

PROVEN IMPACT

THE NEED FOR NATIONAL SUPPORT

2025 WHITE PAPER

#MENDOTALK

Executive Summary

The Problem

The Australian men's mental health crisis is a national issue impacting everyone. Despite greater awareness around this problem, men still account for 75% of suicides: seven to eight deaths every day. One in five men report feeling socially isolated, and nearly three in ten experience problematic loneliness. Stigma, "tough it out" norms, and a lack of awareness of appropriate services mean 72% of men with mental ill-health do not seek help.

Traditional clinics, hospitals and crisis lines play a vital role but often fail to engage men early. Too many fall through the cracks until problems escalate into crises, with devastating human and economic costs.

The Gap

Government inquiries and strategies have identified this gap repeatedly:

- **NSW Loneliness Inquiry (2025)** – prioritise peer support and mentoring.
- **National Men's Health Strategy (2020–2030)** – reduce stigma, expand prevention and early entry points.
- **National Suicide Prevention Strategy (2025–2035)** – embed community-based, lived-experience models to act before crisis.

Despite these calls, adult male peer-mentoring remains largely unfunded, leaving thousands without support.

Our Solution

Founded in 2018, Mentoring Men delivers:

- Free, one-to-one life mentoring for adult men.
- Trained volunteer mentors, carefully matched with mentees and supported by professional oversight.
- Accreditation by Suicide Prevention Australia as best-practice peer support.

We have already facilitated 3,500+ mentoring relationships nationwide, building resilience, connection and confidence before challenges escalate. Mentors provide a trusted, stigma-free relationship, a "mate in your corner" and, when needed, guide men to professional care.

Why Investment is Urgent

This is not a pilot – it is a proven, scalable model. Yet demand is outstripping capacity:

- 42% of men in our 2025 Men Do Talk study were open to mentoring but unaware the service exists.
- Volunteers are ready and keen to help, but without sustainable funding we cannot expand training, supervision and outreach at scale.
- Without investment, Mentoring Men risks stalling in the "valley of death" where proven companies fail to reach sustainable scale.

Bold national investment is needed to embed mentoring as a permanent pillar of Australia's mental health system – first for men, then expanding out to other groups who would benefit.

We seek \$3 million per year for three years as secured annual recurring revenue (ARR). This will enable us to:

Our Ask

- Expand our trained volunteer workforce nationwide, underpinned by professional support and supervision.
- Establish a national network of community-based hubs, and digital delivery for rural and remote access.
- Complete accreditation under the National Safety and Quality Mental Health Standards.
- Strengthen impact measurement, ensuring accountability and proof of value for government.

For a modest investment, government can scale a proven prevention service that saves lives, strengthens communities, and reduces costs across health, justice and the economy.

Every day we delay, more men fall through the cracks. Lives lost, families shattered, potential unrealised. For seven years, Mentoring Men has delivered this proven, preventative model with minimal resources, guided by the dedication of everyday Australians willing to stand alongside one another.

But goodwill alone cannot meet national demand.

With secured government investment of \$3 million per year for three years, Mentoring Men can scale responsibly, embed mentoring as a permanent pillar of Australia's mental health system, and deliver the outcomes every inquiry and strategy has called for. The opportunity is clear, the need is urgent, and the solution already exists.

The only question is whether government will act now to back what works.

Our position is unequivocal: **immediate investment and support is required so that Mentoring Men can be scaled to reach every corner of Australia,** helping more men *before* they reach breaking point.

BECAUSE MEN DO TALK

They just need to know we exist!



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Background - A Gap in Men's Wellbeing

Australia faces a persistent gap in men's wellbeing services. While recent government funding expansions have primarily flowed to existing providers, this has had the effect of reinforcing incumbents rather than enabling innovative or community-led models to grow. The result is a system where many men still fall through the cracks. Disconnected, unsupported, and at heightened risk of crisis.

Mentoring Men exists to fill this gap. Founded in 2018 by Ian Westmoreland OAM, it remains one of the only national programs offering free, one-to-one life mentoring exclusively for adult men¹. Over the past seven years, thousands of men have been matched with trained volunteer mentors¹, creating relationships built on trust, mutual respect, and confidentiality. The model is simple but powerful: train everyday men as mentors, carefully match them with mentees, and provide ongoing back-end support so that no man carries the load alone¹.

This preventative, non-clinical approach complements professional healthcare services but operates upstream, reaching men who might never walk through the door of a psychologist or GP. Indeed, **only one in four men say they would see a mental health professional** when struggling². In contrast, peer mentoring reduces stigma, feels more 'male-friendly', and engages men earlier. The impact is clear: loneliness affects three in ten men³, and men without close friends were twice as likely to experience suicidal thoughts. Every day, seven to eight men in Australia die by suicide, comprising three-quarters of all suicides². And critically, our Men Do Talk 2025 report shows that once mentoring was clearly explained as free, one-to-one support from someone who had walked a similar path, **two-thirds of men (66%) said they would be open to it**³.

We create **scalable, community-based pathways towards support**. Our program meets adult men where they are - culturally, geographically, and emotionally. It is one of the few mentoring programs accredited by Suicide Prevention Australia², with training grounded in evidence-based practices like active listening, mental health first aid, and suicide prevention. Services are delivered in-person, online, or by phone, making them accessible nationwide, including in rural and remote communities².

