TEACHING OLD DOGS NEW TRICKS: OBSERVATIONS ON HEALTH PROMOTION THROUGH INTERGENERATIONAL LEARNING IN A REGIONAL MEN’S SHED

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Abstract
Intergenerational learning activities benefit both older and younger participants. The Whyalla Men’s Shed (WMS) not only meets many of the needs of its older participants but has recently become involved in several initiatives that foster intergenerational collaboration and learning. An agreement between the University of South Australia (UniSA) and the WMS has resulted in the WMS hosting several projects led by senior Occupational Therapy (OT) students aimed at improving health literacy and promoting healthy lifestyle choices in older men. WMS placements undertaken by the OT students have enabled the students to better understand the enablers and barriers to healthy lifestyle choices in this target group and how to adapt classroom-based knowledge to best engage a disparate group of older men. Initiatives have included informal ‘teaching sessions’ focusing on improving dietary knowledge and skills, and on physical activity and exercise, augmented by informal cooking and exercise sessions suited to the attitudes, skills and abilities of the shed members. Students reported changes in the men’s knowledge, attitude, and behaviours and activities that demonstrated active engagement with the concepts promoted. The student experience was enhanced by working on small projects allowing them to develop basic woodworking and construction skills. Shed members reported enjoying the opportunity to share life stories, skills, and experience while ‘learning by doing’. It is to be hoped that such intergenerational engagements will continue to provide enrichment for both younger and older learners, building mutual respect and enhancing the self-esteem of all concerned.

Keywords: Intergenerational learning, occupational therapy, student placements, men’s sheds, health promotion, rural and regional

Introduction
Golding posits that “learning is effective for older men in community settings when it is social, local, practical, situated, and in groups, particularly for older, sometimes isolated men who have experienced a range of setbacks in life” (Golding, 2011b, p. 103; see also Brown, Golding, & Foley, 2008; Golding, 2006; Golding, Brown, Foley, Harvey, & Gleeson, 2007.) His conclusion is based on a number of years of empirical research conducted with adult community education providers, football clubs, senior citizens, volunteer fire and emergency services, and land care organisations in rural Australia whose cohorts were skewed to older-aged men, and later in community men’s sheds where half of the participants were older than 65 years. Golding describes men’s sheds, as informally and effectively satisfying a range of needs not currently available to older men in more
formal health, education, and welfare settings, and which cater to the specific learning needs of older, typically retired, and sometimes isolated men (Golding, 2011b, p. 105).

Such informal learning spaces are also described as mitigating isolation and loneliness and maintaining social networks, while simultaneously offering opportunities to promote intergenerational relationships, which in turn facilitate intergenerational learning. For older men, such learning tends to be informal, trade- or craft-orientated, experiential and cross-generational and may highlight older men’s preference for community-based, hands-on learning, unlike more formal learning and training settings (Ricardo, Tavares, Coelho, Lopes, & Fragoso, 2014; Krašovec, Radovan, Mocilnikar, & Šegula, 2014).

The European Report on Intergenerational Learning and Active Ageing defines intergenerational learning as “the reciprocal exchange of knowledge between people of all ages so they can learn together, and learn from each other and from those in a variety of sectors, such as culture, environment, sociability, education, mediation, prevention, recreation, ICT, etc.” (Dantzer, Keogh, Sloan, & Szekely, 2012, p. 14). Historically, intergenerational learning has primarily been a familial activity, intended to perpetuate family values, culture, knowledge and experience through informal exchange between older family members (e.g. grandparents) and the younger generation. In contemporary society, changes in family structure, the economy, workforce participation and geographical disconnect between extended families has resulted in decreased opportunities for intergenerational learning and support. As a consequence, a new extra-familial intergenerational learning paradigm has evolved, which aims to foster the development of meaningful relationships among non-familial older and younger generations (Newman & Hatton-Yeo, 2008).

