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## THE MENTAL HEALTH OF SEAFARERS: A BRIEF REVIEW

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This report discusses the mental health of seafarers from two separate but related aspects. The first is a brief review of statistics on seafarers' mental health and the underlying causes of poor mental health by many seafarers. Statistics show that the rate of suicide by seafarers is much higher than general populations and that the causes of depression leading to suicide include loneliness, separation from families, stress, lack of shore leave, short ship turn around times, job security and cultural problems. The second is a description of two projects started in the past three years by the Rotary Club of Melbourne South (Australia) and by the International Committee on Seafarers Welfare (ICSW). The Rotary project, being carried out under the guidance of the Melbourne Port Welfare Association, has distributed booklets on the single topic of depression for Masters and leaflets for non-officer seafarers in four languages: English, Chinese, Tagalog and Russian. As of June 1, 2011 this material has been put aboard more than 1,200 ships in five ports in Australia. The ICSW project has produced guidelines in English for mental care onboard merchant ships and covers stress, harassment and bullying, anxiety, depression, disruptive thinking and behavior and addiction to alcohol and drugs. The Rotary Club of Melbourne South has started planning for the First International Symposium on the Mental Health of Seafarers to be held in either Hong Kong or Singapore in early 2013.

*Key words: mental health of seafarers, the prevention of suicide*

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### Introduction

This report is divided into two parts. The first part is a brief review of the recent literature on seafarer's mental health. The second part describes a seafarers' mental health project carried out through the Melbourne Port Welfare Association and another project by the International Committee on Seafarer's Welfare concerning seafarers' mental health.<sup>2</sup>

#### **Part 1: A review of recent literature. Materials and methods**

Recent literature on seafarers' mental health was obtained by the author's personal contacts with individuals interested in this subject, but mainly by searching the internet for papers on the *Mental health of seafarers*, *Depression among seafarers*, *Suicides among seafarers* and *Fatigue among seafarers*. The first hundred hits on these topics usually resulted in the most important papers.

Seafarers' rights to mental health

care.

Douglas Stevenson (2009) states "Neither traditional maritime law or the ILO Maritime Labour Convention, 2006, specifically addresses mental health care, but court decisions in the past fifty years make it very clear that a seafarers' right to free medical care includes a right to free mental health care. A greater obstacle to seafarers seeking mental health care is the stigma of receiving the care. Seafarers may fear being labeled as a person with a mental illness and all of its associated stereotypes... Seeking mental care can also have consequences for a seafarers' social acceptance and self-esteem."

#### **Suicide – a serious problem**

The evidence that suicide among seafarers is a serious problem is incontrovertible. Suicides among seafarers have been widely reported as shown in Table 1 and Table 2. Several cite seafarers that disappear without a trace and which are

thought to be suicides. Roberts & Marlow (2005) reported deaths of disappearing seafarers as follows: "...178 seafarers in this study were due to disappearances at sea or were found drowned. From examining official inquiry files, suicide was the most plausible cause in about half of these 178 cases." Disappearing seafarers are also discussed in Low (2006).

Suicide by seafarers is much higher than suicides in general populations. In Australia for example, suicides were two percent of the country's total deaths in 1998 (Wesley Mission 2000) and 1.5% of all deaths in 2008 (ABS 2008)

<sup>1</sup> The views and opinions stated in this report are those of the author, and not necessarily those of Rotary or the other project participants.

<sup>2</sup> The two projects are titled *The Mental Health of Seafarers*, being carried out through the Melbourne Port Welfare Association, and *Guidelines for Mental Care Onboard Merchant Ships* by the International Committee on Seafarers' Welfare. The two projects approach the subject of seafarer's mental health from different but related perspectives.