Why this matters now

In our view, current funding decisions have had a stifling effect: they have expanded services that already exist, but have not enabled organisations with demonstrated capacity, like Mentoring Men, to grow. This leaves an untapped opportunity.

Men's wellbeing requires complementary approaches. Medicare-funded clinical interventions or continued investment in established programs (*some with vast access to resources and significant reserves, raising legitimate questions about the extent to which they require further government subsidy*) isn't enough. Our men also deserve also investment in community-led models that normalise help-seeking, build resilience, and prevent crises before they escalate.

Mentoring Men is positioned to scale this solution. With the right investment, capacity can grow quickly, delivering a proven, preventative model that fills a critical gap in Australia's mental health landscape.

1. Mentoring Men - Model of Care | Version 1.22 (Mentoring Men Ltd Operational Document)

2. Movember. The Real Face of Men's Health Report (2024)

3. Australian Institute of Family Studies. Ten to Men Insights #2: Findings from the Australian Longitudinal Study on Male Health 2013-2021 (2022)

4. National Suicide Prevention Office 2025. The National Suicide Prevention Strategy 2025-2035, Australian Government Department of Health and Aged Care, Canberra

Our Impact Measurement

Over the years, Mentoring Men has collected extensive feedback and outcome data, building a compelling picture of our effectiveness. Quantitative metrics show a program that is rapidly scaling and achieving strong engagement, while qualitative narratives reveal life-changing impacts for men across a wide range of issues.

As active participants in the service, mentors and mentees complete surveys and session feedback forms to monitor mentorships' health and drive continuous program improvement.

As part of maturing our evidence-based data, we are now also incorporating the Harvard "Flourishing" assessment (VanderWeele, 2017) as a core component of our measurement framework. After reviewing the breadth of positive impacts our mentoring delivers, it is clear that wellbeing sits at the nucleus. Everything else stems from it. By capturing objective wellbeing measures, we will better understand, track, and demonstrate changes in purpose, self-esteem, optimism, relationships, and resilience.

Because this approach is designed to build a robust longitudinal view, outcomes will take time to collate and interpret. This ensures we are not only capturing sustained improvements over time but also applying evidence-based models of outcome measurement to further bolster the depth and reliability of our data collection.

Our measurement process includes:

- **Quarterly Check-ins** – Collecting data on the progress and impact of mentorships, now including the Harvard Institute for Quantitative Social Science's Flourishing Measure (*Reference: VanderWeele, T.J. (2017). On the promotion of human flourishing. Proceedings of the National Academy of Sciences, U.S.A., 31:8148–8156*).
- **Mentoring Catch-up Feedback Loop** – Ongoing feedback from both mentors and mentees after each session tracks immediate impact, highlights areas for improvement, and flags participants at risk so timely intervention can occur.
- **Proactive Engagement** – Direct outreach from the Mentoring Men team to the mentoring community, facilitating knowledge exchange and providing targeted support where needed.

Objective wellbeing measures collected through this framework, alongside qualitative insights, enables us to build a clear, evidence-backed narrative of the long-term value of mentoring in improving men's lives.

The remainder of this paper summarises key outcome insights from our Mentoring Catch-up Feedback Loop between 2022 and 2025, illustrated with direct testimonials from participants.



Mentorship Outcomes (2022–2025)

Program Reach and Engagement

Use of Mentoring Men's services has expanded dramatically, and participants are highly engaged. The **dataset used for this report covers records from August 2022 onwards**, when the current feedback system was first introduced. While mentoring sessions were taking place prior to this, and continue to occur beyond the scope of this dataset, they are not captured here.

From August to December 2022, mentors submitted feedback for 26 mentoring sessions. This increased to 210 sessions in 2023, then 643 sessions in 2024, and by mid-2025, 373 sessions had already been logged for the year¹. These figures reflect only sessions where feedback was formally submitted; given current system constraints and the manual nature of reporting, it's likely that actual mentoring activity is significantly higher. However, without additional resources to improve data capture, the precise proportion of sessions with and without feedback cannot be determined.

Importantly, the quality of mentor-mentee engagement also increased alongside reported volume. In 2022–2024, roughly 61–65% of session feedback indicated positive engagement¹, meaning the mentor was confident in the relationship's progress, they were in regular contact, and the mentee was receptive and active in sessions. By 2025, this proportion had risen to around 76%¹.

In other words, in 2025, three out of four mentorships where feedback was submitted were assessed by mentors as on-track: a strong indicator of evolving relationship strength and effective support. Mentors and staff note that as the program matured, mentorship quality improved. We attribute this to our refined training, improved mentor-mentee matching, the sharing of best practices through Mentor Peer Support Groups, and the ongoing relationship support provided by the Mentoring Men operational team.

