

On January 8, 2016, Jean Bonhomme MD, MPH of MSM's Department of Psychiatry and Behavioral Sciences participated as an invited speaker at the White House Dialogue on Men's Health.

Morning and afternoon meetings were held. The first meeting at the U.S. Department of Health and Human Services focused on Men and Mental Health, under the direction of Dr. J. Nadine Gracia, Deputy Assistant Secretary for Minority Health and the Director of the Office of Minority Health at HHS. Eight individuals testified about their personal mental health problems with emphasis on suicidal ideation and suicide prevention. Dr. Bonhomme shared concerns as a mental health care provider about prison systems increasingly becoming the default placement for mentally ill persons owing to the widespread closing of mental hospitals; conceptualization of drug addiction as a mental health problem rather than a criminal justice issue; dual diagnosis clients and self-medication; that men might present with depression differently from women leading to frequent under-diagnosis in this population; and gender differences in side effect profiles and ability to tolerate common psychopharmaceuticals.

The afternoon session was the White House Dialogue on Men's Health. Dr. Bonhomme outlined some of the barriers to men's participation in health care, such as lack of public awareness about men's health challenges, mistrust of the health care system, male stoicism and maladaptive self-reliance, and poor participation in health care among males ages 18-29. Lessons learned about increasing men's involvement were presented, such as bringing health screenings directly to the workplace, improved public education concerning men's health issues, peer-to-peer approaches, offering health care at times that do not conflict with men's work hours and the possible use of sports medicine to help keep younger men engaged. Finally, the importance of addressing men's health to the family and society as a whole was stressed, including the increased mortality and poverty rates of widows, the burden of care on the woman in disability, reduced work productivity, absenteeism, and the increased health care costs of advanced illness that could have been prevented by earlier diagnosis. Both presentations were favorably reviewed.