"Is the medical system in [country] similar to here in respect to getting a good service?"

If he's had issues getting a good service in the past, ask him if he'd prefer a GP or a worker from his culture.

"Can I explain to you how a mental health worker or a GP can help you?"

Sometimes men don't see a GP or a mental health worker because they're unsure what to expect.

More information

For more information about depression and anxiety within other cultures, visit the *beyondblue* website or see the links below.

Useful resources when talking to Aboriginal & Torres Strait Islander people

- *beyondblue*: Resources for Aboriginal and Torres Strait Islander people
beyondblue.org.au/resources/for-me/aboriginal-and-torres-strait-islander-people
- *beyondblue*: Depression – guidelines for providing mental health first aid to an Aboriginal or Torres Strait Islander
tuneinnow.com.au/resources/Indigenous%20mental%20health%20first%20aid.pdf
- *beyondblue*: Cultural considerations and communication techniques – guidelines for providing mental health first aid to an Aboriginal or Torres Strait Islander
tuneinnow.com.au/resources/Cultural%20considerations%20Indigenous%20mental%20health.pdf
- Lifeline: Suicide prevention toolkits for Aboriginal and Torres Strait Islander communities
lifeline.org.au/Get-Help/Self-Help-Tools/Tool-Kits/Tool-Kits

Useful resources when talking to multicultural people

- *beyondblue*: Resources for multicultural people
beyondblue.org.au/resources/for-me/multicultural-people
- Mental health in multicultural Australia: Advice and support to providers and governments on mental health and suicide prevention for people from CALD backgrounds mhima.org.au

Talking with a refugee may uncover some trauma. You could refer to an organisation that helps refugees who have survived torture or war-related trauma.

Useful resources when talking to refugees

- Association for Services to Torture and Trauma Survivors (WA) asetts.org.au
- Companion House (ACT Torture and Trauma Service) companionhouse.org.au
- Foundation House - The Victorian Foundation for the Survivors of Torture (VIC) foundationhouse.org.au
- Forum of Australian Services for Survivors of Torture & Trauma (FASSTT) fasstt.org.au
- Melaleuca Refugee Centre (NT) melaleuca.org.au
- The Phoenix Centre (Tasmania) mrchobart.org.au/Phoenix/Phoenix.html
- Queensland Program of Assistance to Survivors of Torture and Trauma qpastt.org.au
- Service for the Treatment and Rehabilitation of Torture and Trauma Survivors (NSW) startts.org.au
- Survivors of Torture and Trauma Assistance and Rehabilitation Service (South Australia) sttars.org.au

Initiate the conversation

Talking with men about how they're feeling can help you understand if they're experiencing anxiety or depression. You'll gain a sense of how, why and what they're thinking. The symptoms checklist in Module 2 will help you.

Here's how you can start a conversation, and keep it going.

Don't make assumptions or attempt to make a diagnosis

Remember, it's not your role to diagnose depression or anxiety, or to provide counselling. You're here to assist men to access the support they need.

Focus your effort on a genuine concern about health

It's important to let a person know you're concerned, and why. Try saying: 'I'm concerned about your health...' or 'I've noticed you don't seem yourself...' Write down what you want to say and how you're going to say it.

Some men deny depression and anxiety, despite being on medication. Once you've clarified their medication, it may lead to a more in-depth conversation.

Use open-ended, non-judgemental language

Open-ended questions are a good way to start a conversation. They require more information and can't be answered with a simple 'yes' or 'no'. To show you're listening, maintain eye contact and sit in a relaxed position. Let the conversation go at his pace.

"You can tell when a worker isn't on the ball or not listening. And then I'm thinking, you're not really helping me so go away."

– Peter, a man with lived experience of homelessness and depression.

Do

- Spend time with him
- Be supportive and understanding
- Encourage him to talk about his feelings
- Listen to his concerns
- Be respectful and polite
- Allow for silences
- Let him take his time
- Use clear and simple language
- Respect the right not to talk
- Learn about causes
- Find out about treatment options
- Workshop conversation starters with colleagues.

Give examples of others in a similar situation

If appropriate, and if you have an example, tell the person about another man who had a similar issue where there was a positive outcome. Just make sure you don't divulge confidential information.

Let him know what support is available

Provide information about organisational support, or direct the person to other self-help resources like these. Men with limited literacy may need help completing forms.

