



WITNESS STATEMENT OF WAYNE SCHWASS

I, Wayne Schwass, Founder and Chief Executive Officer of Puka Up of 3 Mount Street, Prahran, Vic, 3181, say as follows:

- 1 I make this statement on the basis of my own knowledge, save where otherwise stated. Where I make statements based on information provided by others, I believe such information to be true.
- 2 I am a former Australian rules football player. I played for North Melbourne Kangaroos from 1988 until 1997, and was part of their premiership side in 1996. I played for Sydney Swans from 1998 until 2002, when I retired from the game after playing 282 games.
- 3 In April 2017 I founded the social enterprise Puka Up, of which I am the CEO. Our vision at Puka Up is to normalise conversations about mental health as part of everyday life, with the aim of eliminating suicide. Two years ago, I made a conscious decision to do the work that I am doing at Puka Up and I feel that it is the purpose of my life. Football was a chapter of my life that I wrote a long time ago and I'm grateful for that experience – it has given me the vehicle to do the work that I do now.

My journey with mental health and wellbeing

- 4 On 9 August 1993, I was diagnosed with depression. Two weeks prior to that on 26 July, I was driving home from a training session on a Monday night and I had a nervous breakdown in my car. I lost control of my emotions. I drove home and parked the car outside my house. My fiancé was inside and I sat in the car for an hour and a half because of shame. I thought, I can't take myself in there and show my fiancé what I am feeling. When I look back and reflect on my life, I've never spent time trying to work out why it happened, it just happened.
- 5 When I reflect on that period in July and August of 1993, I realise that I could retrace the issues to four years earlier when there were periods of my life where an overwhelming fog of sadness would drift in. But I was an early 20 year old male in a male dominated sport where testosterone, aggression, anger and all of those traditional male traits were common place. I had no emotional intelligence or maturity to recognise that I was under stress. So the date of diagnosis of my depression was probably the culmination of four or five years where things were starting to build up, but up until that point of breakdown, I thought that was just life.

- 6 After I was diagnosed, I sought to self-medicate. I abused alcohol, I smoked an incredible amount of marijuana and I used any other drug I could get my hands on. Even though I was going through really difficult times personally, I had the capacity to cope with stress on the football field because I'd been trained and educated to deal with that stress at an elite level. My toolbox to deal with stress on the football field was full. However, all that I had in my emotional intelligence toolbox was alcohol and drugs.
- 7 I dealt with my condition silently because I was conditioned to disconnect emotionally, because of my gender. The expectation is that men do not show emotion. I grew up to believe that men who show vulnerability and insecurities are weak and you can't trust them. That way of thinking and behaving contributed to the issues that I experienced. It was a contributing factor in my use of alcohol and drugs, and why I grappled with ending my life for four and a half years.
- 8 The effect of these traditional gender roles is that they cause tremendous pain and hurt for men – of the average eight suicides every day in Australia, six are men. It's not necessarily a male or female thing – it's a human issue. We live in a world that more readily accepts and respects girls and women of all ages and backgrounds for being emotional creatures. But we also live in a world that judges, criticises, labels and marginalises men for behaving in the same manner. That is a significant problem which in my opinion contributes to why so many men like myself feel they have no option but to silently deal with their issues. We don't know how to feel, think or communicate, or we think that it's weak to ask for help. So we end up thinking that we should end our life.

Seeking help

- 9 Six years after being diagnosed with depression, I was 29 years old and I was playing football for the Sydney Swans. At that point I had an epiphany – I'd done nothing to help myself for six years. So in the middle of a training session I made the decision that after I finished training, I would go to the doctor to seek help – and I would close the door and lock it because of fear of people seeing me.
- 10 Amongst all the tears, and there were lots, I said I was sick and I asked for help. I was introduced to a wonderful psychiatrist who I worked with for four and a half years to understand my conditions and how they were impacting my life. She helped me to develop the necessary skills and capacity to think differently and behave differently while managing those conditions. So ten and a half years after my diagnosis, I was in a position where I felt I had some control back.
- 11 Twelve years after my diagnosis (between October 2005 and 1 March 2006) I made three life-changing decisions. The first of those decisions was telling my family. For the 12 years since my diagnosis, I lied and I pretended and I hid behind a facade because

of shame. I believed that if I told my Dad, who's been a wonderful role model in my life, that I was depressed, he'd leave me and that scared me. I did everything I could to protect the key relationships in my life because I was of the belief that once people knew about my condition, they'd lose respect and walk out of my life. Telling my family was really important and it was the first time in 12 years that I was honest about what I was living with. And no one walked out of my life, they stayed with me.