Mentoring Growth & Engagement 2022 -2025

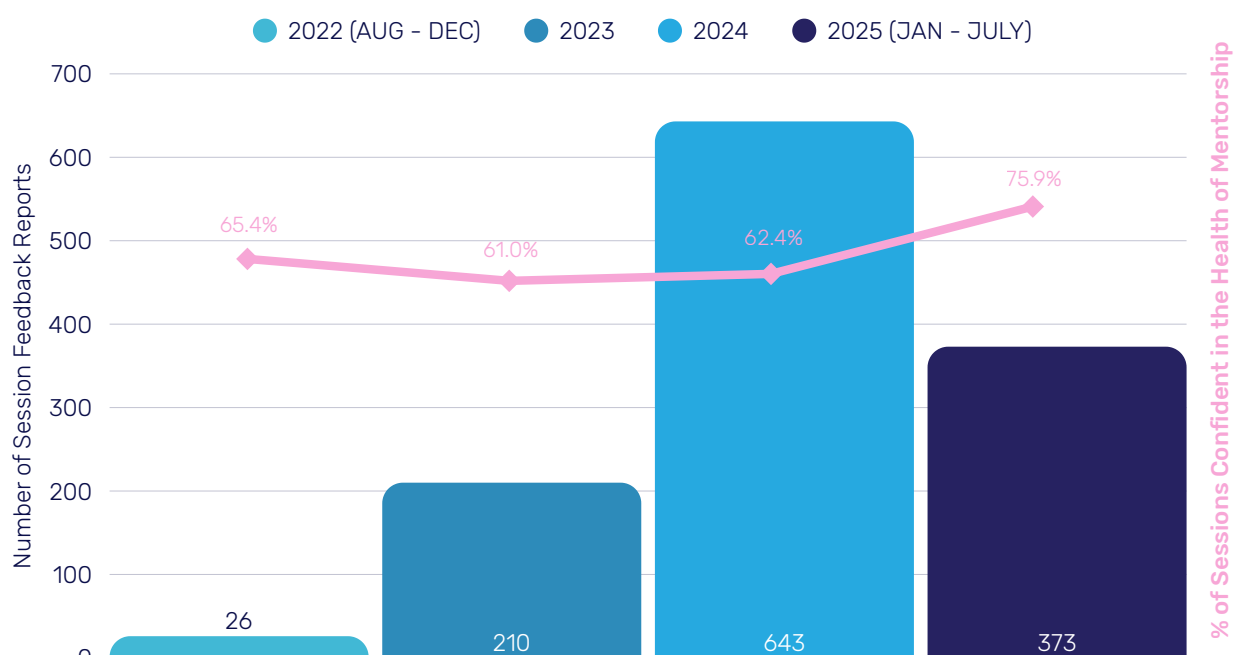


Figure: Mentoring Men program growth (number of session feedback reports) and mentor-mentee engagement levels (percent of sessions with mentor confident, regular contact maintained, and mentee receptive) from 2022 to 2025. The program scaled up rapidly, and engagement quality remained high, peaking in 2025 with ~76% of sessions rated confident and determined to continue the mentorship¹.

Age Profile

The average applicant (mentee) is **36 years old**, with most falling between their **late 20s and mid-40s**. A period often marked by career pressure, relationship stress, and family responsibilities. The youngest recorded applicant was 15 (referred on but not accepted due to our 18+ eligibility), while the oldest was 83. Importantly, 11% of mentee applications came from under-18s. While these young men were ineligible for our program, their willingness to apply shows that adolescent males are actively seeking support and mentorship.

Geographic reach

The strongest presence is in New South Wales (NSW) 57%, followed by Victoria 21% and Queensland 13%. Smaller but important cohorts are emerging in Western Australia and the South Australia. This distribution reflects both the grassroots origins of the program in NSW and strong organic reach interstate. It also indicates clear opportunities for targeted expansion strategies in underrepresented states and territories, where awareness remains low but interest is demonstrably present.