Since the 1970s, intergenerational programs have appeared in a number of developed countries and have been championed by a number of peak or policy bodies promoting active ageing and lifelong learning (Formosa, 2012). In the US, the National Council on Aging has described such programs as “…planned ongoing activities that purposefully bring together different generations to share experiences that are mutually beneficial”, and that “…typically, the programs involve interactions that promote social growth and learning between the young and the old” (NCOA, 1981, as cited in Newman & Hatton-Yeo, 2008, p. 32). This has resulted in models whereby older and younger persons are connected in both formal and informal settings that promote intergenerational exchange and learning. Programs typically involve students interacting with older adults who act as mentors, tutors, advisers or coaches to the students. These activities have demonstrated reciprocal benefits: improved academic, social and personal growth for students; and for older adults, improved understanding of school curricula, and of contemporary children and youth, as well as increased satisfaction with life and feelings of being valued and needed (Newman & Hatton-Yeo, 2008).

European perspectives on intergenerational learning in community spaces involving older men are explored in a recent collection of case studies by researchers from different disciplines across Europe (Radovan & Krašovec, 2014). The concluding chapter proffers that the informal spaces where older men interact socially build a sense of belonging, and of community connectedness that allows positive contribution to community. Men come together in these spaces to undertake a range of activities, to talk, have fun, share opinions and perform activities that have an intrinsic value, for example, around sporting interests or recreational pursuits; in these spaces men also learn informally, including about health and well-being (Fragoso & Formosa, 2014).

A potential setting for intergenerational learning is the Community Men’s Shed, hereafter referred to as men’s shed or simply shed (Community and Cultural Development Unit, 2013;
Milligan, Payne, Bingley, & Cockshott, 2012; Wilson & Cordier, 2013). Men’s sheds are ubiquitous in Australia and are becoming increasingly common in Canada, New Zealand, Ireland, and the United Kingdom (Australian Men's Sheds Association [AMSA], 2015; Golding, 2014). They are typically described as grass-roots organisations that provide a communal space for men to meet, socialise, learn new skills and take part in meaningful activities, for their mutual benefit or for that of their communities (Golding, 2014; Milligan et al., 2015; Misan, 2008; Wilson & Cordier, 2013). Shed activities include socialisation; small fabrication, repair or restoration projects in metal or wood; gardening; pottery; model aeroplanes, cars, boats and railways; computing; photography; art and crafts; music; social outings and other activities; sheds may also serve as a vehicle for health promotion as well as other learning activities (Cordier & Wilson, 2014, Liddle et al., 2016).

Benefits ascribed to men’s sheds also include: improved social and emotional well-being; a renewed sense of identity, purpose, productivity and self-esteem; a feeling of belonging to something worthwhile; and actively contributing to the community (Cordier & Wilson, 2014; Golding, 2011a; Misan & Sergeant, 2009; Moylan, Carey, Blackburn, Hayes, & Robinson, 2015; Wilson & Cordier, 2013).

This paper describes two intergenerational learning programs with a health promotion focus conducted by Occupational Therapy students in a men’s shed in Whyalla, South Australia (SA). The Whyalla Men’s Shed

Context

Whyalla, South Australia’s (SA) second largest regional city, is located on the west coast of the Spencer Gulf and has a population of about 22,000 people. Whyalla ranks in the lowest decile of the national Australian Bureau of Statistics SEIFA (Socio-Economic Index for Areas) index and the lowest in SA (South Australian Centre for Economic Studies, 2012) and has a higher than State average of people over 65; almost 40% of the population are welfare recipients. Residents suffer from higher than State averages of overweight and obesity, low levels of physical activity (especially in older men), poor diet and high rates of psychological distress. Apart from pubs, sporting and service clubs, there are few opportunities for male socialisation and even fewer that cater specifically for older, retired men.

The Whyalla Men’s Shed (WMS) is an incorporated, not for profit, registered charity, established in 2013 and managed exclusively by volunteers; it has been operating from its current premises – a repurposed church – since early 2014. The WMS provides a setting where older men can engage in productive pursuits that benefit themselves and the community. The objectives of the shed are to improve the social and emotional well-being of members as a result of the opportunity for socialisation, camaraderie, friendship, providing a sense of identity and purpose, as well as opportunity for constructive endeavour and peer support.