- 12 In February 2006, I made six phone calls to my closest male friends, four of whom were premiership winning team mates from North Melbourne. I can't tell you the number of times I was in their company on the verge of crying but never allowed myself to show it or tell them what I was going through because again, like my family, I thought I'd lose them. I called these men because an article was going to be published in the paper the following day and I felt they deserved to hear it from me first. They all said two things that day that were really important to me: *'How are you? Is everything okay? What can I do to help?'*, which was all I ever wanted to hear. The second thing was: *'why didn't you tell me'*, they were really disappointed. And I think that's very fair – some of them were really angry.
- 13 Outside of asking for help and working with my psychiatrist, the single greatest decision that gave me my life back was the publication of a two paged article in the Herald Sun in March 2006. It was very scary. I put it off six months earlier, but eventually I decided that I was sick of telling a lie, and I told my story to a journalist with the intention that it be published. I had invested 12 and a half years of my life into a lie to protect everything out there at the expense of myself, because of fear. Once the article went to print, my story was out and it was liberating because for the first time since 1993, I could just be myself. I had no control over the reaction to the story. I had no control over what people would think, say or do but I had control over my story and that's really important because prior to that, my story had controlled me. I was able to say this is who I am, this is what I've lived with, these are the challenges that I have faced, but I'm actually okay with that now and if you choose to judge me differently or negatively I don't have to accept or tolerate that reaction. It was a pivotal moment in my life where I stopped pretending and I just started living again.
- 14 I've been on a 25 year journey. I have fundamentally changed my narrative and the messaging that I say to myself. I used to say the word *"suffer"*. I don't say *"suffer"*, because if I suffer a mental illness I'm anchored to the negative experience and I'm a victim and a prisoner to that journey. I don't say *"mental illness"*, because I think the narrative and the connotations about mental illness are very negative. I say that I *"manage well-being"*. Language is really important because it means that I'm the one in control of what I choose to say and how I go about looking after my health. I used to

think it was important to tell audiences when I was presenting to that I'm cured – I don't think that anymore because I don't need to be cured – I manage my wellbeing.

- 15 I am grateful for the difficult experiences I have had, because it has forced me to look internally and do the work required to gain an understanding of what it means to be a man. I have had to reflect on why I have grown up and lived most of my life trying to meet the expectations that others or society have placed on me because I am an AFL football player and a man. I've reflected on all of that and I've got to a position in my life where I've decided that it doesn't serve me anymore.
- 16 There's no rule that says a man can't be strong stoic, resilient, tough, hardworking, a leader, decisive – all of those traditional male characteristics and traits – as well as loving, caring, nurturing, empathetic, with the ability to talk and listen, and most importantly with the ability to be emotional. When I say emotional I mean everything, but in particular I mean the ability to cry, because it's a natural part of being a human being and the conditioning that I was subjected to conditioned it out of me. I am now more connected emotionally. When things happen in my life I talk, I cry, I ask for a hug and I give hugs. I'm not uncomfortable with behaving in that manner anymore because I know it empowers me to manage my wellbeing.