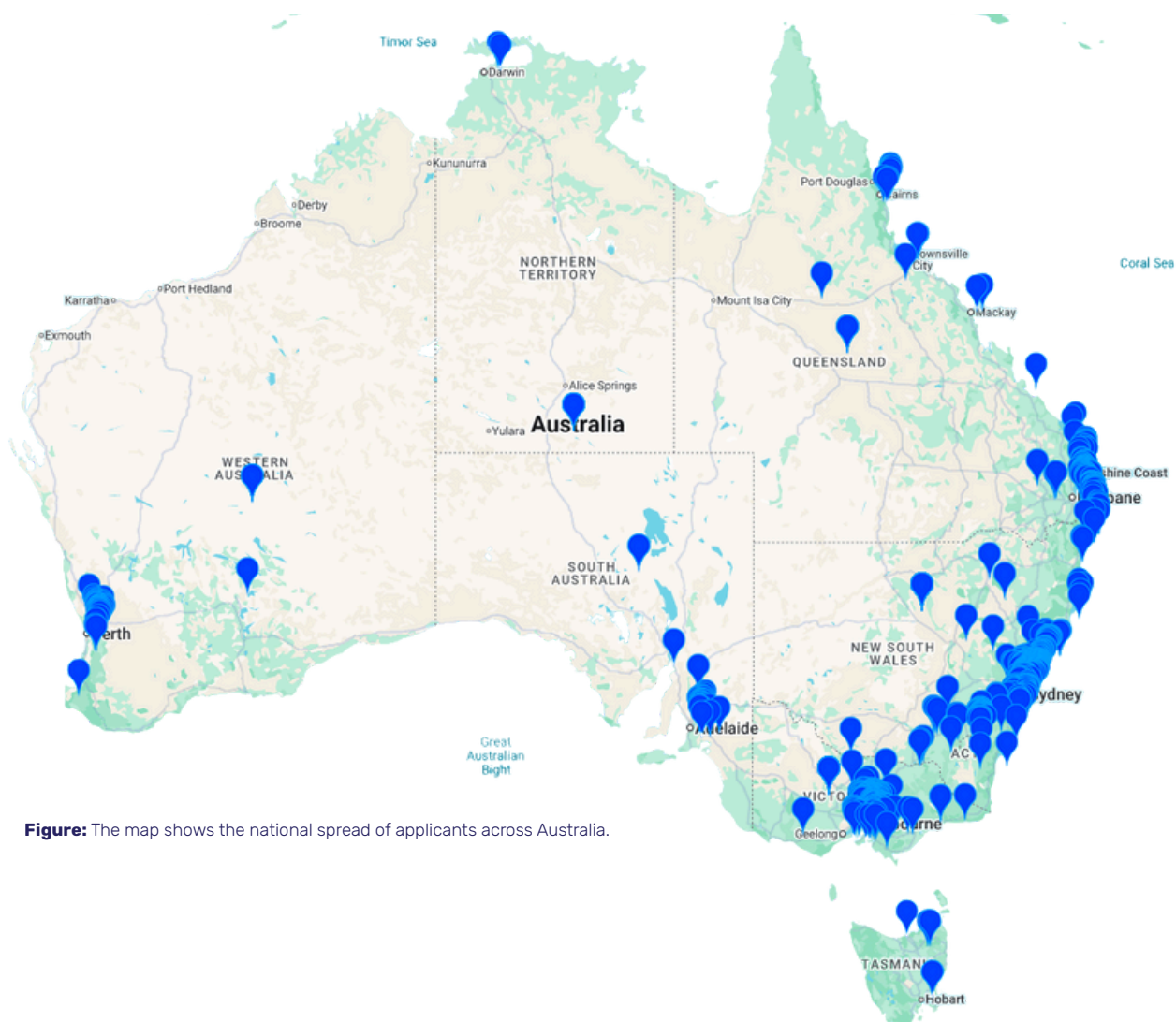


Figure: The map shows the national spread of applicants across Australia.

Referral pathways

How men find us tells an equally important story about stigma, trust, and motivation:

- **About 1 in 3** come because a trusted person or community contact pointed them our way. Whether through family, friends, or informal networks.
- **About 1 in 5** are channelled through the broader service system, evidence of growing credibility among agencies that increasingly see us as a safe, non-clinical partner.
- **Another 1 in 5** are actively searching for us online. Often through Google, showing men are motivated to seek help once they know where to turn.
- **Around 1 in 10** come through social media channels like Facebook, Instagram, and YouTube. This demonstrates to us that digital campaigns can play a role in raising awareness, but trusted referrals remain the stronger driver of engagement.

In summary, the reach and engagement data confirm that Mentoring Men is connecting with men across Australia, particularly those in their prime working and family years, and increasingly through trusted community and service pathways. The fact that so many arrive via friends, family, agencies, or through their own online searches points to a powerful shift. Stigma is lowering and men are increasingly willing to seek help.



“

I always look forward to seeing Mick, and feel good after our meet ups and chin wags.

Two heads are better than one. Shared sorrow, is half the sorrow, shared pleasure is double the pleasure. We are slowly untangling the labyrinth of my brain.

We never run out of subjects to talk about.

He is a great support, and I would recommend him to anyone.

”

Mentee Feedback 2025

Key Outcome 1. Help-Seeking and Reduced Stigma

High-Level Summary

The problem: 72% of Australian men with mental ill-health do not seek professional support.

Our impact: 95% of men acknowledged support would help them, but 42% admitted they “push through alone.” Mentoring normalises conversations and guides men toward professional care.

Case example: “James intimated he had suicidal thoughts recently. He assured me he wasn’t at risk but said he would look to contacting *Beyond Blue*.” – Mentor feedback, 2025

Policy takeaway: Mentoring Men provides the “early entry point” national policy calls for, shifting men from struggling on their own in silence to help-seeking sooner.

Expanded Evidence

One of the clearest outcomes of Mentoring Men is that it makes it easier for men to ask for help, reducing the stigma that keeps many silent. In the non-judgemental space of a mentoring relationship, men are able to gradually “*throw away the fragile masks*”² of stoicism and open up about their struggles. This represents a profound change for many who have never previously felt comfortable disclosing personal issues.

Our *Men Do Talk (2025)* report found that **95% of men** acknowledged some form of support would benefit them, yet 42% **admitted that they had “pushed through on their own.”**³ This echoes the *National Men’s Health Strategy (2020–2030)*, which highlights that **72% of males with mental ill-health do not seek professional help**⁴.

The barrier is not lack of need, but lack of safe, stigma-free pathways into care.