The shed has about 50 members (often called ‘shedders’), with about 25 attending on a regular basis. It offers a smoke-, drug- and alcohol-free, multipurpose space with a range of facilities including metal and wood workshop spaces; a common room for meetings and socialisation; a games room; a small library; a networked computer suite with Internet access; a small office area; a display foyer where shed-made products are available for sale; and a kitchen for preparing light meals and refreshments. An outdoor recreation and garden area is currently under construction.
The projects
Two intergenerational programs, the first in 2015 and the second in 2016, were each conducted over a period of nine weeks, from late April to the end of June, in the respective years. The 2015 project had a diet and nutrition focus and the 2016 project, on physical activity and exercise. Each program was conducted by two final year female Occupational Therapy (OT) students undertaking their curriculum-mandated, assessable, nine-week Participatory Community Practice (PCP) project. The objective of the PCP program is to enable students to develop the knowledge, skills and capacity to analyse and plan a community-orientated project in collaboration with an appropriate agency.

The projects were supported by the Whyalla-based University of South Australia (UniSA) Department of Rural Health (DRH), which facilitates rural student placements for the UniSA Department of Occupational Therapy and other Allied Health disciplines. The projects were co-ordinated by an OT lecturer from Adelaide who liaised with students on a weekly basis using Skype™; students were mentored locally by WMS members including the President, Co-ordinator and Workshop supervisor.

Aims and objectives
The projects aimed to provide shed members with resources, knowledge, skills and opportunities regarding health and health-related behaviours so as to improve their capacity for making healthy choices regarding diet, nutrition, physical activity and exercise.

Methodology
Projects were guided by a primary health care community empowerment and developmental framework. Primary health care aims to promote health and well-being through the three major principles of equity, social justice and empowerment (Talbot & Verrinder, 2010). Community empowerment seeks to empower and support communities (as well as individuals and groups) to take greater control over issues that affect their health by promoting personal development, consciousness raising and social action, and enabling communities to make sustainable changes that promote health and well-being (Williams & Labonte, 2003). A developmental approach views health and social development as an interactive process that assists people to take greater control over the issues affecting their health (Cheers & Luloff, 2001; Tesoriero & Ife, 2010).

These principles were exemplified in the PCP projects through the encouragement of goal setting, providing education, acknowledging successes achieved throughout the project and by strategies that promoted local control and input over project direction and activity.

Method
Each project involved five key steps: needs analysis; development of an action plan; implementation of the plan; project evaluation and, finally, project dissemination. Needs analysis involved a literature review, and consultation with shed members and a range of community organisations regarding preferences for diet and physical activity as well as community facilities available to support the project. The action planning involved determining the range of activities that were to be conducted. Implementation and evaluation involved conducting the various activities and assessing their appropriateness and effectiveness. Finally, dissemination involved promoting the projects through local media and events.

Involvement in the projects was approved by the Management Committee of the Whyalla Men’s Shed. Ethical approval for the UniSA PCP projects is granted in aggregate by the University of South Australia, Division of Health Sciences, Divisional Ethics Committee.

**Outputs**

**Project 1**
The focus of the 2015 project was healthy eating and nutrition. Following consultation with shed members, including a short survey to determine food preference, a schedule of weekly cooking sessions was implemented to assist members to develop basic menu preparation and cooking skills. These were supplemented by group education sessions promoting healthy nutrition and diet. A local nutritionist and a health promotion officer skilled in delivering chronic disease self-management programs were approached for advice regarding program content and delivery format. Session topics presented information regarding recommended salt and sugar intake, good and bad fats, calories and kilojoules, portion sizes, fruit and vegetables, how to achieve a healthy balanced diet, healthy food choices or ingredient substitution. Members worked with the students to determine recipes and ingredients needed. Shed members assisted with food preparation and the food prepared was shared by all. Recipes were printed to enable men to prepare recipes at home or at the shed at other times. Members were encouraged to do cooking at home, experimenting with principles, ingredients and techniques learned at the shed and to bring food to the shed to share with members.

Regular feedback from participants was sought during and after cooking and information sessions and ideas incorporated into subsequent sessions and activities. All recipes prepared at the shed were collated into a credit card-sized, concertina folio which was presented to members as a keepsake at the conclusion of the project. Short- and medium-term outcomes were documented and student observations and thoughts were compiled into a project report which was submitted for assessment; a copy was also presented to the Shed.

Students also provided assistance in planning and conducting the Whyalla Men’s Shed contribution to the National Men’s Health Week event, the Whyalla Male-Out Community Fun day, held in June 2015. As well as an indoor display of shed products and activities, the shed provided a range of food choices co-ordinated by the students, as one of a number of food vendors on the day.