<sup>3</sup> 22 seafarers disappeared at sea

<sup>4</sup> 178 seafarers disappeared at sea

<sup>5</sup> Flag of Convenience

Table 1

Percentage of all deaths by suicide

Reference		Nationality	Total Deaths	Suicides	% Suicide
Roberts & Williams	2007	UK	369	16	4.3 <sup>3</sup>
Szymanska et al.	2006	Polish	324	33	10.2
Roberts & Marlow	2006	UK	60	6	10.0
Roberts	2006	UK	65	2	3.1
Roberts & Marlow	2005	UK	835	55	6.6 <sup>4</sup>
Roberts	2003	FOC <sup>5</sup>	624	36	5.8
Li & Zhang	2002	UK	5,839	348	5.6
Cooper	2000	Various	926	91	9.8
Nielsen	1999	Various	123	4	3.3
Hansen	1996	Danish	94	12	12.8
Jaremin et al.	1996	Polish	109	4	3.7
Larsson & Lindquist	1992	Swedish	223	18	8.1

<sup>3</sup> 22 seafarers disappeared at sea

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<sup>5</sup> Flag of Convenience

Table 2

Percentage of non-traumatic deaths by suicide

Reference		Nationality	Deaths	Suicides	% Suicide
Roberts & Williams	2007	UK	166	16	9.6
Roberts & Marlow	2006	UK	41	6	14.6
Roberts	2006	UK	31	2	6.5
Roberts	2003	FOC <sup>5</sup>	68	7	10.3
Li & Zhang	2002	UK	2,861	348	12.2
Cooper	2000	Various	521	91	17.5
Nielsen	1999	Various	42	4	9.5
Hansen	1996	Danish	53	12	22.6
Jaremin et al.	1996	Polish	44	4	9.1
Larsson & Lindquist	1992	Swedish	117	18	15.4

<sup>5</sup> Flag of Convenience.

When suicides are shown as percentages of non-traumatic deaths, such as stroke and heart attacks, they become even higher as shown in Table 2. If half the cases of disappearing seafarers at sea were included in the data, as suggested by Roberts and Marlow (2005), they would be even higher than shown in Table 2.

*My point here is that the real percentage of suicides among seafarers is much higher than the statistics shown in Tables 1 and 2 (emphasis added).*

The Seafarers International Research Centre at Cardiff University, Wales estimates that three seafarers commit suicide each week (SIRC 1998).

The highest post World War II number of seafarers in the U. K. merchant navy was almost 200,000 in 1950, but by 2005 this number had decreased to 35,000 (Roberts and Williams, 2007). They report the highest rate of suicides after World War II was 23 per 100,000 seafarer work years in 1970 with this dropping to 2.2 per 100,000 seafarer work years in 2005. They state: "The increased risks of suicide in the deep-sea trades were often linked to an easy access to a means of suicide, social isolation; and perhaps other identified risk factors in the relationship between occupation and suicide," and "The reductions over time in the deep-sea trading sector since the 1970's is therefore likely to be the main explanation for the reductions in the

suicide rate". Another possible reason might be that the living conditions aboard ships improved markedly and that the mental health of U. K. merchant navy seafarers became more robust as working conditions improved (*my speculation*).

#### **Causes of mental illness among seafarers**

The causes of mental illness among seafarers are well known. The International Committee on Seafarers' Welfare booklet "Guidelines for Mental Care Onboard Merchant Ships" (ICSW 2009) cites stress, harassment and bullying, anxiety, fatigue, disruptive thinking and behavior and addiction to alcohol and drugs. To these must be added loneliness, short ship turn around times, lack of shore leave, separation from spouses and families, job retention, and long working hours. Piracy and criminalization of seafarers are also causes, but these two subjects are being covered by other speakers at this Seafarers Welfare Forum.

Loneliness. There is no doubt that loneliness creates problems for seafarers. Lefevere (2000) quotes 80 year old Brazilian priest Fr. Mario Bilbi: "Loneliness is a seafarer's heaviest cross, the Brazilian priest said, noting that many seafarers are away from home up to 10 months. It's the presence of God and the thought of their families that is awakened at sea, he said – especially at night when you're alone on the bridge. What you see is darkness. What you hear is the talk of the waves."

