Report on

Men’s Health Information Day

Blacktown NSW 2148

November 2011

NSW EDUCATION PROGRAM ON FGM
Acknowledgements

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- Mr Mohamed Dukuly
- Dr Fouad Botrous
- Mr George Kapake
- Dr Ramsis Gayed
- Mr Eyad Ahmed
- Dr Ahmed Ahmed
- Pastor Chris Bonsu
- Pastor Peter Kekere
- Mr Mansour Razaghi
- Mr Assefa Bekele
- Mr Peter Gilbert
- Mr George Barker

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NSW FGM Men’s Advisory Group: for attending meetings and preparing presentations.

- Dr Ahmed Ahmed
- Mr Ahmed Natq
- Mr Alpha Pecos Bah
- Mr Assefa Bekele
- Mr Hashim ElRawe
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Men’s Health Information Day

Background:

The NSW Education Program on FGM officially commenced working with men early in 2006. Several men’s consultation sessions were held prior to the organizing and holding of the first Men’s Seminar on Women’s Health in 2006. Fifty (50) men attended from 6 communities that were identified as practicing FGM.

The NSW FGM Men’s Advisory Group was formed as a result of the feedback from the 2006 Seminar. Through the Advisory Group and consultation with men from the Program’s target communities, it was deemed necessary to hold Human Rights Training for men. A full day of training was organized and held in August 2009. Eleven (11) men received certificates with 5 of them being a part of the Advisory Group.

The Second Men’s Seminar on Women’s Health Issues was held in June 2008. Fifty-five (55) men attended, with many taking an oath to take measures to eradicate the practice of FGM.

The aim of the NSW Education Program on FGM is to educate and inform the target communities of issues pertaining to their communities and empowering them to bring about change. The best strategy in assisting men to take a stand against the practice is providing information and raising awareness of the adverse physical and mental health outcomes FGM has on girls and women’s health.

It works on the premise of empowering members of the community to take ownership of issues affecting them and to develop their skills to work towards bringing change and better outcomes through discussion and awareness.

The NSW FGM Men’s Advisory Group has been assisting the Program in translating an information pamphlet on the NSW Legislation against FGM into their languages. This pamphlet provides details on the legislation and explains in simple terminology the consequences of breaking the law.

Women attending the “Women’s Health and Traditions in a New Society” event stated that their husbands were asking why there was no similar program for them. They were expressing their need for information on men’s health matters and the health care services that are available for men in NSW.

The Men’s Advisory Group were eager to hold a Men’s Health Information Day. The aim was to encourage younger men as well as older men to attend and to be a part of the discussion around important health issues for men and FGM and its affect on the relationship with their wives/partners.

The program for the day would include many short presentations on men’s health issues and a few that would include FGM.

Several members of the Advisory Group prepared and presented several topics on the day.
As White Ribbon Day was held on the 25th November it was deemed appropriate to acknowledge and participate in this event through raising awareness and wearing the white ribbons. These were supplied by Ms Kate Lamb, Women’s Health Advisor, Sydney West Local Health District (SWLHD).

Venue Setup:

The Blacktown Workers Club was chosen as the venue for the day, because of its close proximity to Blacktown Railway Station, and its familiarity with many of the African men who reside in Blacktown.

The function room was set up with round tables of 8 participants sitting in a crescent shape, all seated towards the front of the room.

An Information table was set at the rear of the room with information sheets on services and health topics for the attendees to take with them. Transcultural Mental Health supplied bags and pens for the day.

Another two tables were set at the rear of the function room with the breakfast spread set on them.

Registrations were taken at the door with each man receiving a white ribbon, a Transcultural Mental Health Service folder, a raffle ticket and a lunch ticket.

The day commenced with breakfast. The program commenced at 10:30 am, which was later than planned as few men had arrived on time and there was very heavy rain.

Ms Linda George, the Community Education and Development Officer commenced the program with a warm welcome to everyone (See speech below).

Welcome by Linda George

I would like to welcome each of you on this special day around men’s health issues.

This day has come about because women who attended our programs said that their husbands wanted to be involved in Health Information sessions too. Other men in the community have also requested information on health awareness for men.

Health and being healthy, is not on our minds or agenda, until we get sick.

Being healthy, both physically and mentally, is very important if we
wish to be productive and positive in our lives.

The Men’s role as heads of households, leaders, husbands and fathers demands that they be strong, alert and healthy.

Today you will be presented with a lot of information on how to take care of yourself and hopefully prevent future health problems.