**Project 2**
The primary focus of the second project was physical activity and exercise, with a secondary focus being healthy food choices. During the scoping and needs analysis phases, the students identified a range of businesses, services, and amenities available in the community that promoted physical activity and exercise.

Shed members were asked to complete a simple questionnaire that identified their age, conditions limiting physical activity, the type and extent of exercise or physical activity currently undertaken, the types of physical activities they might like to try, typical daily food intake habits, and health topics that they were interested in learning more about. This information together with informal discussions with members framed the program design. The activities offered included a Step Challenge, various ‘Come and Try’ exercise sessions, a social lawn bowls tournament, nutrition education sessions that included preparing light, healthy meals, a men’s health check, a tour of the local Bone Mineral Density diagnostic facility, a ‘Biggest Morning Tea’ fundraising event and several guest speakers.
The step challenge took the form of aggregating the weekly steps of two teams of shed members competing to see which team could accumulate the greater number of steps each week. Pedometers, which shed members retained following completion of the PCP, were generously supplied by the DRH. The aggregated steps were converted to kilometres and plotted on a map of Australia with the challenge – to continue after the students departed Whyalla – to see how long it would take to circumnavigate the country, beginning in Whyalla, a journey of some 15,000km².

The ‘Come And Try’ sessions included a visit to the local gym where members were given a tour of the facility and its amenities as well as being able to try a range of aerobic and strength training equipment, and participate in an exercise class for older people, a Tai Chi class, and a lawn bowls tournament to which spouses were invited and which included a meal and prizes for the winning team. Guest speakers included the Manager of the Whyalla Health and Fitness Centre, the Manager of the Bone Densitometry Unit and a member of the local Prostate Cancer Support Group.

Education sessions were similar in format to those described for the 2015 PCP with topics covered including: reading food labels; healthy food recommendations and portion sizes; and guidelines for fat, salt and sugar intake, as well as physical activity and exercise recommendations. Sessions were conducted in a group setting. As with the previous project, the students also assisted with co-ordinating shed activities for Men’s Health week which coincided with the last week of the PCP period. Activities included a well man’s health check, which involved checking body mass index, waist to hip ratio, blood pressure, a cardiac and osteoporosis risk assessment, as well as asking questions about fruit and vegetable intake, exercise habits, smoking and alcohol intake. Participants also received a copy of the Men’s Health Toolkit published by Foundation 49 (Foundation 49, 2014). Members visited the Bone Density Unit and learned about osteoporosis, how it is diagnosed and how to prevent it. The shed also hosted a ‘Biggest Morning Tea’ for members and partners, to raise funds for the Chemotherapy Centre at the local hospital. Students conducted both formative and summative evaluation of all activities and compiled an assessable report, including a copy for the Shed.

In keeping with the reciprocal nature of intergenerational learning, during their time at the shed the students of both projects were coached by shed members in the use of hand tools, portable power tools and basic wood construction and finishing techniques. Students made and finished several wooden items using recycled timber and assisted shed members in the performance of daily activities in the shed workshops and garden area. Students also attended several social events in the town at the invitation of shed members.

**Observations and outcomes**

For both projects, the student literature reviews confirmed that the Whyalla shed members exhibited many of the characteristics ascribed to males most at risk of ill health, namely older, rural men, with low educational attainment, blue collar backgrounds, living in disadvantaged areas and from low socio-economic backgrounds (Australian Institute of Health and Welfare, 2011; Misan & Ashfield, 2011). Most reported one or more chronic medical conditions, consuming less than the recommended serves of fruit and vegetables, having limited cooking skills and leading relatively sedentary lifestyles, confirming that the shed was indeed a fertile ground for the proposed initiatives.

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In an effort to develop rapport with shed members and acquire unfamiliar skills, students were keen to undertake simple woodwork projects. These wishes were actively encouraged by shedders enthusiastic to impart much-practised trade skills. Despite being five or more decades younger than most members and being females in a men’s shed, the students were welcomed each time they visited the shed and members ensured that students were properly inducted to shed safe operating procedures⁴ and provided with relevant personal protective equipment before undertaking any activities in the shed workshops. Shed members were observed to display a sense of humour with the students and were genuinely interested in gaining a better understanding of both student and project objectives.