Malakauskiene (n.d.), citing Agterberg & Passchier (1998), and Sampson & Thomas (2003), says they "showed that the main psychological problems were primarily caused by long periods away from home, social isolation and its effects on seafarers, the decreased number of seamen per

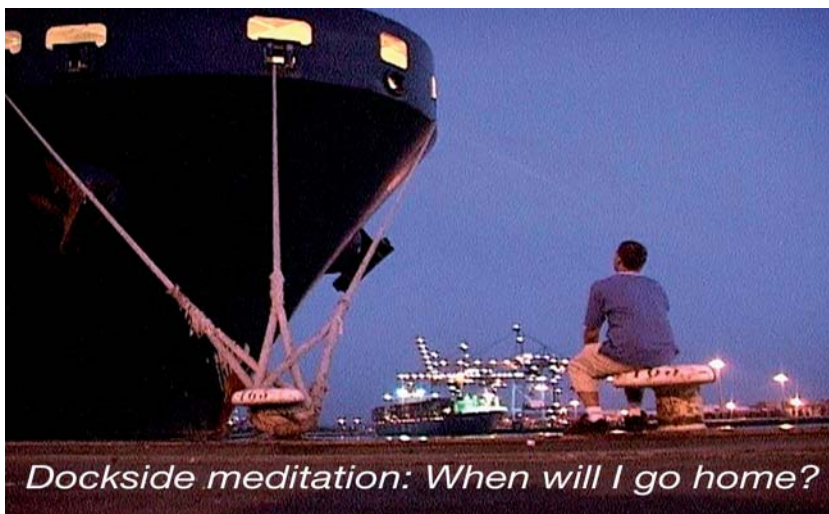


Figure I. A lonely seafarer.

ship and increased automatization.”

Separation from spouses and families. One of the first things that seafarers do when visiting any of the five seafarer centers in the Melbourne, Australia is to head for a bank of computer consoles they can use to communicate with their spouses and families at home. There is no charge to use these computers and it is not unusual on any evening to see banks of 5 to 20 computers (in the five different centers) completely filled with seafarers calling home via the internet. Many use center facilities to wire money home to families. A few ship owners allow some crew members to have their families on board. A few months ago at the Stella Maris Seafarers' Centre in Melbourne I met the second engineer from a ship with an all Filipino crew. He had his wife and two children with him on the ship during the voyage.

Stress. The International Committee on Seafarers' Welfare booklet “Guidelines for Mental Care Onboard Merchant Ships” has one chapter devoted to the problem of stress for seafarers (ICSW 2009). It says “Typical symptoms of stress are insomnia, loss of mental concentration, anxiety, substance abuse, extreme anger and frustration, family conflict and physical illnesses such as heart disease, migraine headaches, stomach problems and back problems. Six key areas (or ‘risk factors’) can be causes of work related stress on board. These are: the demands of the job; the level of control seafarers have over their work; the support received from management and colleagues; relationships at work; the seafarers' role in the organization; change and how it is managed.”

“When under severe stress, a seafarer fails to take clear-cut decisions, reevaluate and reassesses priorities and lifestyles, and ultimately tends to fall into unproductive distractions. This can be described as a classic case of ‘burnout’.”

“Chronic responsibility syndrome is a kind of burnout where people get mentally and physically exhausted from their work-

load. The symptom is often described as ‘there’s too much work to do, and no one else can do it but me’. Typically it will occur in hard working, hard driven people who become emotionally, psychologically or physically exhausted.”

Smith (2007) says that “Fatigue is strongly linked to mental health problems which are clearly risk factors for more chronic disease and early death (e.g. suicide).”

A classic accident resulting from fatigue due to lack of sleep by a ship’s officer occurred in Australian waters in on April 3, 2010 when the 225 meter long Chinese bulk carrier *Shen Neng 1*, carrying 65,000 tons of coal and 950 tons of heavy fuel oil, ran aground in a restricted zone on the Great Barrier Reef as a result of the officer forgetting to plot a safe passage of the ship through the reef. According to news reports the ship gouged a path three kilometers long through the reef. An environmental disaster was avoided because the weather was good and except for a leaking a small amount of fuel oil the ship was refloated and taken to a safe anchorage prior to returning to China for repairs. The Australian Maritime Safety Authority has released a final report on this grounding which says the accident was caused by fatigue of the officer responsible for plotting the ship’s path through the Great Barrier Reef (AMSA 2011).