Yesterday was White Ribbon Day. The White Ribbon campaign began in 1991 by a Canadian men. It is the first male led campaign to call for the end of violence against women in the world. It was men urging other men to speak out against violence against women.

However, we will also be looking at an issue that affects women’s health… a harmful tradition that has continued for many years. Silently women, men and the whole community have suffered.

I believe that men are needed to ‘get on board’ to protect and stop harmful traditions from continuing. When one member in the family suffers, the whole family suffers and this extends so that the whole community suffering.

In 1906, Mr Babiker Badr, a Sudanese teacher, approached the British authorities who were ruling the country at that time, to ask for permission to open the first girls’ primary school. His application was refused, on the grounds that it might cause civil unrest.

In 1907 he applied again. This time his application was approved. He started the first primary class for 8 girls in a small room. Some of the girls were his daughters, a niece and neighbours daughters. That was the beginning of education for girls in Sudan.

Since that time, Sudan has developed women’s education at all levels. Sudan’s first women’s University was established 1966.

Dr Badr’s son and daughter today run and lecture at El Ahfad’s University. Many generations of women have graduated in all areas of degrees. Several of them are in Australia practicing as medical doctors, psychologists and social workers.

One man’s dream, one man’s conviction, one man’s stand changed the whole outlook for Sudanese girls and women. The first female doctor in the whole of Africa was from Sudan.

I trust that each of you will also be a man who stands in the gap today, and brings positive change for his family and future generations.

Ms George introduced Mr Sarjo Bah who was acting as the Master of Ceremony for the day. Mr Bah works as a Multicultural Officer at Centrelink.

Introduction of Program by Vivienne Strong
GOOD MORNING EVERYONE

Firstly I would like to say how fantastic you all are for getting here so early. As you probably know today’s Men’s Health Day has been developed by the staff of the NSW FGM Program.

NSW FGM works as a team – each member has their own area of expertise and each contributes to the program equally.

Some of you will know these people others won’t – so let me introduce them to you

- Denise Maguire is the Technical Support and Administrative Officer
- Linda George is the Community Education and Development Officer
- Shairon Fray is the Professional Health and Allied Health Services Educator
- I have the pleasure of managing the NSW FGM Program and another program called Women’s Health at Work.

So why a Men’s Health Day and why is a women’s health program holding a Men’s Health Day

The NSWFGM Program has been managed through WSLHD since it commenced in 1996.

In that time we have had 2 Men’s Seminars on Women’s Health, both with a focus on the practice of female circumcision, the impact that practice has on the health of women and girls, and the global policy of Human Rights and FGM. At each of these Seminars the question was asked – ‘so what about the men’s health’ – we heard you say the ‘men need to know about their health also’ and many of you are not able to access this information.

So here we are today – we have a very full program for you, and at this point I would like you to congratulate Linda on being able to obtain speakers who are experts in their field of medicine and health to present this information to you – Linda has spent many hours developing the program and persisting in obtaining speakers who have kindly come – or are coming – to present to you.

Also working with Linda has been a small team of men from your communities and we thank them for the work they have contributed to the day.

Many of you have come to this country as refugees and we know that when you come you are basically healthy – but after a few years of living in Australia you also begin to develop poor health.

What are some of the points we know about men’s health –

1. Congestive heart failure - according to the Heart Foundation there are 220,000 Australians living with heart failure and each year 30,000 people are diagnosed with it for the first time.
2. what we all eat affects our risk of cancer, heart disease and diabetes.
3. one health issue that we are not focusing on today but is no less important is lung cancer. This is the commonest cause of cancer deaths in Australia with
over 7,000 people dying each year - the vast majority of whom are either current or ex smokers. The trouble with lung cancer is that it's aggressive and fast growing so it's usually found too late to be operated on and surgery is really the only hope of a cure for most people.

Those are just 3 health issues that affect men – and after today we hope that you will know what makes and keeps you healthy and how your families can also stay healthy.

On behalf of the NSW FGM Program I would like to say welcome to you and thank our speakers for giving of their time and sharing their knowledge with you.

Mr Sarjoh Bah took on the role of introducing and welcoming each of the speakers as well as presenting each with a token gift from the program and thanked them for their valuable presentations and giving of their time to be a part of the day.
Mr George Kapake

Breakfast

Information sheets and booklets
Slides on Logos of FGM programs from around the world
Men and Health

A power point presentation was prepared by Mr Ahmed Natq on the World Health Organizations report on Young People’s Health Risks and Solutions.

