



**WOMEN'S HEALTH**  
GOULBURN NORTH EAST  
*Challenging inequity, embracing diversity.*

# Hume Region Preventing Violence Against Women and Children Strategy

Final Project Report 2013-2015

January 2016



**courageous  
conversations**

# Acknowledgements

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Project Coordinator  
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Department of  
Justice & Regulation

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## Acronyms and Abbreviations

Acronym	Meaning
AFL NE	Australian Football League North East
ANROWS	Australia's National Research Organisation for Women's Safety
AWHN	Australian Women's Health Network
CARN	Centre Active Recreation Network
CAV	Centre Against Violence
CC	Courageous Conversations
CCI	Community Capacity Index
CCP	Community Crime Prevention
C-CREW	Courageous Conversations Respect and Equity (Alpine Health Gender Audit Working Group)
CDW	Community Development Worker
CEDAW	Convention on the Elimination of All forms of Discrimination Against Women
CEO	Chief Executive Officer
CO-OPS	Collaboration of Community-based Obesity Prevention Sites
DET	Department of Education and Training
DEVAW	Declaration of the Elimination of Violence Against Women
DOJR	Department of Justice and Regulation
EOI	Expression Of Interest
FV	Family Violence
FVPN	Family Violence Prevention Network
GIF	Gender Integration Framework
GOMIFVSC	Goulburn Ovens Murray Integrated Family Violence Strategic Committee
GV	Goulburn Valley
IGA	InterAction Gender Handbook
LG	Local Government
LGPVAW12	Local Government Preventing Violence Against Women 12 (Hume Region Preventing Violence against Women Local Government Network)
MAV	Municipal Association of Victoria
MPHWP	Municipal Public Health and Wellbeing Plan
MOU	Memorandum Of Understanding
MVP	Mentors in Violence Prevention
NCAS	National Community Attitudes Survey
NE	North East
NESAY	North East Support and Action for Youth
NTV	No To Violence
PVAW	Preventing Violence against Women
PVAWC	Preventing Violence against Women and Children
RE-AIM	Reach, Efficacy, Adoption, Implementation, Adoption (Evaluation framework)
RIC	Regional Integration Coordinator
SC	Steering Committee
TOR	Terms Of Reference
UN	United Nations
VAW	Violence Against Women
VicHealth	Victorian Health Promotion Foundation
WHGNE	Women's Health Goulburn North East
WHO	World Health Organisation

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# Executive Summary

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*Intimate partner and sexual violence affect a large proportion of the population – with the majority of those directly experiencing such violence being women and the majority perpetrating it being men. The harm they cause can last a lifetime and span generations, with serious adverse effects on health, education and employment. The primary prevention of these types of violence will therefore save lives and money – investments made now to stop intimate partner and sexual violence before they occur will protect the physical, mental and economic well-being and development of individuals, families, communities and whole societies (World Health Organisation, 2010).*

## Introduction

Women’s Health Goulburn North East (WHGNE) is the government-funded specialist women's health service for the Goulburn Valley and North East Victoria, and were successful in obtaining the ‘Reducing Violence against Women and Children’ grant funding from the Department of Justice and Regulation (DoJR) in January 2013. The grants aimed to enhance collaborative working relationships at a local level and to help build an evidence base on primary prevention and early intervention in the prevention of violence against women and their children.

The major aim of the project was to develop a regional Preventing Violence Against Women and Children (PVAWC) strategy, utilising a partnership approach with many diverse stakeholders. The main vehicle for achieving this aim was a steering committee that would unite stakeholders across the Hume, by utilising their expertise and local knowledge in the development and implementation of the regional PVAWC strategy.

The purpose of this report is to outline project activities and achievements from January 2013 to December 2015, in order to share the key learnings and recommendations to assist in building the PVAW evidence base, particularly in rural areas.

It is to be noted, this report is written from the perspective of the WHGNE project coordinator, reflecting on experiences and learnings throughout the project development, implementation, evaluation and analysis.

## Vision

Adapted from the National Plan to Reduce Violence against Women and their Children (2010-2022), the overarching vision for the regional PVAWC strategy was that:

*“Hume region women and their children live free from violence in safe communities”*

## Project Activities

The Hume region PVAWC strategy has been effective in building the evidence base on what does and does not work in relation to Preventing Violence Against Women (PVAW) activities in rural and regional communities of North East Victoria. The strategy has produced significant impacts and achievements in relation to the strategy’s objectives, as summarised:

**Objective 1: Establish partnerships across government and non-government agencies as well as accountable leadership structures for sustainable prevention**

- Developed a regional PVAWC steering committee, comprising of a diverse range of stakeholders, with 18 organisations formally endorsing the regional PVAWC strategy and 21 organisations participating in steering committee over the course of the project; and
- Establishment of the Local Government PVAW 12 (LGPVAW12) committee with seven of the 12 councils actively participating in the committee; providing an avenue for councils in the Hume region to collectively address PVAW.