The twitter post

- 17 On 13 December 2017, I tweeted a picture of me with my hands in the air after winning the 1996 premiership with North Melbourne with the caption "*this is what suicidal looks like*". My reason for sharing that post was that I wanted to challenge the way that we, as individuals and as a society, think about mental health and in particular suicide. That moment in 1996 was my sporting Mount Everest – I'd just become a premiership player in front of a large crowd and TV audience, but everybody bar two people at the ground that day, my wife and my doctor, realised that I was in the middle of a really difficult personal battle.
- 18 I was hiding three concurrent mental health conditions: anxiety, depression and obsessive compulsive disorder, and I was three years into that battle. The premiership player smiling with a premiership medal around his neck was broken. He was spiritually lost, emotionally bankrupt and tired. Even though that was such a joyous moment that I'm proud of, the truth of the story was that I was thinking about how I could end my life, because I'd lost hope and connection with reality to the point where I believed that ending my life was the only option I had. That's a confronting image for people because when they know that I was playing Australian rules football, getting well paid, I had a nice car, a nice house and I lived in a really nice suburb, they might assume it would make me happy. It doesn't. They're material possessions. That doesn't equate to happiness.

- 19 Part of the motivation for wanting to share the photo is to challenge people's assumptions. I wanted to show that even a high profile, well paid, seemingly successful football player can be thinking about ending his life. I'm trying to challenge the way that we think about mental health conditions and the attitudes and perceptions that feed into discrimination against people living with these legitimate conditions.

What my journey has taught me about stigma and discrimination

- 20 My journey with health and wellbeing has shown me that discrimination is alive and well unfortunately. Stigma is the word that we commonly use. I don't think it's strong enough and I don't think it's accurate enough – what exists in society is discrimination against a legitimate set of medical conditions.
- 21 I think stigma has two parts to it. There is stigma in the community and there is stigma in how we feel about ourselves. This can result in shame, guilt, embarrassment and an overwhelming sense of failure. The words I use a lot to describe that period of my life are *"a fake"* and *"a fraud"*. I was achieving some terrific team and individual awards, but I had lost all confidence and self-worth because of my perception that my mental health conditions made me weak and a failure – and that they meant that I wasn't a good person. I perpetuated stigma within myself because of the way that I felt about mental health conditions and the fact that I had one.
- 22 Stigma in the community is the reason I didn't speak publicly for 12 and a half years. I had a paralysing fear of what other people would say, do or think in response. I see examples of stigma and discrimination in the community almost every day, and I think it is a preventative barrier stopping millions of Australians from seeking help because of fear of the reaction if people find out. I suspect that stigma is a contributing factor in why we lose so many people to suicide and that's why I'm passionate about this issue.
- 23 Stigma and discrimination can be experienced in many ways. For example, people not getting employment or being discriminated against in their employment because they've declared that they might be experiencing or managing a mental health condition. If you are applying for an insurance policy and you answer the questions honestly, you can be denied insurance because you are managing mental health conditions. That is discriminatory. How is a person who is managing a mental health condition any different to a person who is managing asthma, diabetes, a form of cancer or any other legitimate medical condition?
- 24 We do wonderful things as a society for people experiencing physical conditions, but we don't champion people living with mental health conditions. This can increase the stress that people experiencing mental health conditions are already under and can contribute to them believing that ending their life is the only option they have available. Stigma and

discrimination marginalises people who already feel marginalised because of their conditions.

25 I think the reason stigma exists is that people are scared or confronted by mental health conditions. I also think there's a healthy dose of ignorance and a lack of understanding with regards to the legitimacy of these conditions and the impact that they have on people. People might consider it easier to maintain the status quo, rather than reflect on the prejudices they might hold. If any one of us in the community came home and found out that one of our children or an immediate family member was diagnosed with a particular medical condition that might be life threatening, I think it's safe to assume that most people in that situation would invest the time to understand the issue. When we educate ourselves, we put ourselves in a position where we can make more informed decisions about how we might support somebody in a constructive, positive and proactive manner. But if we don't educate ourselves on our language, our tone and our delivery, we can be making an already overwhelmingly stressful experience for somebody manifestly worse. This is why it's so important that we begin to change the narrative around mental health.

26 There are around 3 million people living with diagnosed anxiety and depression each year in Australia and they're only the people that we know about. So the numbers in my opinion are much greater than what we know. It's likely that the majority of Australians know someone in their immediate network who is living with a mental health condition.

Vision for society

27 My vision for society is that we live in a world where there is no stigma and discrimination. I want to encourage audiences and communities, men and women, to question the narrative. What does it mean to be a man? How is the current definition of masculinity serving us? I want language, perceptions and attitudes to fundamentally shift so that we as a society wrap our collective arms around people living with mental health conditions and we start talking about it. Whether health is mental or physical is irrelevant. What is relevant is that health is seen as two halves and the sum of all parts.