Mentors frequently report that their role includes gently bridging men towards formal help when needed. In one case, a mentor noted his mentee, “...*spoke of depression and isolation...*”, so they discussed strategies for managing it and the mentor encouraged him to seek medical advice for his health issues¹. Another mentor described suggesting the Suicide Call Back Service to a mentee grappling with heavy emotions, providing interim counselling support until professional care could be accessed¹. These seemingly small prompts matter because over time mentees become more willing to engage with GPs, therapists or helplines, having gained ‘permission’ to seek help without shame.

This is reflected in individual testimonials. Steve, a former mentee and now an active mentor with Mentoring Men, told the Sydney Morning Herald in 2025: “*I wasn’t ‘me’ anymore... I felt I’d lost myself... [Once through the valley you think], ‘Oh why didn’t I think about the three people I could have spoken to?’*”³ His hindsight shows how men often realise, after recovery, that they didn’t have to suffer alone. But at the time, they lacked a pathway to support. Mentoring exists to provide that pathway.

In several cases, mentees have explicitly credited the program with encouraging them to take steps toward professional support they had previously avoided. One mentor wrote: *"James intimated that he had suicidal thoughts recently... He assured me he wasn't currently at risk but would look to contacting Beyond Blue."*¹ Here, mentoring catalysed a critical shift: **a man who once stayed silent was now open to engaging with formal services.**

By normalising conversations about mental health and proving that 'it's OK to ask for help', Mentoring Men is reducing stigma in line with national health strategies. It meets men where they are. Culturally, geographically, and emotionally. Using a relatable, peer-based approach to break down barriers that have long kept men from accessing care.

1. Mentoring Men – Session Feedback Data 2022–2025 (analysis). (Note: All mentee/mentor quotes are anonymised from program feedback forms with permission).

2. Mentoring Men – Model of Care | Version 1.22 (Mentoring Men Ltd Operational Document)

3. Tuohy, W. "I'd lost myself": As men struggle with mental health, Steve knows how hard it is to ask for help." Sydney Morning Herald, May 24, 2025.

Key Outcome 2. Social Connectedness and Belonging

High-Level Summary

The problem: Loneliness is a major public health issue. One in five men report feeling lonely, and three in ten experience problematic loneliness. Loneliness is linked to depression, suicidality, and poorer overall health.

Our impact: 68% of Mentoring Men participants reported reduced loneliness during the NSW Inquiry into Loneliness (2025). Mentoring relationships frequently grow into genuine friendships and renewed family bonds.

Case example: *"He started as a mentor, however we have become friends. His encouragement will stay in my mind forever."* – Mentee feedback, 2025

Policy takeaway: Mentoring Men fulfils NSW Parliament's Recommendation 5 to expand peer mentoring as a public health approach to loneliness.

Expanded Evidence

A consistent and powerful theme in Mentoring Men's outcomes is the reduction of loneliness and the building of social connectedness. Loneliness is both widespread and dangerous. In the Ten to Men national longitudinal study, men without close friends were twice as likely to experience suicidal thoughts³. Three in ten Australian men report feeling lonely, and one in five feel socially isolated⁴.

Mentoring directly combats this. The **NSW Parliamentary Inquiry into Loneliness (2025)** heard evidence from Mentoring Men that 68% of participants experienced reduced loneliness, with the Government describing these results as "promising"². This reflects what mentors and mentees describe in feedback: having "someone in their corner" changes how men relate to others and how they view themselves.

Mentees often characterise mentors as not just supporters, but as friends. One mentee wrote: *"He started as a mentor, however we have become friends... an emotional support and sounding board who helped me through a period of depression. His encouragement will stay in my mind forever."*¹ Another noted: *"Our conversations nowadays are purely catching up on what has happened. We share our life stories and we learn from each other."*¹ These accounts show relationships shifting from semi-structured mentoring into genuine friendship and mutual trust.

There are also repeated examples of men reconnecting with family members after long periods of isolation. One mentor reported: *"My mentee was lonely [and] depressed... struggling with loss of family. Over time he built the courage to reach out to his adult children and made plans to reconnect."*¹ Another mentee, who had been socially withdrawn, *"...made plans to have dinner with his father..."*¹: a small but significant step back into connectedness¹.

The importance of such connections is underlined by research showing social bonds are protective against suicide². Mentors also demonstrate commitment during high-risk times like holidays. One recalled: *“Mathew said he has suicidal thoughts... he is sad and lonely. I told him he can contact me anytime, even Christmas Day.”*¹

By fostering belonging, rebuilding relationships, and reducing isolation, Mentoring Men addresses a recognised public health crisis. These outcomes are exactly what the NSW Inquiry into Loneliness called for: scaling up peer mentoring to provide meaningful connections that protect men against poor mental health and suicidality⁵.

1. Mentoring Men – Session Feedback Data 2022–2025 (analysis). (Note: All mentee/mentor quotes are anonymised from program feedback forms with permission).

2. NSW Parliament, Standing Committee on Social Issues – Report No. 65: The prevalence, causes and impacts of loneliness in NSW (2025)

Key Outcome 3. Resilience, Coping & Confidence

High-Level Summary

The problem: Many men lack the coping skills and confidence to manage challenges like anxiety, unemployment, relationship breakdowns or life changes like becoming a father for the first time.

