



## APPENDIX 2: Results of AMSA Health Partner Interviews

### Background

The Project Steering Committee added an additional stakeholder group to be consulted: AMSA partner organisations in health activities. It has long been a requirement of AMSA's Funding Agreement with the Commonwealth to develop partnership programs with men's health services providers and this was to be largely achieved through the appointment of a Community Engagement Coordinator.<sup>1</sup> Because the overarching purpose of this project was evaluation of AMSA's performance against their funding agreement, consultations with a representative sample of six of AMSA's partner organisations was added to the consultation process.

A total of six AMSA health partners were consulted on their partnership and collaboration with AMSA, AMSA's financial management, business processes and performance; communication with AMSA and the sustainability of the working relationship as well as how they were referred to AMSA. The six health partners included the National Heart Foundation, Melanoma Patients Australia (MPA), Australian Hearing, the Department of Veterans' Affairs (DVA), Foundation 49 and the Alzheimer's Association of Australia.

Representatives of each of these organisations were either interviewed by telephone or chose to complete a written response to the interview protocol. Not all informants answered every question. For example, most did not feel able to comment of AMSA's financial management, as it was not relevant to the type of partnership arrangement. A summation of informants' views is presented below.

### Partnership and collaboration with AMSA

Four organisations had been in partnership with AMSA for more than 5 years, and the remaining two had been collaborating with AMSA for 2-5 years. Three of the health partner representatives consulted had been involved with AMSA in their current role for 2-5 years, two for more than 5 years and one for 1-2 years.

All six health partners indicated that the key purposes of their partnership with AMSA were to provide health information to men and make men aware of their services. Five out of six also agreed that key purposes included: getting access to adult males, encouraging men to use their health services, bringing their health services to men in their local sheds and promoting particular health events or health campaigns.

Overall, half of the health partners were very satisfied, and the other half were satisfied that the partnership with AMSA has fulfilled its key purposes. Some explanations for this rating included: communication, strong collaboration and the fact that AMSA is easy to work with. Other explanations were: the length of time the partnership had been established and involvement in the Spanner in the Works program. One health partner said that people in their target group are likely to be Shed members and that their relationship with AMSA enables them to access this community and provide information on their services to this group. Other reasons cited for the partnership fulfilling its purposes included: AMSA being a key important part of their network, an extremely thorough and professional

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<sup>1</sup> AMSA Funding Agreement May 2010 and Deed of Variation No 2. 2012.

organisation with Men's best interests at heart; the people in charge being good to get along with, willing to assist and instrumental in helping the health partners as well as AMSA having strong governance.

According to one health partner, factors that helped the purpose be fulfilled included the help of the designated AMSA staff member who always keeps them in the loop and gives feedback, for example, on distribution numbers and local evaluation. This staff member gives them a good understanding on how their messages are reaching Men's Sheds. This health partner representative noted that their organisation is kept 'on the radar' by AMSA, as they receive phone calls about current initiatives that may apply to them. Another health partner mentioned that the same AMSA employee has developed a good working relationship with them over many years as he is passionate, helpful, professional, has good ideas and has been instrumental in AMSA's growth. Another health partner noted that they have similar goals to AMSA in terms of health checks, social inclusion and support for men, particularly older men and commented that so few staff do so much in the AMSA team and that it must be hard to cover all links and partnerships well. This health partner went on to say that they had some great wins together [with AMSA] and some massive failures but all in all, achieved some great initiatives and collaborations. Several of the health partners reported that there were no hindrances at all to the purpose of the partnership being fulfilled. However, in terms of the hindrances, another health partner noted that their organisation would like to be engaging with more sheds. They know their service can be a tricky topic and is not always top of mind. This representative also noted that only a small percentage of the sheds have a health event and they are not aware of how effective the Spanner in the Works program is, some more information on how it is marketed would help them in putting together a solid campaign. Another health partner representative noted that it's a shame the hub website<sup>2</sup> was closed down.

The six health partners described what was provided by each party under their agreement with AMSA. All six health partners said that their organisation provides health information for AMSA members. Five out of six indicated they provide access to their website for AMSA members and experts to speak to men about health. Two health partners said they provide in kind support and staffing to support and administer and one health partner noted that they provide access to their membership and funding. Five out of six health partners indicated that AMSA provides locations to speak to men about health. Four said that AMSA provides access to AMSA membership and the AMSA website. Three said that AMSA provides locations to conduct health checks. Two noted that AMSA provides in kind support. One health partner said that they don't have a formal agreement, just a strong ongoing relationship with AMSA<sup>3</sup> and they don't really need a formal agreement - they simply agree to collaborate and hold discussions as to future needs of the Sheds and their members and keep an open and clear discourse with them in mind. Another health partner commented that that their agreement with AMSA is highly successful, appreciated and mutually enhances their shared goals. They went on to say that AMSA 'gets good information out there' through the websites and partnering with them is 'cross pollination to improve health and wellbeing'. Another partner mentioned that their agreement with AMSA is flexible yet focused.

### **Financial Management**

Only one health partner could comment on whether or not AMSA met their organisation's expectations regarding financial management, noting that they are very well run, that this was only an impression and there was no squandering of funding that the representative could see.

### **Business Processes**

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<sup>2</sup> Men's Shed Online, funded by Beyond Blue and closed in July 2016 as a result of strategic priorities of the funder.

<sup>3</sup> Evaluator comment: Most partnerships are documented as Memoranda of Understanding, using a template MoU. This response is either an aberration or an error by the informant.