Lack of shore leave. Von Dreele (2008), in a paper delivered at a petroleum conference stated “At SCI (Seaman’s Church Institute) we have 10 years of statistics of our ship visits and services. Remarkably, shore leave levels have averaged only between 20-25% per ship. There are a number of factors beyond turn around times that account for this low percentage: working, need for rest, lack of a US visa and depression. The implementation of TWIC (Transportation Workers Identification Certificate) will restrict any crew members who currently walk through a terminal to the gate for shore leave.”

In August 2010 I went aboard a large containership in Melbourne to deliver booklets in English on depression to the Master (who also asked for other booklets in Chinese and Russian, even though the crew was made up of Filipino seafarers – and who are usually thought to have a good command of English). I was told the crew had trouble getting shore leave in several U. S. ports for a variety of reasons, some relating to U. S. Coast Guard security regulations, others relating to ship turn around times and the difficulty of simply getting to the dockyard gate from the berthing area.

Short ship turn around times. Short ship turn around times are a problem. In Melbourne, Australia turn around time for container ships is not more than three days and in most cases less than that. However, bulk cargo ships or combination container/bulk cargo ships may be in port for somewhat longer periods. A significant number of automobile carriers call in Melbourne. Their loads of 5,000 or 6,000 automobiles can be discharged in 24 hours, after which they are able to leave. This can result in seafarers not getting a chance to go ashore because their duties aboard ships does not leave enough time for even a half day ashore.

Job security. Most non-rated seafarers are employed on nine or ten month contracts. As these contracts end the seafarers are said to be very concerned that their contracts will not be renewed, thus ending a chance to send money home (repatriation of wages). As a result of the great financial crisis of 2008 the international shipping industry was severely affected with many ships unable to obtain charters, causing seafarers to worry about job retention. Many ships were tied up and some anecdotal accounts said newly constructed container ships were being used as temporary storage warehouses for the surplus of empty containers that accumulated because of the lack of business.

Cultural problems. Von Dreele (2008) says “Chaplains and ship visitors often confront the clash of cultures and nationalities

aboard ship. Certain nationalities should never be put together on the same ship. Racism and abuse are prevalent on many open registry ships today. To compound all of this, the seafarer has to deal with the immense isolation aboard ship. He is gone for up to nine months and rarely has an opportunity to contact his family”. However in fairness to ship owners, crew members are now allowed access to email facilities aboard many ships. This is particularly true of large oil tankers and of ships managed by reputable shipping lines.

### **Part 2 – Description of two projects**

The Mental Health of Seafarers: a Joint Project by Melbourne Port Welfare Association beyondblue: the national depression initiative Rotary Club of Melbourne South (Australia), Stella Maris Seafarers’ Centre (Melbourne, Australia), The Mission to Seafarers Victoria (Australia)

This project was the result of discussions between the Melbourne Port Welfare Association, the Rotary Club of Melbourne South, *beyondblue: Australia’s national depression initiative* and the two seafarer centers after research by the Rotary Club of Melbourne South showed that seafarers are more likely to have a mental illness than their counterparts on shore (Iversen, 2009). Its purpose is to produce printed information on the single mental health issue of depression for distribution to Masters and non-rated seafarers on the more than 2,000 ships carrying 60,000 seafarers that berth in Victorian ports each year (Miriam O’Brien Consulting, 2009) so that depressed crew members can be identified and helped and that the stigma associated with such an illness can be reduced.

The website [www.seafarersmentalhealth.org](http://www.seafarersmentalhealth.org) of the Rotary Club of Melbourne South contains the business and operational plan for the project, a memorandum of understanding between the five project participants and the project’s first annual report for 2009/2010. Copies of booklets for Masters on depression in English, Chinese and Russian

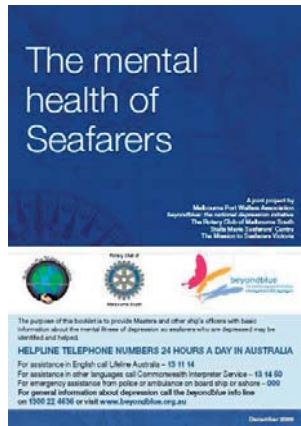


Figure 2 (English)



Figure 3 (Chinese)



Figure 4 (Russian)



Figure 5. Cover of a leaflet in English, Chinese, Tagalog and Russian.

on *The Mental Health of Seafarers* can be downloaded from the Club's website. A smaller leaflet for non-rated seafarers in

English, Chinese, Tagalog and Russian on *Looking after the mental health of seafarers* is also available on the website.