Our impact: Mentoring helps men reframe challenges, set small goals, and build accountability. Mentees report re-engaging in work, volunteering, and healthier relationships.

Case example: *"At our meeting Mark said knowing I was going to be there helped him get to the meeting even though he didn't feel like it. Now he's walking daily and volunteering again."* – Mentor feedback, 2024

Policy takeaway: Mentoring Men strengthens resilience, contributing to both personal wellbeing and broader workforce participation.

Expanded Evidence

Resilience, the ability to cope with setbacks and "bouncing back", are core outcomes of the mentoring process. Mentees often enter the program struggling with low confidence, anxiety, or a sense of hopelessness. With the steady encouragement of mentors, they gradually develop coping skills and optimism that translate into real-world improvements.

The longitudinal session data shows many examples of men making practical progress. One mentor described "Mark," who lived with social anxiety and would often cancel meetings due to fear. The mentor suggested simple accountability measures: even if Mark felt unwell, the mentor would show up at the scheduled time, and Mark could come if able. *"At our meeting... Mark was there. He said knowing I was going to be there helped him get himself to the meeting even though he wasn't feeling like it... he was glad he got there."*¹ Over time, Mark began attending regularly, walking daily, and eventually volunteering again.

Other mentors recorded mentees making breakthroughs like applying for new jobs, leaving unhealthy relationships, or setting boundaries at work. One noted: *"He has overly attributed his recent success in job hunting to our discussions... it shows how instrumental the support was in his positive life change."*¹

Qualitative comments frequently describe mentees as becoming more proactive, socially confident, and optimistic. *"Accountability and actions maintenance has been solid... his personal growth around social anxiety is now developing a confidence which is gaining him more positive social interactions and work progression."*¹ Another mentee summarised his experience simply: *"I always go home feeling tremendously positive."*¹

These improvements align with research linking resilience to better mental health and workforce outcomes. By equipping men to cope with everyday challenges, Mentoring Men is strengthening not only individual wellbeing but also the economic and social fabric of communities.

1. Mentoring Men – Session Feedback Data 2022–2025 (analysis). (Note: All mentee/mentor quotes are anonymised from program feedback forms with permission).

Key Outcome 4. Early Intervention & Crisis Prevention

High-Level Summary

The problem: Suicide remains the leading cause of death for young and middle-aged Australian men. Too often, services only engage individuals once a crisis has already occurred.

Our impact: Mentoring intervenes 'upstream' providing support at the first signs of distress. Feedback shows mentoring has prevented suicides and helped men stabilise before problems escalated.

Case example: *"Steve disclosed he had suicidal thoughts and almost acted. After six sessions, he said he now talks to his psychologist and feels grateful for these sessions. He always goes home feeling tremendously positive."* – Mentor feedback, 2025

Policy takeaway: Mentoring Men delivers on the National Suicide Prevention Strategy's commitment to "act early to prevent distress".

Expanded Evidence

Perhaps the most critical outcome of mentoring is its role in preventing crises before they escalate. The ethos of Mentoring Men is to 'catch men upstream'. To engage them when they first experience distress, not after they reach breaking point. Many participants are referred or self-refer at the early signs of challenges like job loss, relationship breakdown, or loss of purpose, rather than at the stage of acute crisis.

Mentors' reports show this preventative effect clearly. One mentor described "Steve," who lives with chronic pain and admitted he had moments of suicidal ideation. Initially he disclosed that he *"...almost did something stupid..."* but was stopped by his daughter and psychologist¹. Over six sessions, the mentor helped Steve develop coping strategies and a support plan. At later meetings, he admitted he had further suicidal thoughts but, crucially, *"...once again didn't act and got help."*¹ By the fifth session, the mentor recorded that Steve was, *"...the best I had seen him... he said he felt great. He is very grateful for these sessions and says he always goes home feeling tremendously positive."*¹

These accounts demonstrate mentoring's dual role: **monitoring risk** while also **encouraging men to engage with formal crisis services** when needed. In Steve's case, the mentor agreed he could call if he was feeling low, but also set firm boundaries, directing him to Lifeline if actively suicidal¹. This balance of relational support and referral ensures that men receive consistent companionship while still accessing appropriate professional care.

Such examples illustrate how mentoring fills a gap in the continuum of care. The **National Suicide Prevention Strategy 2025–2035** calls for early, community-based interventions that address distress before it escalates². Mentoring Men operationalises this call, providing consistent, trusted support that prevents men from reaching ‘the point of no return’.

1. Mentoring Men – Session Feedback Data 2022–2025 (analysis). (Note: All mentee/mentor quotes are anonymised from program feedback forms with permission).

2. National Suicide Prevention Office 2025, The National Suicide Prevention Strategy 2025–2035, Australian Government Department of Health and Aged Care, Canberra



Strategic Relevance & Alignment

Mentoring Men directly **delivers on the priorities identified in national and state strategies**. From loneliness to suicide prevention to workforce capacity, our model represents the kind of community-based, preventative approach that government has acknowledged is needed.