One health partner commented that their organisation has had a positive experience with the way AMSA's business processes work, noting that they are efficient and follow up on areas when required. This health partner went on to explain that it doesn't feel like hard work to work with them, that they are collaborative and both sides are committed to meeting timelines as efficiently as possible. Another health partner said they could only provide feedback regarding their contact with the AMSA Community Engagement Coordinator and that the business processes have been very professional. Another health partner commented that AMSA's business processes work very well and efficiently and that other organisations aren't as efficient. None of the health partners were able to suggest any improvements to business processes.

### **Performance**

Health partners were asked how they measure the performance of the partnership. Reported measures included: evaluation from AMSA (reach of messages); increase in requests for presentations at Men's Sheds (this organisation is not actively promoting due to lack of resources, not a core part of their business); queries through health information services (telephone based service); the number of events held and number of men who have used their service; subscriptions to their organisation's magazine by AMSA members; checks on the database to see resources accessed; requests for resources; the number of connections made by Sheds to their service; the number of visits to their web site from AMSA's web site and the number of talks and links made to Sheds and areas.

Of the four health partners who commented, their expectations of the partnership's performance have all been met. One health partner commented that they would like to see more events being held as well as the opportunity to communicate with members via different channels. Another health partner noted that getting their health message across is their key purpose, and that AMSA helps with that. Another mentioned that, subject to the available staff AMSA have to address Shed needs, they are pleased with the results but would always like more.

The health partners see the strengths of AMSA's performance in their partnership arrangements as: AMSA's reputation, growth year to year, doing something right and it being a good initiative; the Spanner in the Works program; the ease of dealing with AMSA staff; the Sheds operating relatively autonomously with the option to opt into any campaigns that the organisation provides; AMSA's Community Engagement Coordinator has been proactive in seeking health partner support for projects and is supportive of suggestions for greater involvement or linkages if required; connection; a good relationship. Most health partners did not comment on any weaknesses however one representative mentioned AMSA's ability to address issues at the appropriate time and in a timely fashion and that this is unfortunately lacking, due to their lack of available staff and each member's particular focus area. Another mentioned not being able to settle on how to utilise each other's databases, due to privacy and confidentiality clauses and that had they reached agreement this could have assisted with performance and is therefore something which could be looked at in the future.

One health partner identified some ways AMSA could improve its partnership performance noting that they would love to see how they can communicate more effectively with the Sheds and their individual members, citing a lack of resources and that more staff would lead to more contact which could develop a larger partnership including more health checks. Another identified finances as a barrier, as AMSA is a not for profit organisation. This health partner noted that every organisation can make improvements and these are always subject to available resources and that numbers of staff and areas of focus should be the first areas for AMSA to address.

### **Communication**

One health partner said that they have no expectations of AMSA in terms of communication as staff always give them advance notice and they are kept in the loop. Other health partners noted that they just expect to communicate when needed or the expectation is ongoing communication as required regarding key projects. These health partners indicated that these expectations are being met by AMSA.

Another health partner commented that communication is currently working well and it's mainly a matter of AMSA ensuring that they communicate effectively about what they are up to, so that the health partner can offer help. This health partner goes on to say that the memorandum of understanding means they can pass on updated information and communicate effectively. Another two health partners mentioned that if AMSA could get more financial support, more people and more assistance that this would enable better communication. One health partner representative went on to say that

*'AMSA has its focus on the Sheds and their role in assisting them to address issues and processes within the Shed environment. Health is not a major focus and neither should it be as the Sheds are there to address a social need, that in itself addresses the health needs of its members and this is the beauty of this model. As for communication, once again it comes down to numbers...if the Sheds have needs these are addressed first then outside programs and organisations fit in...we need to be patient.'*

### **Sustainability**

All health partners felt that their partnership with AMSA is sustainable. Some comments from the health partners included: *'I can't see why the partnership with the AMSA would not be sustainable as there is a lot of good will and aside from staff resources, it doesn't require funds, so it is easy to continue'*, *'Yes, it is [sustainable] as Men's health is extremely important and we see AMSA as a very important partner in promoting that message.'*

One health partner commented that they see investment and building upon the relationship and trust as an enabler to sustaining the partnership, noting that if the relationship stays the same, there is no reason for it to stop. However, barriers include capacity and funding. For example, if staff retired, that would be a barrier.

### **Referrals**

Three out of the six health partners heard about the AMSA through a formal approach by AMSA. Other health partners indicated that they heard about AMSA through word of mouth and local relationships.

Some reasons given as to why they chose to collaborate with AMSA included: they believe it [Men's Sheds] is a wonderful initiative, access to a target group, it was a nice fit, it is getting hard to reach some communities (isolated communities difficult to get information to), it made sense to work with AMSA. AMSA aligned well with their campaign's target audience, similar project aims and target group, the opportunity to develop an ongoing partnership, they recognised the growing importance of AMSA in terms of men's health, it was an 'amazing opportunity' to provide information to vulnerable men in the community and to reach men you need to go where men are and AMSA was a logical link in this process.

All of the health partners who answered the referral section of the interview said they would recommend AMSA to other organisations. Some of the reasons given include: due to the experience and quality of the work and the cause, it's an easy sell (you don't need to sell it, it speaks for itself), they've always had good dealings with AMSA and feel that any other organisation focused on men's health would benefit from partnering with them, it's an organisation that accepts all men from all backgrounds, SES and nationality. According to one health partner, AMSA is one of the few organisations that does this well, it's one of their strengths. One health partner commented that yes they would recommend AMSA, however,

*'Sheds are for Sheddors and Sheddors are there for themselves, don't make the mistake that you or your organisation's goals are more important than the men'.*

Another final comment made by one of the health partners was that AMSA is one of the most exciting organisations, the idea of Men's Sheds is taking off overseas, it's a social movement for men and if an Australian example can be replicated, it's a fantastic opportunity for men to go to a 'sanctuary'.