The Melbourne Port Welfare Association is a group of 15 prominent organizations on the Melbourne waterfront and is undertaking efforts to make the visits of seafarers pleasant and enjoyable. Its Chairman, Jim Beggs AM, at the project's formal launch on March 30, 2010, in commenting on the nation's debt to seafarers, said "So many Australians owe so much to so few seafarers". *beyondblue* leads an Australia-wide advocacy on understanding depression and removing its stigma. The Stella Maris Seafarers' Centre in Melbourne and the Mission to Seafarers Victoria between them operate five centers where seafarers may rest, relax, wire money home, communicate with families via the internet, purchase small personal items and receive pastoral counseling if they are in distress.

Statistics gathered by the two seafarer centers in Melbourne show that 85% of seafarers visiting Melbourne speak English, Chinese or Russian so medium sized eight page booklets for Masters were printed in those languages. Distribution of these booklets is tailored to the languages spoken by Masters and ship's officers. In 2008 a total of 25,629 seafarers visited the Stella Maris Seafarers' Centre and the Mission to Seafarers in Melbourne. The top three nationalities visiting the centers were Fili-

pinos, Chinese and Indians

Images of the covers of booklets for Masters are shown in Figures 2 - 4. Each contains hotline telephone numbers that Masters or ship's officers can call for help concerning a depressed seafarer. The hotlines are manned 24/7 by call centers at Lifeline Australia (**13 11 14**) and the Federal government's Translation and Interpreting Service (TIS) (**13 14 50**). If a non-English speaking seafarer calls for help, a conference call with Lifeline Australia, TIS (which provides an interpreter) and the seafarer is arranged. The pages of the booklets contain a check list to identify someone who is depressed, how to understand depression, how someone with depression can be helped and on reducing stress. Smaller leaflets for non-rated seafarers have the same information but in a shortened version (Figure 5).

Ship Visitors started distributing the booklets to Masters on December 23, 2009. The distribution of the printed information on depression is a critical part of the project, and to measure its effectiveness a benchmark of visiting 1,000 ships by December 31, 2010 has been set. (Note: the original benchmark was to reach 700 ships by June 30, 2010, but this was not reached due a late start in distributing booklets). However as of June 1, 2011 the Masters of more than 1,200 ships in the ports of Melbourne, Geelong, Hastings and Portland will have been given the booklets in English, Chinese or Russian or leaflets for non-rated seafarers in English, Chinese, Tagalog and Russian.

#### Measuring results

Measuring results in such a project is expected to be difficult. One positive result would be if a ship Master or other officer calls one of the hotlines to seek help

in the case of a depressed seafarer. Another would be if Masters request additional copies of the booklets and leaflets on depression. This has occurred on several ships.

In February 2011 the Chief Officer of

a large ship, after reading one of the booklets for Masters, went to the Mission to Seafarers in the port of Portland and told the manager that he was very anxious and depressed and asked for help. The Mission's manager took the Chief Officer to a doctor where he received medication and counseling.

Educating Masters and seafarers about depression in the hope it will remove the stigma surrounding the mental illness of depression would be a positive result – but hard to measure.

#### Expanding the project.

The business and operational plan considered making the project a broader initiative than the State of Victoria. At the project's formal launch on March 30, 2010

the keynote speaker, the Hon. Jeff Kennett AC, Chairman of *beyondblue* and former Premier (= Governor) of the State of Victoria, urged the project expand outside of Australia and become a global initiative. Steps to make the project international in scope are underway. The Rotary Club of Melbourne South has started planning to hold the First International Symposium on the Mental Health of Seafarers to be held in either Hong Kong or Singapore in early 2013.