Dr Mustafa Bakr, a young Sudanese medical doctor presented the report which gave statistics on a wide range of issues giving a holistic picture on the high risk behaviours and lifestyle’s that result in negative affects on youth health and which lead to drastic consequences on young peoples lives across the world. The report presented suggestions on solutions that could assist in curbing and decreasing the numbers of deaths due to these behaviours.

The presentation included information on:

- Overall review of health risks affecting youth and adolescents
- Millennium Development Goals set out by the World Health Organization for young peoples health
- Early pregnancy and childbirth
- HIV and recommended behaviours to limit the spread
- Malnutrition and obesity and recommended changes to address each of these
- Mental health and care
- Tobacco use and cessation
- Harmful use of alcohol and responsible use of alcohol
- Violence and resisting and stopping violence
- Injuries (motor vehicle accidents) and safety
- The Work Health Organization’s response

STARRTS Services – Mr Mohamed Dukuly

The next speaker was Mr Mohamed Dukuly from Services for Treatment and Rehabilitation of Torture and Trauma Survivors (STARTTS). He presented information on the importance of mental health to the overall well-being of people. The core message of his presentation was that:

- The refugee experience can have impact on the mental health and wellbeing of individuals and families within the refugee communities. Being aware of this and working towards attaining good mental health and wellbeing is essential for effective settlement in Australia.
- There are other settlement issues like change of status and roles that can cause serious problem for some refugee men and they need to come out to seek help. Mr Dukuly gave a brief outline of STARTTS services and the outline of the referral pathway to STARRTS and the range of services provided to men, women, youth and families. He also provided information sheets and brochures to be distributed to attendees.

“FICT is a program that is run by STARRTS: The Families in Cultural Transition (FICT) is a group-based program that aims to assist newly arrived adults from refugee and refugee-like backgrounds to anticipate and manage their psychosocial settlement and changing family dynamics during the period of cultural transition.”
High Blood Pressure and it’s Implications – Dr Fouad Bourtros

Dr Fouad’s presentation was very clear and covered the basic definitions of Blood Pressure, the two blood cycles and the Systolic and Diastolic readings and how they are calculated.

![Diagram of the Human Heart]

The presentation provided important information on:

- Variation in blood pressure from one person to another and the factors affecting it.
- Factors that may lead to hypertension.
- The harmful effects of non-treated hypertension, as many men are not aware of the serious damage to health caused by not adhering to treatment.
- How blood pressure is measured.
- How to measure the blood pressure in case of an emergency.
- The treatments of hypertension.

Culture and Traditions – Mr George Kapake

The topic was very different and Mr Kapake engaged the group in an open discussion on Culture. Many of the participants shared their opinions of what culture was, what has an effect on culture, how culture manifests itself, cultural traditions and practices done to women’s bodies, and the positive and negative cultural traditions that people perform. Female Genital Mutilation was identified as a harmful tradition that affects women’s health and well being.

The session was informative and light in content creating a relaxing atmosphere.
Effect of FGM on Women’s Health and Marital Relationship – Dr Ramsis Gayed

Due to Dr Gayed’s limited time and his need to return to his clinic in Liverpool, the program was adjusted a little. Mr Bah introduced Dr Ramsis Gayed and invited him to present his session on “The Effect of FGM on Women’s Health and Marital Relationships”. – as per previous comment maybe only need the heading – the rest is not really relevant o the report

The session was very educational and confronting and included:

- A definition of FGM and the different types was given with clear diagrams.
- Countries where FGM was practiced
- The physical and psychological harmful effects of FGM
- Complications caused by FGM for women at child Birth
- Problems FGM caused in marital relationships (intercourse)

Dr Gayed elaborated on many incorrect concepts and beliefs that are among communities that practice FGM. He explained that women had been taught that the men folk wanted FGM to be practiced. Dr Gayed said that from his observations and what men told him, men did not really understand the extent of harm done by FGM to a woman’s genitals, the harmful health effects caused by the procedure and its negative implications on the sexual relationship between a couple.

Dr Gayed reiterated that many of his patients are now realising that FGM has had adverse effects on their own health and their marital relationship and that is in complete contradiction to what they were taught and believed in the past to be correct.

Dr Gayed encouraged the men to be tools of change and to engage actively in stopping FGM from continuing in their communities.