These collaborative activities endeared the students to members. The rapport that developed through their involvement in day-to-day activities was crucial to forming accepting and respectful relationships with shedders, having fun and gaining member ownership of and participation in the project. This was further demonstrated during the student farewell events held at the shed. Shed members shared food that they had made at home using recipes and skills garnered during the project under the tutorship of the students. Members were genuinely saddened to see the students leave at the end of the projects and wished them well in their future studies and careers.

In addition to shed members demonstrating improved skills and knowledge regarding diet and physical activity as a result of participating in the project, the students were also gratified by the knowledge and skills that they had developed as a result of being involved with shed members and the degree to which they became inculcated into the daily happenings at the shed.

The students noted the support available both at the shed and in the community generally for assistance with their project. Offers of help, guest speakers, and activities at the shed, special programs for men only as well as attractive discounts for gym and other memberships were offered. This augurs well for the sustainability of current and future programs. Students together with projects and activities were also featured in several local newspaper and television media stories⁵.

Short- and medium-term outcomes arising from the project were ascertained through formative evaluation as well as observation and informal discussions with stakeholders. Outcomes included: improved member knowledge regarding determinants and risk factors for chronic disease and strategies to mitigate risk; the benefits of a healthy diet and increased physical activity; improved food preparation and cooking skills; positive shifts in awareness, knowledge and behaviour regarding healthy foods and healthy food choices, physical activity, and recognition of unhealthy options; greater confidence in goal setting and developing action plans to encourage physical activity and exercise and healthy diet and food choices; improved communication, shared decision making and teamwork among shed members; and an increased awareness of services, facilities and opportunities to support physical activity and exercise in Whyalla.

Shed members also reported an improved understanding of: the role and function of occupational therapists; curriculum requirements for OT students and the conduct of community development projects; and some of the challenges, study responsibilities, dreams and aspirations of young people. In addition, members described personal satisfaction in being part of a ‘research project’ and contributing to the students’ learning outcomes; improved self-esteem as a result of mentoring students and being valued for their knowledge, skills, life experience and

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⁴ Safe operating procedures were initially developed with the assistance of a vacation scholarship student during an unrelated student placement, which occurred during the summer of 2015.
⁵ See, for example, http://www.whyallanewsonline.com.au/story/3889569/uni-students-get-active/
wisdom; and in developing and applying skills that supported the learning, professional and personal growth of students.

The students also declared a range number of benefits resulting from the projects. In the first instance the nature of the projects entailed students acquiring knowledge relating to men’s health across the life course and an understanding of the men’s shed phenomenon and the benefits that men’s sheds provide. Students developed knowledge and understanding of the common ailments affecting older men, the socio-economic determinants and risk factors, as well as potential strategies to mitigate them; they also acquired knowledge regarding healthy diet, nutrition, physical activity and exercise, particularly as it applies to older people. Students acquired knowledge regarding health promotion and health promotion programs, including strategies for presenting information in a way that would engage older men.

Students developed theoretical and practical skills in community consultation, project planning and implementation and formative evaluation. They improved their knowledge and understanding of the events, experiences and challenges facing older men in a disadvantaged regional community and of the resilience of the shed members in the face of such trials. They also gained understanding of the value of older community members as a resource for volunteering, community service and enterprise and in providing support for all sectors of the community. Students also reported increased confidence and self-esteem, a deeper understanding and respect for the elderly as well as improved oral and social communication skills and experience in conversing with older men from a range of backgrounds. On the practical side, students had an opportunity to learn and practise basic woodwork techniques and even learned to play the ‘old game’ or cribbage.

Students commented that shedders had made them feel welcome from the outset and had taken pride in demonstrating shed facilities, amenities, activities and achievements. Several shedders had taken the students under their wing (as mentors) and imparted their skills and knowledge regarding woodwork and other trades, while at the same time sharing life stories and experience. Students were encouraged to become involved with shed happenings, including the daily camaraderie, as well as to undertake several small personal construction projects in association with members. Shedders appreciated the enthusiasm, presence, knowledge and effort of students and were happy to share their shed with them.

Lastly, students commented on having developed an appreciation of Whyalla as a town and community; the difficult challenges it currently faces as a result of the downturn in the mining and commodities boom; a little of the rich fabric of its older and not-so-old residents; its strengths and spirit and the social capital and community cohesion evident in terms of actions, partnerships, networks and in overcoming difficulties.