Steps are underway to expand the project to all major ports in Australia. Shipping Australia Ltd., through its association with ship's agents responsible for foreign flagged ships, has made it possible for a new printing of booklets for Masters. These new booklets will be distributed by the ship's agents in all major ports.

In 2009 a total of 40 large cruise ships berthed in Melbourne.<sup>6</sup> Each of these ships carries a crew of about 500, for a total of 15,000 seafarers. The project will undertake an effort, in cooperation with the International Transport Workers Federation, to reach these seafarers with information on depression, most likely through a kiosk on the dock adjacent to the ships. Masters of cruise ships can also receive booklets through the ship's agents who board them

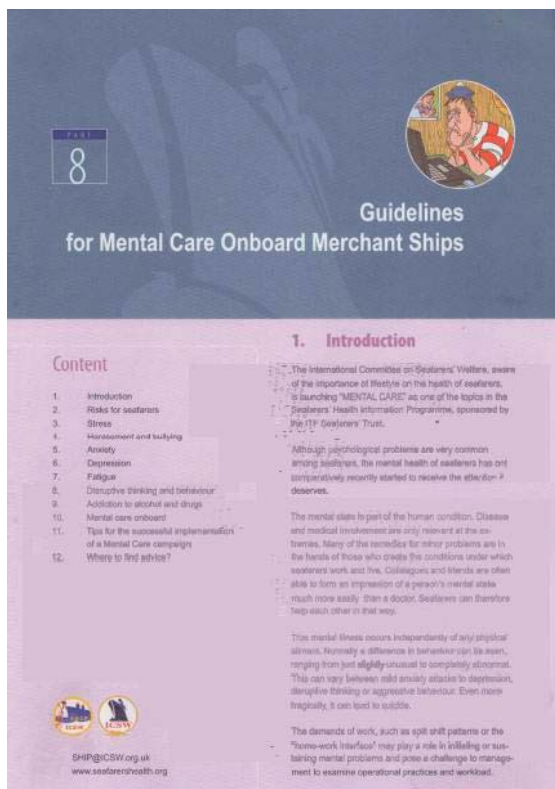


Figure 6. ICSW booklet: Guidelines for Mental Care Onboard Merchant Ships

in Melbourne or other Australian ports.

Another approach is to contact maritime academies that train cadets to become deck and engineering officers aboard ships to see if information on depression could become part of their curricula, as today's cadets are tomorrow's officers. For example, maritime academies in India graduate 5,000 deck and engineering officers each year.<sup>7</sup>

### Length of the project

Most projects initiated by Rotary have a starting date and an ending date. Exceptions are Rotary's Polio Plus project by which Rotary helps vaccinate children

world-wide against polio and Rotary's Oceanic Medical Aid for Children which brings children with physical impairments to Australia for surgery that cannot be performed at home. The Board of Directors of the Rotary Club of Melbourne South adopted the policy of handing the project over to another maritime organization after it has been successfully run for several years.

This has been accomplished in 2011 in Australia by Shipping Australia Ltd. arranging for ship's agents distributing the booklets and leaflets. The Rotary Club of Melbourne South is now expanding its work to make the project international in scope via an international symposium cited above.

Guidelines for Mental Care Onboard Merchant Ships: a Project by the International Committee on Seafarers' Welfare

The London based International Committee on Seafarers Welfare (ICSW) has produced guidelines for the mental care of seafarers' onboard merchant ships (ICSW 2009). The ICSW, aware of the importance on the health of seafarers, has produced the guidelines as part of its new mental health project, which is funded by the International Transport Workers Federation Trust. The ICSW's Seafarers' Health Information Programme is part of its MENTAL CARE initiative.

The guidelines are in a colorfully illustrated 12 page booklet with humorous cartoons of seafaring life. It covers the following 12 topics: Risks for Seafarers, Stress, Harassment and Bullying, Anxiety, Depression, Fatigue, Disruptive Thinking and Behaviour, Addiction to Alcohol and Drugs, Mental Care Onboard, Tips for the Successful Implementation of a Mental Care Campaign and Where to Find Advice.