At the end of the session men commented on the presentation and gave some feedback. One gentleman said that he had believed that FGM was to curb women’s sexual drive and to lessen the chance of promiscuity and falling pregnant out of wedlock. Another commented to the audience that, “This is one of the most sensible presentations I have seen on this issue”.

Ghanaian Drummers – African music – the Ghanaian Drummers who were invited to present African cultural drumming.

This session was vibrant and full of movement and excitement. A welcome song was presented with one of the participants engaging in a dance to the African beat.

The audience participated with clapping and singing with the drummers, who gave directions and words to engage the participants. The distinct cultural performance continued for 20 minutes filling the hall with lively entertainment.

Following the drumming lunch was served in the main restaurant of the club.
Young men’s Youth Services and Programs – Mr Eyad Ahmed

Mr Eyad gave a brief description of his role as a youth worker and the different programs provided for youth and young men. The centre provided a range of services and programs including:

- Mentoring
- Counselling
- Home work and Study groups
- Microfinance
- Trips and outings

Mr Eyad provided brochures on the Rosemount Good Shepherd Youth and family Services.

Islamic Stance on FGM – Dr Ahmed Ahmed

Dr Ahmed said that while FGM was not directly mentioned in the Holy Quran, it was suggested as being a subject of contention between Islamic clerics when discussing the matter.

Some Shia Muslims insist although it is not in the Quran, it is in the “Hadith”.

“Hadith is the collection of the Prophet Muhammad’s statements and actions coupled with the statements and actions of his companions. Hadith is believed to have been collected beginning 150 years after Muhammad’s death in 632 C.E. and it is the basis of jurisprudence for Islamic law, or Sharia law.

http://www.wisegeek.com/what-is-hadith.htm

Some claim that FGM was mentioned as a requirement and should be done lightly. Thus referring to a clitordectomy. Clerics that did not agree with FGM being a requirement in Islam, stated that this contradicts with some of the Quranic verses that state, that “Allah created all humans in the best form”.

Other verses also state that no one is to mutilate of injure another being or cut off any part of another persons body.

Dr Ahmed stated that the debate still continues with some cultures still holding on to the belief that a woman must have some form of FGM in order to fulfil the Islamic requirements.

This however, was not accepted by many Muslims across the world as many Muslim cultures do not perform any form of FGM on their females.

Christian Stance on FGM – Pastor Chris Bonsu

Pastor Chris Bonsu, began by reading portions on the old testament to clarify where Circumcision first appeared in the Bible. He clarified that it was required of Jewish males in the time of Abraham the patriarch of Judaism. However, it was never
mentioned nor required of females. Pastor Bonsu then read from the New Testament and once more clarified that even when it was discussed again in the New Testament females were not in any way mentioned. The requirement in the New Testament was not mandatory, as it was only to represent the purity of the heart and not an outward requirement on the flesh.

The Effect of FGM on Marital Relationships – Pastor Peter Kekere

Pastor Peter Kekere gave a personal account of his own experience as a man who has seen first hand the effects of FGM on the marital relationships.

He explained that as a young man looking forward to marriage, he had believed with all the other young men in their community, that FGM was important in keeping the young girls chaste, in preparation for being their brides in the future. It was a tradition and culture that they had been brought up with. A tradition that dictated that all girls be circumcised as part of their indiction into womanhood and preparation for marriage.

A guarantee that the girl would be a virgin at the time of her betrothal.

Pastor Kekere explained that after he was married he saw how his wife suffered when they were intimate. He was reluctant to upset her and yet wanted to be intimate more often. This had caused problems and frustrations. But he loved his wife and did not want to break the bond between them.

Pastor Kekere said that later, in his work as a Pastor, he observed and listened to many men who stated that they were suffering due to the fact that their wives were not able to be intimate with them as often as they wanted, due to continuing tearing and harmful physical effects of FGM which impacted on the relationship.

Pastor Kekere reiterated that FGM affects a woman’s sexual performance in a negative way. It also has some psychological effects as some women have flashbacks, and negative memories that cause problems with intimacy and these issues hinder closeness in marital relationships.

He said as a Pastor he now preaches against all forms of FGM and believes it should be stopped. He called on the men to take an active role in Stopping FGM from continuing.

Kurd’s In North Iraq Lobby Parliament or Legislation against FGM – Mr Mansour Razaghi

Mr Mansour Razaghi presented some background information on the political struggles of the Kurdish people in North Iraq. He also explained the struggles faced by the Kurdish community, and specifically women to have politicians issue a law banning FGM.