Engagement skills

Here's how you can start, develop and strengthen relationships so you can have a conversation about depression and anxiety. To engage men effectively:

- Always use his name
- Convey interest and concern
- Communicate empathy
- Demonstrate attentive listening
- Be patient during conversation; some silences are very productive
- Show belief in his ability to change
- Show that you're there to support him
- Be receptive and responsive when he walks into your agency
- Be strengths based – find out what he likes and is good at
- Try to relate to him rather than the diagnosis, or what you think the diagnosis might be
- Be flexible. If he misses an appointment, but turns up the next day, try to accommodate him. Don't scold him for coming on the wrong day.

Don't

- Make assumptions or attempt to make a diagnosis
- Judge, blame or criticise
- Get angry
- Argue or disagree
- Lecture or 'tell him off'
- Embarrass him
- Ask too many questions
- Push him to talk
- Dismiss his thoughts and feelings
- Give up on him if he doesn't want to talk – you may get a better response when you try another time
- Tell him what he's 'feeling'.

Tips to help you 'have the conversation' with men

- Approach him gently and slowly, and interact as normally as possible
- Respect his privacy and property
- Listen to what he says. If he says he doesn't have any friends, he may be trying to tell you he's lonely
- Communicate belief in his ability to change
- Try not to make an assumption about what's wrong with him – doing that tends to put people into defensive mode
- Try using the 'naïve enquirer' method of questioning – a gentle, non-confrontational way to ask about someone's wellbeing (see below definition).
- Present a non-threatening stance and a calm demeanour
- Speak in a natural tone of voice and at a normal rate. Use concrete, simple and direct language
- Don't respond to comments that seem unrelated or strange. Stay focused on what's happening in the moment
- Communicate that interactions are voluntary
- Adjust your language to suit the person
- Reflect on your own body language, tone of voice and communication style with a co-worker or supervisor
- Be aware that some men experiencing anxiety and depression may have had negative experiences with mental health services in the past
- If he mentions a pet or family member, make a note so you can remember to ask after them next time you're talking
- Have a conversation about something that interests him, like football
- If applicable, ask him what he used to do for work, whether he enjoyed it and the emotions attached to this
- If relevant, talk about substance abuse and its effects on how he feels
- Talk about his leisure time and what activities or hobbies he enjoyed doing previously. Try to find out why he lost interest, and if he wants to reconnect with those activities again
- Let him know you're genuinely interested; this makes it easier to start the conversation next time around
- Disclose something appropriate about yourself, like your own pet at home
- Don't promise the world. Be realistic and don't set him up to fail.

Stay interested and curious when asking questions. It's less confronting, keeps the conversation going and is more likely to encourage a person to take action.

What is a Naïve enquirer?

The concept of 'not knowing'. Ask things like:

- 'In what way...?'
- 'What else...?'
- 'Can you tell me more about...?'
- 'What do you mean by...?'
- 'How did you know to do that?'

Conversation starters

Starting the conversation can sometimes be the hardest part. Once you start, the rest of the conversation will often just flow. Try asking about family, relationships, any tension or problems that have, or possibly still are, occurring. By starting a conversation, you're showing him he matters.

Here are some conversation starters to get you going:

- "How are you travelling at the moment?"
- "Your housemates have noticed you're spending a lot of time in your room" or "What I'm seeing is that..."
All you're doing is commenting on observations. The success of this strategy will depend on the relationship you have with the person.
- "What I've noticed is..."
- "There's something I'd like to discuss with you..."
- "How are you feeling?"
- "How are you coping with your situation at the moment? I know you have a lot going on"
- "I notice you seem different today – maybe a bit on edge? Are you feeling worried or anxious about something? Have you talked to anyone about this? Do you have a GP? He/she could be a good person to talk to about this kind of stuff."
- If your organisation has access to the Recovery Star (outcomesstar.org.uk/outcomes-star-home/outcomes-star-australia.html) use it to find out where the person is at with their mental health.