The ICSW's booklet notes that "Although psychological problems are very common among seafarers, the mental health of seafarers has only comparatively recently started to receive the attention it deserves."

"True mental illness occurs independently of any physical ailment. Normally a difference in behaviour can be seen, ranging from just slightly unusual to completely abnormal. This can vary between mild anxiety attacks to depression, disruptive thinking or aggressive behaviour. Even more tragically, it can lead to suicide".

The basic difference between The Mental Health of Seafarers project and the ICSW's project is that the Australian initia-



tive covers only one topic: depression, while the ICSW's Guidelines are a much broader tapestry about seafarers' mental health. It is hoped the two projects described in this paper will be able to help bring about long needed improvements in the mental health of seafarers.

### Conclusion

With deaths aboard merchant ships by depression leading to suicide being widely reported, the damage to the seafarers, their families and ship owners cannot be ignored. It strongly demonstrates the need for everybody connected with the international maritime shipping industry to do something about it. The mental health of seafarers and the economic health of the shipping industry will be improved as a result.

### Acknowledgements

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**Резюме**

**ПСИХИЧЕСКОЕ ЗДОРОВЬЕ МОРЯКОВ:  
КРАТКИЙ ОБЗОР**

*Роберт Т. Б. Иверсен*

В работе рассматриваются вопросы психического здоровья моряков в двух отдельных, но взаимосвязанных аспектах. Первый - краткий обзор статистики и основных причин плохого психического здоровья многих моряков. Статистика показывает, что уровень самоубийств моряков намного выше, чем у населения в целом. Причины депрессии, ведущие к самоубийству включают одиночество, оторванность от семей, стресс, отсутствие увольнений на берег, тяжелая работа и проблемы с досугом. Ротари Клуб Мельбурн Юг (Австралия) и Международный комитет по социальному обеспечению моряков (МССО) распространили буклеты по теме депрессии для магистров и листовки для моряков не-офицеров на четырех языках: английском, китайском, тагальском и русском языках. По состоянию на 1 июня 2011 этот материал был доставлен на борт более 1200 кораблей в пяти портах Австралии. Проект МССО выпустил руководство на английском языке для поддержания психического здоровья моряков на борту торговых судов и охватывает стресс, притеснения и запугивания, беспокойство, депрессию, деструктивное мышление и поведение, пристрастие к алкоголю и наркотикам. Ротари Клуб запланировал Первый международный симпозиум по охране психического здоровья моряков, который состоится в Гонконге или Сингапуре в начале 2013 года.

*Ключевые слова: психическое здоровье моряков, профилактика самоубийств*

**Резюме**

**ПСИХІЧНЕ ЗДОРОВ'Я МОРЯКІВ:  
КОРОТКИЙ ОГЛЯД**

*Роберт Т. Б. Иверсен*

У роботі розглядаються питання психічного здоров'я моряків у двох окремих, але взаємопов'язаних аспектах. Перший - короткий огляд статистики і основних причин поганого психічного здоров'я багатьох моряків. Статистика показує, що рівень самогубств моряків набагато вище, ніж у населення в цілому. Причини депресії, що ведуть до самогубства, включають самотність, відірваність від сімей, стрес, відсутність звільнень на берег, важка робота і проблеми з дозвіллям. Ротарі Клуб Мельбурн Південь (Австралія) та Міжнародний комітет із соціального забезпечення моряків (МССО) розповсюдили буклети по темі депресії для магістрів і листовки для моряків не-офіцерів на чотирьох мовах. Станом на 1 червня 2011 цей матеріал був доставлений на борт понад 1200 кораблів у п'яти портах Австралії. Проект МССО випустив керівництво англійською мовою для підтримки психічного здоров'я моряків на борту торговельних суден і охоплює стрес, утиски та залякування, занепокоєння, депресію, деструктивне мислення і поведінку, пристрасть до алкоголю та наркотиків. Ротарі Клуб запланував Перший міжнародний симпозиум з охорони психічного здоров'я моряків, який відбудеться в Гонконзі або Сингапурі на початку 2013 року.

*Ключові слова: здоров'я моряків, профілактика самогубств*

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