Mr Razaghi presented a historical account on how the practice had once more been introduced after many years of being banned by the former government.
Since the autonomy of the Kurdish people in North Iraq, there was a call to circumcise young girls once more in a bid to re-establish some of the Kurdish cultural practices and traditions to strengthen their Kurdish identity.

This has led to many high school girls being circumcised. Girls who are daughters of women who were not circumcised. In one village alone there were more than 3000 girls circumcised in one year.

The lobbying of many women and men was met with resistance as some Muslim clerics called for it, and politicians did not perceive Female Genital Mutilation as an issue to be discussed at the government level. Many women tirelessly lobbied, to re-establish a law banning the practice in Iraq. Other programs are working at grassroots level through education and information sessions targeting women and girls and making them aware of their rights and the harmful effects of FGM.

Mr Razaghi, said that there are some positive signs that legislation is being looked at to ban FGM, but the fight for real change still continues.

**Diabetes**

Mr George Barker presented a very informative presentation on Diabetes.

The presentation contained an overview of current rates of diabetes in Australia in general and among the indigenous Australians. It compared the figures with those from a number of countries around the world that was represented in the nationalities of the delegates who were present.

There was a brief overview of Type 2 Diabetes and the signs and symptoms to be aware of.

Information on how diabetes develops was very clearly shown through animated slides that clarified what starts to go wrong in the human body, insulin resistance and how it is linked to increased blood glucose, lipids, changes in body fat distribution and hypertension.

A brief outline was given on how these problems contribute over time to vascular disease particularly heart disease, cerebral vascular disease (CVD), peripheral vascular disease, erectile dysfunction and diminished insulin response.

A slide briefly outlined how diminished insulin response in addition to insulin resistance results in markedly elevated blood glucose levels and diabetes and symptoms associated with hyperglycaemia which manifests in lack of energy, increased urine output, thirst, increased risk of infection, blurred vision.

Information on management of diabetes included the need for patients to stop smoking, to exercise and reduce central abdominal obesity.

A brief outline of healthy eating and the importance of exercise were also presented with a close look at how diabetes medications help.

Important information on who should be checked for diabetes included: those who are age 35 and over, with high blood pressure, central abdominal obesity, high cholesterol and those who have a family history of diabetes.
The overall message was one of prevention and early detection of the condition with an emphasis on the importance of healthy eating and regular exercise.

**NSW Legislation against FGM**

Mr Assefa Bekele presented information on United Nations Charter to stop FGM and how the NSW Legislation on FGM came about. He gave examples of the various instruments and conferences that FGM was discussed and condemned as a harmful practice that must be stopped. The session outlined the NSW Child Protection Legislation and the mandatory requirement of service providers and community members to protect any girls who might be at risk of having the practice performed on them either in Australia or overseas. A hypothetical case study was presented to highlight the vital and important role that community members could have in preventing or identifying girls at risk, and giving some suggestion on what action could be taken to protect girls from being circumcised in the future.

The session was quite informative, with many men stating they did not know about the law and implications.

**Sexually Transmitted Infections – Mr Peter Gilbert**

Mr Gilbert presented a power point presentation with information on Sexually Transmitted Infections and the role of Parramatta Sexual Health Clinic in providing education, as well as services to community members who were referred to them.

The session covered information on the following:
- Definition on STI’s
- How STIs are transmitted
- Common Types of STIs
- Where to go for assessment and treatment in NSW
- How to prevent infections
- Statistics
- Other viral infections and parasites that are sexually transmitted.

Mr Gilbert explained that men and women were welcome to come to the centre for private and confidential consultations after making an appointment to see either a male or female nurse or doctors and those appointments could be made over the phone or in person.

**Final Thanks**

Raffle tickets were drawn and prizes distributed.