Students also learned about living away from home, living independently, the regional campus and its amenities, the student village, the walking, cycling and running tracks and the beauty of the Eyre Peninsula and the nearby Middleback and Flinders Ranges.

While there were a number of positive outcomes associated with the project, there were some activities that did not proceed as planned. In an initial effort to encourage shed members to drive the planning, prioritising and scheduling of activities, students tried to establish a working group of key shed members. However, it became evident that members did not want to take responsibility for decision making or be perceived by other members as doing so. As a result, the group was disbanded in favour of student-led discussion and consensus at the fortnightly

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Toolbox meetings. The initial member interest in the ‘Come and Try’ sessions did not translate into attendance at the sessions with only four or five members attending the Health and Fitness Centre Tour, Tai Chi sessions and the tour of the Bone Densitometry facility. In addition, despite initial interest in outdoor walking sessions and visits to the Council outdoor exercise equipment, these activities did not proceed due to lack of numbers. Conversely, the Step Challenge, the evening Lawn Bowls event and sessions involving guest speakers were well attended and received, suggesting that future physical activity programs should focus on activities familiar to members.

These learnings and experiences will provide useful foundations for students both professionally and at a personal level.

**Discussion**

Education or learning together, with control over one's life, purposeful activity, and social networks are important among the socio-economic determinants of health (Misan & Ashfield, 2011). To this end, men’s sheds offer a range of socialisation and learning opportunities for older men, many of whom have had limited formal education and often face social isolation after leaving work.

Sheds demonstrate the social and well-being advantages of learning in a community of like-minded individuals where learning involves practical, productive activities with tangible personal and community benefits (Kimberley, Golding, & Simons, 2016). Learning opportunities extend beyond the traditional craft and trade skills and, as our study has shown, have come to include ways to improve health and fitness, to eat healthily, to plan and prepare meals, to cook, and to foster camaraderie and friendships as well as mentor each other and the younger generation. Reciprocal acquisition of skills and knowledge, health promotion, mentoring, and mutual respect are features of the project described. The project has also allowed seniors to try new experiences in a safe, male-friendly environment, devoid of the need to prove masculinity or manhood; it also provided opportunity to expand the socialisation aspects of the shed to partners and family; to cope better with retirement, ageing and disability; and generally to learn how to enjoy life beyond paid work.

Since the late 1970s intergenerational learning models have been connecting old and young people in both formal and informal settings to promote intergenerational exchange. Programs have been characterised as activities that purposefully bring together generations to share experiences that are mutually beneficial and that promote social growth and learning between the young and the old (Dantzer et al., 2012; Newman & Hatton-Yeo, 2008). In programs where the principal beneficiary is the younger generation, the focus tends to be on education and employment; for those targeting the elderly, the focus is most often on active ageing. For other groups, for example ethnic minorities, people with disabilities or migrants, often the focus is remedial or social. The benefits for older people, sometimes purposeful, include social inclusion, meaningful activity and a feeling of being useful through contribution of life-time accumulated knowledge, expertise and wisdom. For the younger groups, benefits include additional education, training and experience-enhanced communication, respect for elders and improved social skills, which may facilitate entry into the labour market, improve education outcomes, reduce antisocial behaviour and promote social inclusion (Dantzer et al., 2012).

These observations are commensurate with the outcomes of the men's shed projects described herein, wherein we have illustrated mutually beneficial outcomes for both the target group of older men and the students. For the seniors, the intention was to empower shed members
through imparting skills and knowledge to influence health behaviours and lifestyle choices, thereby promoting active ageing and assuaging welfare and health system dependence (Kendig, Browning, Thomas, & Wells, 2014). For the students, the benefits were educational, experiential and social, strengthening future professional practice, relationships, socialisation and employment opportunities (Dantzer et al., 2012).

The findings from this study are consistent with that of a falls prevention study conducted in two Sydney men’s sheds that explored older men’s experiences and perspectives on fall risk and fall prevention. The aim of the study was to gain insight into strategies to better engage men in fall prevention. The study concluded that program participation was enhanced as a consequence of the shed atmosphere being inclusive and male-friendly, and where the program was incorporated into regular shed activities and was enjoyable (Liddle et al., 2016). Ensuring that the program was personally meaningful was an important enabler effected by giving men a choice of practical options applicable to their own circumstances, which, by facilitating a sense of personal control over fall risks, led to personally relevant action (Liddle et al., 2016).