28 I reflect on the AFL industry and its response to racism. In 1993, Nicky Winmar, an Indigenous player for St Kilda, stood at Victoria Park, lifted his jumper up and pointed to his skin colour. The people governing the game at the time acknowledged that this was a problem and made a subsequent conscious decision to do something about it. Fast forward 25 years and racism is not eradicated in the game and there's still work to do, but the industry has acknowledged and recognised it and implemented a plan. The people in power made a decision to invest into education awareness, changing the narrative, opening up dialogue and educating all of the stakeholders in our industry that this is no longer acceptable and the reasons why. We may think it's not racist but if it

impacts or hurts or harms a person then it is racist. That's powerful. I consider that the same opportunity exists with regards to mental health and specifically discrimination and stigma. When we educate ourselves individually and collectively, we give ourselves the opportunity to make different decisions. We have a simple choice, we either choose to call it out and stop tolerating it or we chose to stay silent and if we chose to stay silent then we are complicit in the problem.

Puka Up

- 29 Puka Up is a social enterprise which I founded three years ago. I was working at Telstra in a corporate sales role at the time. I spent a lot of time reflecting and I felt I needed to be doing something that I'm passionate about, because I am a passionate and purpose driven person. I got to a point where I realised that I could sell someone a communications system or a piece of technology that helps a person do business better and more efficiently, but when I walk out the door I haven't impacted a person's life. I grew increasingly frustrated that I wasn't making a difference. My chairman thankfully gave me the opportunity to bring Puka Up to life.
- 30 "*Pukka*" is a Hindi word that means authentic and genuine. This meaning is important for two reasons. Firstly, if we can be open and honest about health then we can do what is necessary to manage our wellbeing. Secondly, the meaning connects with Puka Up's vision to create environments that allow every person to have authentic and genuine conversations around mental health and emotional wellbeing. We create safe spaces for people to have open conversations about their health. We are very active on social media. We do an annual suicide prevention bike ride. We have our own podcast series. We created a documentary from our bike ride two years ago. We think of ourselves as conversation architects. We can't tell anyone what to do, that's not our intention. Our view is that we can create spaces that invite people in when they are ready to speak.
- 31 We have had really great cut-through in a short period of time with our messaging. To give you a simple example, on this year's annual bike ride, half way through the ride I announced to the team that I physically couldn't complete the ride. I was emotional when I made this announcement and we videoed it and shared it. If we aren't living the values that we're encouraging, educating and inspiring other people to live, we're hypocrites. So we live it in everything that we do internally and externally. Our values drive every behaviour and we have unapologetically embraced this challenge of suicide prevention. I say unapologetically because it's a really complex, confronting, challenging and uncomfortable topic to talk about. But if we don't consciously choose to talk about it, how can we expect statistics to change? Our view is, let's take up the challenge and do it in a constructive, empathetic and supportive way, and let's recognise the devastation and destruction that the issue causes.

Suicide prevention at Puka Up

- 32 At Puka Up we are involved in suicide prevention because we believe every person matters. There are two trains of thought when it comes to speaking publicly about suicide. One train of thought is that if we speak about suicide, it will result in more people taking their own lives. The second train of thought is that suicide rates will not increase if we talk about suicide, and I am in that camp. At Puka Up, we believe that we should shine a really bright light on the issue of suicide and acknowledge it. It's uncomfortable, but we are prepared to do it. Normalising mental health and emotional wellbeing is really important because if we can do that, we'll prevent people from ending their lives. If people can talk about emotional wellbeing issues in the way that they can talk about a sore back, it will become normalised in society.
- 33 The second reason is because we genuinely believe that the lives we lose to suicide should be more than just statistics in a document or on a website. For every person lost there is a story, a life, a journey, and an immediate and extended network of family and friends who are left devastated because of the pain and the anguish. By the end of today there will be 8 more families and communities that have to come to terms with losing someone.
- 34 At Puka Up, our purpose is to work in the prevention space. A lot of services in the mental health industry operate at the crisis point, but our deliberate decision in relation to our organisational direction is to operate in the prevention space. Our view is that if we operate in the crisis space, we are nothing but noise. The sector can be reactive. We want to shift the focus away from crisis to wellbeing. If we educate people to help them understand their triggers and how stress manifests itself, we are giving people the capacity to identify when they might need help and to act on it earlier.