Ms George thanked all the presenters and the audience for their patience in getting through the day and hoped that the information disseminated was valuable to all the attendees.
Key facts

> More than 2.6 million young people aged 10 to 24 die each year from preventable causes.
> 16 million girls aged 15 to 19 give birth every year.
> 15 to 24 years old, accounted for 40% of all new HIV infections in 2009.
> 20% of adolescents will experience a mental health problem, most commonly depression or anxiety.
> 150 million young people use tobacco (Smoke)
> 430 young people aged 10 to 24 die every day through interpersonal violence.
> 700 young people to die every day due to road traffic injuries.
Mr George Barker

Dr Nuli Lemoh

Ghanian Drummers

Dancing to the African beat
African Rhythm and Welcome song

Participants

Dr Ahmed Ahmed
Mr Assefa Bekele

Mr Mansour Razaghi

Pastor Peter Kekere (left) and Pastor Chris Bonsu (right)
Feed back from Evaluation of the day:

Which Sessions did you find most interesting today?
1. Sexually transmitted infection; diabetes; Ghanaian Dancers
2. FGM, youth issues, diabetes
3. Sexually transmitted infections; high blood pressure and the implications; diabetes
4. Effect of FGM on women’s health and marital relationship; NSW legislation against women
5. All sessions
6. Diabetes; talks on FGM
7. Effects of FGM on women’s health and marital; Islamic stance on FGM
8. Actually most of them, if not all, and that; Islamic stance on FGM; diabetes
9. Assefa Bekele; Dr Ramsis; Culture & Traditions
10. Dr Ramsis; Mansour Razaghi; Pastor Chris Bonsu
11. Complications of FGM; Hypertension; diabetes and complications
12. Topics on the role of Islam in FGM; Music – drumming by Ghana; Christian stance
13. Culture and traditions by Mr George Kpakema; Bo Children’s Hospital, Islamic & Christian stances on FGM
14. NSW legislation against FGM; Kurd’s in NSW – Mansour Razaghi; African music
15. Blood pressure; diabetes, FGM
16. Diabetes; George ….; Dr Ramsis Jayad; Culture and traditions

Which of the following would you like to have more information on: (please tick)

- NSW Health Services (7)
- Gambling (1)
- Hepatitis B (2)
- Smoking & it’s harmful effects (4)
- Keeping children safe (5)
- Men’s Health (6)
- Mental Health (6)
- Parenting of Children (4)
- Marital Relationships (4)

Is there a role for men to stop FGM from continuing?
- Yes (14)
- No
- Unsure (2)

Have you had a general health check up in the past two years?
- Yes (15)
- No (1)

Will you have a general health check in the next year because of what you have learned today?
- Yes (15)
- No
- Unsure (1)

Handouts exhibited and distributed:
- Alcohol and drug problems happen in all kinds of families
- Prostate Cancer - English
- Prostate Cancer- Arabic
- Blood pressure explained
- What every man needs to know - English
• What every man needs to know – Arabic
• Domestic Violence hurts everyone – English
• Domestic Violence hurts everyone – Amharic
• Domestic Violence hurts everyone – Arabic
• When marriages break down, its often men who hurt the most – English
• When marriages break down, its often men who hurt the most - Arabic
• Promoting Well Being - English
• Promoting Well Being – Arabic
• No and No to Female Circumcision – Arabic
• Hospital in Bo, Sierra Leone

**SWOT ANALYSIS carried by Program Staff**

**Strengths**
- Well organised program
- Presentations impressive
- Men’s enthusiasm
- Men receptive
- Location
- Good handouts
- Drummers
- MC very good at pulling it all together
- Men’s willingness and openness

**Weaknesses**
- Weather awful. Raining heavily
- Late & non arrivals
- Unrealistic expectations of being on time + program
- Unnecessary stress was put on coordinator concerning uncontrollable issues
- Too much in program
- No time for questions because of late arrivals and commencement of program
- Venue issues, i.e. IT problems, Workers Club management bringing potential clients through
- No jugs of water
- No activity in afternoon

**Opportunities**
- Opens doors to more activities for men
- Do more programs with men
- Opens opportunities to work with women’s issues and for men to learn in their specific communities
- Men undertake pre-screening
- Use the doctors to present/train other men in men’s health, i.e. prostate cancer
- To contact DIAC re compulsory FGM training for African workers
- One of the men to attend the FGM training
Threats

- Limitations of budget to work with men
- Length of the program
- Some of the men attending may be pro FGM and inform the community not to come to future events.
Bio of Speakers
Men’s Health Information Day

Sarjoh Bah: Master of Ceremonies for the day.
Born and raised in Sierra Leone. Arrived in Australia in 2001. Mr Bah holds a Bachelor of Arts in Primary Education and a Master of Social Science with UWS, Candidate Master of Social Work, Charles Stuart University. Mr Bah is a Qualified Trainer and is currently working as a Multicultural Service Officer with Department of Human Services speaks English, Arabic, Fullah/Pulaar, Krio. He is a member of the NSW FGM Men’s Advisory Group.