Program Reach and Engagement

Strategy / Inquiry	Key Priority	How Mentoring Men Delivers
National Suicide Prevention Strategy (Living Is For Everyone Framework; updated commitments 2023)	Stresses the need for "...a comprehensive approach across prevention, early intervention, crisis support and postvention..." and highlights the role of "community-led responses and lived experience leadership."	Mentoring Men is a lived-experience-led, upstream intervention. We provide one-to-one mentoring that engages men before they reach crisis, complementing clinical services and strengthening the prevention pillar.
National Men's Health Strategy 2020-2030	Identifies "...stigma and gender norms as barriers to men seeking help..." and prioritises "...prevention, early intervention and services designed to be male-friendly and accessible."	Our program addresses stigma by embedding support in everyday relationships. Mentoring is inherently male-friendly and effective for men who would historically never walk into a GP or psychologist's office.
NSW Parliament Standing Committee on Social Issues – Report No. 65 (2025)	Recommendation 5: "The NSW Government should recognise the role of peer support, including mentoring, as a key strategy to address loneliness, and prioritise programs that support at-risk groups."	Mentoring Men is already delivering on this recommendation, providing structured, scalable one-to-one mentoring. With funding, we can expand nationally to high-need groups including rural, Indigenous, and CALD men.
National Mental Health Workforce Strategy 2022-2032	Calls for "...growing and supporting the peer workforce, including volunteers, with appropriate training, support and integration into mental health services."	We are building exactly this: a structured volunteer mentor workforce, underpinned by professional supervision, training, and escalation pathways – providing system capacity at low cost and high quality.
National Safety and Quality Mental Health Standards for Community Managed Organisations (2022)	Requires community services to demonstrate "...safe, high-quality, recovery-oriented and evidence-based practice..." and to embed governance, safeguarding and accountability.	We are progressing towards full accreditation. With investment, we will be among the first non-clinical services in Australia to meet these standards, setting a benchmark for safe, accountable, community-based mentoring.
Productivity Commission Inquiry into Mental Health (2020)	Concluded that "greater investment in prevention and community-based supports would reduce downstream costs and improve population outcomes," and recommended scaling such models.	Mentoring Men exemplifies this: a proven, preventative, community-based service. Independent modelling of peer-led programs (KPMG/MHA 2018) shows strong ROI (~\$3.27 per \$1 invested). Our volunteer model leverages similar efficiencies while addressing a clear service gap.

National strategies are clear: earlier intervention, stronger peer supports, and expanded community-based services are needed to reduce suicide, address loneliness, and close gaps in the mental health workforce. Mentoring Men delivers on all of these fronts.

For seven years, we have been quietly building this solution. Running a national, accredited, evidence-based program with minimal resources. With a small staff team and the dedication of trained volunteers, Mentoring Men has achieved outcomes that directly reflect what government strategies call for: **reducing stigma, increasing help-seeking, strengthening connection, and preventing crises.**

And yet, despite this alignment and impact, the program has not received sustained national investment. This is a striking gap. The services government says it wants already exist and are delivering results. But without core funding, our ability to scale and meet demand is limited.

Mentoring is not an untested idea. It is a **proven model** that has been operating for seven years, reaching **thousands of men across the country.** What is needed now is **recognition and backing at a national level.** With proper investment, Mentoring Men can expand reach, strengthen systems, and embed mentoring into communities nationwide. Without it, the risk is that a proven, low-cost, high-impact solution remains under-utilised while the problems it addresses continue to grow.

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1. Movember. *The Real Face of Men's Health Report (2024)*
 2. Australian Government, Department of Health. *National Men's Health Strategy 2020–2030 (2019)*
 3. NSW Parliament, Standing Committee on Social Issues. *Report No. 65: The prevalence, causes and impacts of loneliness in NSW (2025)*
 4. Mentoring Men Ltd. *Men Do Talk: Are We Listening? (2025)*
 5. Australian Government, National Suicide Prevention Office. *National Suicide Prevention Strategy 2025–2035 (2025)*
 6. Productivity Commission. *Mental Health and Suicide Prevention Agreement Review – Interim Report (2025)*
 7. Australian Government, Department of Health and Aged Care. *National Mental Health Workforce Strategy 2022–2032 (2022)*
 8. KPMG & Mental Health Australia. *Investing to Save – The Economic Benefits for Australia of Investment in Mental Health Reform (2018)*

“
Excellent session. Peter is making progress towards his stated goals and appears more optimistic about the future.
”

Mentor Update 2025



Invest in Scaling What Works

For seven years, Mentoring Men has operated on a shoestring. We have delivered a proven model of preventative mental health support with minimal resources, yet consistently demonstrated demand, effectiveness, and scalability. In business terms, we have successfully navigated the proof-of-concept stage, achieved product-market fit, and survived 'the valley of death' (the period where early-stage organisations often fail due to lack of growth capital).

Unlike a commercial start-up, however, our returns are measured not in shareholder dividends but in lives saved, crises prevented, and long-term productivity gains. Yet the funding logic is the same: to scale a high-performing model, we require a growth investor.

Our Funding Request

We seek \$3 million per year, over three years, secured as Annual Recurring Revenue (ARR).