The impact of Puka Up

- 35 I have many stories about the impact of Puka Up. This year on our annual bike ride, we decided to cover a truck in black decal with a message saying "*I'm signing this truck to start a suicide prevention conversation*". At the start of the ride there were no signatures, but by the time we got back to Melbourne 10 days later the truck was completely white because the signatures were in white. The power of the truck was incredible. A lot of people asked us whether they could donate money, but we told them instead to take the message home and have a conversation about suicide prevention.
- 36 One morning during our ride as I came out of the restaurant where we were having breakfast, I saw a middle aged man crying, with two of our riders. I didn't know this man, but I walked over to him and we hugged and cried with two other men, just standing there letting it happen. Once we stopped hugging, he then shared that 2 weeks earlier

his son had taken his life. This man drove past the truck because he didn't think that he had the strength or courage to come out and sign the truck. But in the end he parked his car, he came up, he signed it in honour of his son and he shared a really vulnerable, emotional and painful experience with us. That's Puka Up. That's what we do. We're willing to have those experiences and exchanges with people.

37 Another story I have relates to the documentary we made about our 2018 annual ride. It was shown on Channel 9 at 11.30 on a Sunday night. The response to the documentary was quite overwhelming and we had hundreds of messages. One message I received from a woman who I've never met read, *"I stumbled across your documentary and I was ready to go to bed. I was planning to end my life the next day. I just want you to know I've parked that decision because of your documentary. Thank you for acknowledging me and all of the others who are living with these conditions. Thank you for giving me hope and thank you for showing me there is a way through this difficult challenge"*.

38 That's why I do what I do. This woman had planned to end her life and she stopped that plan because of this documentary. It connected with her, it gave her hope, it gave her a sense of connection or inspiration to the point where she decided not to follow through with what she was planning on doing for the moment. Because she didn't end her life there's a mother, sister, daughter, potential grandmother, girlfriend, business owner that's living a life right now. It might be challenging but all we did was give her a sense of connection. How we did that was by creating a documentary that normalised the conversation and that shows people you can talk about this.

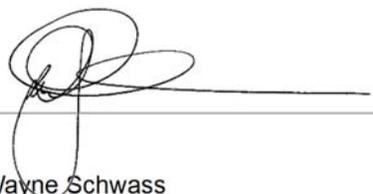
Mental health and men

39 We have shifted the pendulum on the dial, but not enough. For every high profile player who has come out and spoken publicly, it's safe to assume that there would probably be another 3-5 players at the every club that have not made the same decision for reasons similar to my own. It's moving but it's not moving fast enough.

40 A couple of years ago, at the wake following the funeral of a young man I've known for a long time, five men approached me with ages ranging from late teens to over 60. Each of them touched me on the elbow really discreetly or gently grabbed my shirt. They acted in this way because they didn't want anyone else to see them getting my attention. I asked each of them if they wanted to talk and they all answered *"yes, but not here"*.

41 One of them, a young man, broke down uncontrollably when we found a room where we could speak privately. He eventually told me he was hurting and in pain because he had lost his dad 2 years earlier. Still in his teens, he had to become the man of the house. This boy had carried that pain and loss and all of the associated emotions

silently because he didn't want to burden his loved ones. He didn't want to tell his family about his pain because he thought they were under enough stress; because he needed to be bulletproof for them. When I asked him why he told me, he said "*because I know you won't judge me*". He thought his friends would lose respect for him. This is not an isolated issue. This is why there are so many men in our country and in our communities who are living this right now. These men are so scared and so in need of our support and professional services, yet they're fearful of people's reactions if they ask for help – and that's why I believe we lose so many men. In our society, the first thing we do when we cry in front of other people is apologise, and that needs to change.

sign here ► 
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date 25 June 2019