Those results were consistent with our observations of men’s sheds promoting self-directed, practical, holistic learning without teachers, curriculum or health professionals, pedagogical attributes which have given rise to the term ‘shedagogy’ to describe informal learning in the shed through the collective action of participants in the absence of formal, programmatic, institutional, educational or other professional intervention (Golding, 2014).

There is evidence that participation in informal learning activities, including in intergenerational activities, has benefits for social and emotional well-being. By keeping busy, staying involved, being a part of the community and feeling socially useful, men gain an improved sense of purpose and of self-confidence and self-esteem which has positive health impacts (Fragoso & Formosa, 2014).

Some posit that notions of hegemonic or other masculinities may have a bearing on learning preferences in older men. Prevailing conceptions of masculinity have been seen as the cause of men often relying on their own efforts and failing to seek information and help with respect to their own health issues (Liddle et al., 2014). It is contexts that are seen to be “sensitive to subjective and public perceptions of masculinity” that provide a learning environment more likely to be attractive to older men (Formosa, Fragoso, Krašovec, & Tambaum, 2014, p. 10). For some men, particularly those from male-dominated, harsh working environments, the masculine tradition of ‘learning-on-the-job’, through practice and experience, ‘shoulder-to-shoulder’, sometimes involving competitive elements, and in the absence of women, may also be a preferred milieu for learning following cessation of paid work (Fragoso & Formosa, 2014). That is, older men generally have a preference for informal, hands-on learning approaches in settings where they do not need to affirm their masculinity to outsiders, for example, in a co-educational classroom.

By providing a setting consistent with the epistemological preferences of older men, learning can become non-threatening and perhaps even enjoyable. The normalised setting of the men’s shed may be just such an environment by which to extend learning beyond trade or craft skills to other topics, including health, in which, as described previously, some men have shown reticence to engage due to perceptions of lack of control or weakness (Smith, Braunack-Mayer, Wittert, & Warin, 2008). As a primarily male setting, involving men of similar age and health, men’s sheds offer a safe environment which limits participant need to demonstrate stoicism in the face of ageing, physical limitations and disability, or to limit exposing lack of skills or knowledge, or poor literacy, including health literacy. In so doing, the shed gives participants permission to distance
themselves from traditional negative connotations of hegemonic masculinity anchored in concepts of power and control and subordination of both men and women (Fragoso & Formosa, 2014). As a safe space, where men are not under constant pressure to re-affirm their power and masculinity, learning is collectively legitimised, which in turn fosters receptiveness to learning through non-traditional channels, for example, from young female students. This proposition is in part supported by others who posit that learning for older men may be:

... less effective if it assumes that all men have a problem, that particular masculinities are the problem, or if it requires them to be served up curricula and assessments for qualifications, vocational training or literacy, as students, customers, clients, or patients, which presupposes a deficit. These approaches are totally inappropriate and patronising for most men and boys of any age, and most patronising for men already turned off to learning by negative prior learning experiences. (Golding, Mark & Foley, 2014, as cited in Fragoso & Formosa, 2014, p. 104)

The findings from this study as well as others (Liddle et al., 2016) demonstrate that health promotion programs offered in the setting of a men’s shed can be effective. If sensitive to the needs and learning preferences of participants, implemented using hands-on, experiential, fun, group activities, with time allocated to build understanding, rapport and acceptance, such programs, even when delivered by young females, can engage otherwise sometimes difficult to reach older men.

Conclusion
Men’s sheds may offer a useful setting for intergenerational learning where the target group is older men. Health promotion programs utilising student-led health education offered within a primary health care and community development framework seem ideally suited to address health knowledge deficits and the practical, informal learning preferences of older retired men. Integral characteristics for such a model include gaining a clear understanding of the needs and preferences of the target group, developing reciprocal and respectful relations through occupational engagement of both the seniors and students. Benefits arising from this exemplar program include empowering shed members by imparting skills and knowledge that influence health behaviours and lifestyle choices, thereby promoting active ageing and mitigating system dependence. For the students the benefits are educational, experiential and social, potentially strengthening future professional practice and employment opportunities. The authors of this paper note that the observations described herein reflect activity in only one men’s shed and therefore caution should be exercised before applying findings to other settings.

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