Mr Ahmed Natq:
Mr Natq is a Kurdish born and raised in North Iraq. Mr Natq arrived in Australia in 2010. Is currently completing an Advanced Diploma in Sound Production.

Dr Mustafa Bakr:
Dr Bakr arrived in Australia in Feb 2011. Graduated from Faculty of Medicine in Sudan. Worked as emergency Doctor in Sudan prior to arriving to Australia. Is currently preparing to sit for the Australian Medical Council exams.

Mohamed Dukuly:
Mr Dukuly was born and Raised in Liberia. He arrived in Australia in 2005 and holds a Bachelor Art, education History. Mr Dukuly also has a Postgraduate Diploma in Community services, a Post graduate Vocational Diploma in Family Dispute Resolution, and is presently doing a Master's Degree in Social Work. Mr Dukuly currently works with STARRTS as a project officer with Families in Cultural Transition (FICT).

Dr Ramsis Gayed:
Dr Gayed was born and raised in Sudan. He graduated and worked in Sudan as a Medical Doctor in Sudan prior to migrating to Australia in 1989. He is currently working as a General Practitioner at the Trinity Health Centre in Liverpool. Dr Gayed previously participated and presented at the first Men’s Seminar in 2005 and in 2007.

Dr Fouad Boutros:
Dr Boutros was born and raised in Sudan. Graduated from the Faculty of Medicine in Sudan. Attained a diploma in Public Health, Master degree in Public Health, and a Master degree in Nutrition from Holland. Worked as a medical doctor in Sudan for 25 years prior to migrating to Australia in December 1993. Is currently retired.

Mr George (Kpakima)
Mr Kpakima is from Sierra Leone and arrived in Australia in 2005. He is currently working in the Department of Immigration and Citizenship. He previously worked as a settlement Services Officer at Blacktown Migrant Resource Centre and has worked in STARRTS as a bi-cultural facilitator in the family and cultural transitions (FICT) program. Mr Kpakima works casually as a facilitator for the Department of Community Services in the African Learning Circles.
Dr Nuli Lemoh:
Dr Lemoh was born and raised in Sierra Leone and arrived in Australia in 1962 on a Scholarship to study Medicine. Dr Lemoh is a paediatrician and works in a private practice. He is also attached to the Children’s hospital at Westmead. Dr Lemoh is interested in relationships between parents and children. He is also interested in how children learn. Dr Lemoh is currently promoting the Bo Hospital Project in Sierra Leone and is working closely with Rotary Australia to raise awareness and funds for the Hospital. Dr Lemoh previously participated presented at the Men’s Seminar’s in 2005 and 2007.

Mansour Razaghi:
Mr Razaghi is Kurdish and was born and raised in Iran. He migrated to Australia in 1992 with his family. Mr Razaghi holds a Masters degree in Journalism and is currently working as a Construction Union Official and is a free lance journalist with the ABC Radio and TV. He is also a community broadcaster with the Persian Community Radio.

He speaks fluently in English, Persian, Dari and Kurdish

Mr George Barker:
Mr Barker was born and raised in Australia. Mr Barker is currently working as a Diabetes Health Educator with the Diabetes Health Services at Hornsby Hospital.

Mr Assefa Bekele:
Assefa Bekele was born in Ethiopia and after completing high school, moved to Athens Greece on a scholarship. Mr Bekele completed a degree in Engineering and a post graduate degree in Regional & Local Community Development. Mr Bekele arrived in Australia with his wife and 2 daughters in 1988. He is currently working as the Multicultural Community Liaison Officer with NSW Police Force, stationed at Blacktown Local Area Command. Mr Bekele speaks fluently in Oromo & Amharic (2 Ethiopian Languages), Greek and English.

Mr Eyad Ahmed.
Born and raised in Sudan. He arrived in Australia in 2001 as a young teenager. Attained a Diploma in Community Services and is currently working as a Youth Worker with Rosemount Good Shepherd Youth and Family Services.

Dr Ahmed Ahmed
Born and raised in Sudan. Dr Ahmed is a qualified Veterinarian (Animal Doctor). Arrived in Australia with his family in 2002. Dr Ahmed is currently working with Navitas as an Educational Assistant. He speaks fluently in Sudanese Arabic and English. He is a member of the NSW FGM Men’s Advisory Group.