This is not a one-off grant request. One-off injections can temporarily sustain programs but they cannot support the scale, refinement, and infrastructure investment required to deliver national impact. Secured ARR is essential: it creates the predictability and financial runway required to plan, build, and scale effectively.

We have demand, impact data, and sector alignment. But without long term secured revenue, we cannot responsibly invest in the systems, workforce expansion, and accreditation processes that advance national priorities.

What This Funding Will Deliver

This request is not for a pilot. It is an **investment into scaling a proven, high-impact prevention service** that has operated for seven years with minimal resources. Funding of \$3 million per year for three years will secure the recurring revenue (ARR) necessary to move beyond fragile, grant-to-grant survival and into sustainable national scale.

Without ARR, organisations like ours are unable to invest in systems, workforce, and digital infrastructure despite strong demand and demonstrated impact, meaning we are unable to maintain support of our community. This funding addresses that gap.

Workforce and Service Expansion

This investment will allow us to both grow the workforce and expand national reach so that mentoring is accessible to men everywhere in Australia.

- **Workforce Growth:** Expand and strengthen the pool of trained volunteer mentors, supported by a professional backbone workforce. This includes clinical supervisors, engagement staff, and evaluation specialists. This ensures volunteers are recruited, trained, supported, and safeguarded to the highest standard.
- **National Reach:** Establish a broader network of place-based hubs across states and territories, embedding mentoring in trusted community settings (sporting clubs, veterans' groups, workplaces, Indigenous and CALD communities). We will also enhance digital delivery, ensuring men in rural, regional, and remote areas can access mentoring. This also includes using marketing and communications to reach these communities, showing them what mentoring is, that it's nearby and tailored to their community, and how it can help improve their wellbeing.

Why it matters: Prevention cannot scale without infrastructure. Volunteer energy alone is insufficient; it must be underpinned by professional systems and safeguards. This investment ensures mentoring becomes a **reliable, accessible, and sustainable prevention** service, reducing the gap between men in crisis and men who never access help.

Accreditation and Service Maturity

We will complete accreditation under the **National Safety and Quality Mental Health Standards for Community Managed Organisations (NSQMHCMO)**. The benchmark for safety, governance, and accountability in community-based services.

Accreditation will:

- Formalise Mentoring Men as one of the few non-clinical organisations to meet the same governance and quality standards as clinical providers.
- Build confidence with government, funders, and the public that mentoring is safe, professional, and evidence-based.
- Embed robust systems for training, evaluation, and continuous improvement.

Why it matters: Without accreditation, prevention services like ours are often treated as 'nice-to-have' rather than essential. Achieving NSQMHCMO accreditation elevates Mentoring Men into the national mental health architecture, providing the government with assurance that funding is backing a safe, accountable, professional service.

Innovation and Digital Transformation

Investment will accelerate the development of our bespoke Mentoring connect platform, which integrates:

- Secure communication and case management tools for mentors and mentees.
- AI-enabled monitoring to track wellbeing and identify risks early.
- Self-help resources and referral pathways to complement mentoring.
- Reporting dashboards for real-time impact measurement.

Why it matters: Men in rural and remote areas, shift workers, and other hard-to-reach groups often cannot access face-to-face support. Digital infrastructure allows us to scale equitably, ensuring every man in Australia can connect with a mentor. It also gives government transparent, real-time visibility of outcomes. A level of accountability rarely achieved in preventative mental health.

Impact Measurement and Economic Value

We will strengthen our evaluation framework to demonstrate:

- **Social outcomes:** reductions in loneliness, increases in help-seeking, improved resilience and wellbeing.
- **Economic outcomes:** avoided costs to the health system, justice system, and economy. The cost of one suicide alone has been conservatively estimated at over \$6 million in combined economic and social impact.

Why it matters: Even preventing a fraction of the suicides happening yearly in Australia delivers returns many times greater than the modest \$3 million annual investment sought. Robust evaluation ensures Mentoring Men is accountable for both social impact and economic value, aligned with Government's focus on outcomes-based funding.

Conclusion - *Why Now?*

For seven years we have delivered impact on a shoestring. Our model is proven. Men's lives are being changed. Demand is growing every day.

And yet, we remain unfunded.

So the question is simple: if not now, when? How many more men need to suffer in silence? How many more families need to be shattered before prevention is taken seriously?

Every day in Australia, **seven to eight men die by suicide**. Behind each one is a devastated family, broken friendships, lost potential. The economic cost is staggering – but the human cost is immeasurable. We cannot continue to look away while lives are ruined, while grassroots solutions that work remain ignored.

Government has a choice. For the modest investment of \$3 million a year, Mentoring Men can be scaled into a truly national service – accredited, accountable, and embedded in communities where men actually are. This is not a pilot. This is not an experiment. This is a **proven prevention model ready to deliver at scale**.

We have done our part. For seven years we have carried this work with almost nothing. The gap has been filled not by government, but by everyday Australians willing to step up for each other. But goodwill alone cannot meet national demand.

The time for delay is over. We cannot afford another year of reports, pilots, or excuses. The system is crying out for practical, preventative services that complement clinical care and reach men earlier. Mentoring Men is that service.

The only question left is: **will government back what works, or will we allow more lives to be lost waiting?**

**MENTORING
MEN**



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