Sample dialogue

- Man:** I don't feel like going to the appointment today.
- Worker:** Okay. How come?
- Man:** I don't know, I guess I just don't feel up for it today. I've been a bit flat recently and I just want to stay in bed.
- Worker:** Okay. That's no problem, I'm sure you can get another appointment for next week. How long have you been feeling flat for?
- Man:** A few days...maybe a week.
- Worker:** Did anything specific happen to make you feel like this or has it just been a gradual building?
- Man:** Yeah, it's just sort of got worse I guess. There's no real reason why.
- Worker:** Has this happened before at all or is this something new for you?
- Man:** Yeah, it happens quite a lot I suppose. More and more over the last year probably. I just can't be bothered doing anything and generally just want to stay inside... and not see anyone...
- Worker:** It sounds like it must be quite tough for you at the moment. Hey, have you ever talked about it with anyone else? Have you thought about chatting it over with your GP at all?
- Man:** Ah, I don't know if it's that bad. It usually just passes with time and I just manage to get on with things.
- Worker:** Oh okay, but still, it might be worth just making an appointment and having a chat all the same. It can't hurt to chat it over with someone who knows what they're talking about. I'm just thinking that if you're missing appointments and not seeing people it could be a good idea. How about this... if you make an appointment then I'll come along with you if that'd help? Anytime that works best for you. Just give me a couple of days notice and I'll clear the time in my diary to come along.

Motivational interviewing

Making someone believe in their own ability to achieve their goals can motivate them to change. It takes a supporting relationship, open-ended questions and positive affirmations, with no judgement or labels.

Motivational interviewing is made up of three parts:

1. Collaboration: A partnership that honours a man's expertise and perspective.
2. Evocation: Using a man's own perceptions and values as the motivation for change.
3. Autonomy: Providing all the options and information so he can make an informed choice himself. He then owns his decision and should be supported even if the outcome isn't a success.

Open-ended questions

- "How are things going?"
- "What's most important to you right now?"
- "Hmmm interesting... Tell me more..."
- "How did you manage in the past?"
- "How can I help you with that?"

Positive affirmations

- "I'm really glad you brought that up. So many people avoid seeking help. It says a lot about you that you're willing to take this step."
- Motivational interviewing is a useful skill for you to learn. If you'd like to find out more, visitmotivationalinterview.org/quick_links/about_mi.html. Training courses are also available.

When things don't go to plan

Don't worry about not knowing exactly what to do.

You can:

- Thank him for being open and honest
- Give him a timeline for when you'll get back to him and what information or support you'll find
- Ask him what he needs right now and try to put strategies in place to ensure his safety and wellbeing.

Do try different approaches

Don't be disheartened if things don't go to plan

Men who are experiencing anxiety and depression need positive signs and reassurance they're not alone. You could provide examples of other men you've supported through their anxiety and depression.

Persist gently – don't give up

Some men might not acknowledge the changes you've noticed. They might say: 'There's nothing wrong, I'm fine'. It's up to you to be a detective - ask more questions or try a different approach. But don't give up. Keep trying to have general conversations. It builds trust and rapport.

Conversation starters when things aren't going to plan

"You seem reluctant to talk. Do you find talking about personal issues difficult?"

Don't try and force a person to talk. Instead, try asking: "Do you mind if I call you in a week to see how you're going?" If he declines that offer, give him your number and suggest he call you if he changes his mind.

"It's ok, you can talk about this with me"

If he says he's fine, you can say: "I'm hearing you say you're fine, but you're in your room a lot. Why do you think your housemates might be concerned about that?"

Don't be annoyed if he doesn't want to talk. Simply try again another day.

Bear uncomfortable silences

Silences may occur in the conversation – don't rush in to fill the gaps. He may be thinking about what you've said and formulating a response.

Leave the door open for future discussion

You won't always have a resolution after one conversation, so make sure you leave the door open for discussion at a later time.

You could:

- Try connecting through incidental contact like passing each other in the corridor, or if relevant, at mealtime in the dining room
- Suggest going for a walk or a drive if you think he might feel more comfortable in that situation
- Take part in a recreation activity. Something enjoyable can be a mood lifter and provide new opportunities to connect.

Reassure and inform

Men who are experiencing anxiety and depression need positive signs and reassurance they're not alone.

They may have

A common & treatable medical illness

They are not

Weak

Lazy

Crazy

Incurable

Alone

They can

Take action

Get well

Learn to manage their illness

Live a normal life

You

Can listen

Can help

Can support

Can really care

Evaluate and reflect

What happens next depends on what you learnt during your conversations and the perceived severity of the depression or anxiety. If appropriate, follow up to see how he's going and whether he's ready to 'take action'.

It's a good idea to get some support for yourself – more about this in Module 4.