Pastor Chris Bonsu
Born and raised in Ghana. He Migrated to Australia in 1989 and trained as a Pastor at Sydney Training Institute. Pastor Bonsu is Currently employed as Senior Pastor at the Living Word Church in Blacktown. Pastor Bonsu speaks fluently in English & Akan.
Rev. Peter Kekere
Born and raised in Ivory Coast. Arrived in Australia in 2006. Pastor Kekere holds a bachelor degree in Theology and a Diploma (Community Services) He is currently working as a Pastor and Community worker. Pastor Kekere speaks fluently in English, French and Yoruba

Mr Peter Gilbert
Born and raised in Australia. Mr Gilbert works as Registered Nurse at Parramatta Sexual Health Clinic, and has a very keen interest in Men’s Health promotion.
Men’s Health Information Day

Saturday 26th November 2011
9.00 a.m.—3.00 p.m.
Blacktown Workers Club
Cnr Newton Rd and Campbeltown St, Blacktown

The NSW FGM Men’s Advisory Group will be presenting information on various Health Issues affecting Men and Women

Breakfast will be served at 9.00 a.m.
Sessions commence at 9.30 a.m.—3.00 p.m.
Lunch Vouchers handed out at 10.00 a.m. to finalize numbers

Sessions will include:
- Blood Pressure Screening.
- Symptoms and Managing Diabetes
- Sexually Transmitted Infections
- Symptoms of Prostate Cancer and Management
- Harmful Traditions and their Implications on Health
- Sierra Leone, Community Hospital Project in Bo, Sierra Leone
- STARRTS—Services for Men and Families
- Youth and Family Services
- Kurd’s in North Iraq take action to bring change
- NSW Legislation

Please register your name before 23rd November 2011 by calling Denise Maguire on 9840 3877 or Linda George on 9840 3910

Speakers include
Dr Lemoh Nuli
Mr Assefa Bekele

Dr Ramsis Gayed
Mr Mansour Razaghi

Speakers from
STARRTS Parramatta Sexual Clinic NSW Prostate Cancer Foundation
Diabetes Australia Rose Mount Good Shepherd Youth and Family Services
Program
Men’s Health Information Day
Saturday 26th November 2011
Blacktown Workers Club

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<thead>
<tr>
<th>Time</th>
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<tbody>
<tr>
<td>9.00</td>
<td>Registration and Breakfast</td>
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<tr>
<td>9.30</td>
<td>Welcome by Linda George — Senior Health Education Officer</td>
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<td>9.40</td>
<td>Introduction of Program by Vivienne Strong – Program manager</td>
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<td>9.45</td>
<td>Men and Health – by Mr Ahmed Natq - Dr Mustafa Bakr</td>
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<td>9.55</td>
<td>STARRTS Services—Mohamed Dukuly</td>
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<tr>
<td>10.10</td>
<td>High Blood Pressure and it’s Implications— Dr Fouad Boutros</td>
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<td>10.25</td>
<td>Culture and Traditions – Mr George Mansary</td>
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<tr>
<td>10.35</td>
<td>Ghanaian Drummers - African Music</td>
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<tr>
<td>10.55</td>
<td>Blood Pressure Screening</td>
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<td>11.15</td>
<td>Young men’s Youth Services and programs—Mr Eyad Ahmed</td>
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<td>11.25</td>
<td>Dr. Ramsis Gayed – Effect of FGM on Women’s Health and Marital Relationships</td>
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<td>11.50</td>
<td>FGM and men—Pastor Peter Kekere</td>
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<td>12.00</td>
<td>Lunch - Open Buffet</td>
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<td>1.00</td>
<td>Bo Children’s Hospital Project in Sierra Leone—Dr Nuli Lemoh</td>
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<td>1.15</td>
<td>Islamic Stance on FGM - Dr Ahmed Ahmed</td>
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<td>Christian Stance on FGM – Pastor Chris Bonsu</td>
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<td>The effect of FGM on the Marital Relationship – Pastor Peter Kekere</td>
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<td>Kurd’s in N. Iraq lobby to Parliament for Legislation against FGM—Mansour Razaghi</td>
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<td>1.45</td>
<td>NSW Legislation against FGM – Mr Assefa Bekele</td>
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<td>2.00</td>
<td>Sexually Transmitted Infections - Peter Gilbert</td>
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<td>2.15</td>
<td>Diabetes—George Barker—Hornsby</td>
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<td>2.45</td>
<td>Prostate Cancer—Detection and Management - Dr Kayvan Haghighi</td>
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<td>3.00</td>
<td>Evaluation—Raffle Draw and Closing of the Day</td>
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