**Objective 2: To support organisations to provide structural and cultural environments that promotes equal, and respectful relations**

- Courageous Conversations Charter developed and adopted in 19 organisations;
- Code of conduct adapted at Benalla Saints Sports Club; and
- Resourced by 0.2 EFT position, Gender Audit undertaken by both Alpine Health and Murrindindi Shire Council, reaching and including a combined total of approximately 500 staff members, resulting in both organisations developing a gender action plan that supports the promotion of gender equity and inclusivity.

**Objective 3: Build the capacity of leaders to take action against sexism, rigid gender roles and promote organisational change and workforce development**

- Delivered eight capacity-building workshops to a total of 156 participants, including the VicHealth PVAW leadership course, NTV Bystander training, How to become an ally in PVAW workshop, evaluation workshops and a social marketing workshop;
- Delivered training to approximately 20 members of the leadership team at Benalla Saints Sports Club;
- Five Courageous Conversations Bystander workshops delivered to 103 participants across the Hume; and
- Increased capacity within Local Government sector; previously in 2013 only three councils involved in PVAW, increased to nine councils demonstrating commitment to PVAW.

**Objective 4: Promote and communicate key messages and tools that build respectful relationships skills and influence social norms, attitudes and behaviours**

- Development and promotion of the Courageous Conversations campaign, including a total of nine resources produced for use by professionals and communities;
- Development of the Courageous Conversation website, providing a central hub for gender equity and project resources, with a total of 6,337 page views (dated January 15, 2016);
- Development of the Courageous Conversations Facebook and Twitter page, with increased engagement and a combined total of 548 followers; and
- Ten councils promoted in video stories during global 16 Days of Activism campaign in November 2015, showcasing an array of PVAW initiatives across Hume region.

## **Objective 5: Undertake research, evaluation and monitoring to ensure continuous improvement and contribute to the evidence base**

- Production of a literature review and PVAW policy scan reviewing the PVAW climate;
- Completion of mapping process, identifying 23 existing PVAW initiatives in the Hume region mostly focused on early intervention and awareness raising;
- Community Capacity Index used to analyse partnership development, which identified increased capacity of the steering committee to collectively solve problems and source infrastructure; and
- Formative and Summative evaluation undertaken by the external evaluation team.

## **Recommendations**

Key project findings have identified recommendations for future PVAW work guided by six interconnected themes:

**Leadership:** For any organisation undertaking PVAW activities leadership support is paramount. Success will be heightened by linking actions to organisational vision and strategic direction, as well as having leaders that model respectful relationships.

**Communication:** To effectively engage the community in PVAW, we must utilise language that is jargon free, simple and appropriate to the audience. Resources and tools must be developed in consultation with the target population to ensure they resonate with the intended audience.

**Increased Knowledge and Understanding of Primary Prevention and PVAW:** Increased support for the women's health and PVAW sector is required through investment of resources, to continue to build stakeholder capacity to understand primary prevention and PVAW. This should be further supported with greater opportunities for reflective practice and sharing of resources among the workforce.

**Capacity:** Activities focused on prevention of VAW at a community level must be adequately resourced if they are to be effective and sustainable. We recommend any organisation undertaking an organisational change initiative in relation to PVAW to fund a minimum 0.4 EFT position in order to see effectual and tangible results.

**Long-term Investment:** In order to achieve the cultural change necessitated to prevent violence against women, a substantial and sustained commitment to PVAW projects is required. For future projects, significant time should be dedicated to bringing stakeholders together, nurturing partnerships and developing partners' skills and knowledge of PVAW and primary prevention.

**Evaluation:** PVAW projects command long-term vision and dedication, due to the length of time it takes to produce outcomes and to demonstrate impact on the determinants of VAW. Further research and exploration of appropriate tools is required to effectively track and measure attitudinal and behavioural change across a range of populations.

Developed through a rural lens, these recommendations will be most effective if applied with a participatory and locally contextualised approach. The prevention of VAW requires a whole of community effort, with each and every one of us, having an important role to play.

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# Context

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In partnership with key stakeholders, WHGNE has drawn upon research from the World Health Organisation, Victorian Health Promotion Foundation (VicHealth), and other pertinent research papers and program evidence in the development and implementation of this project. The body of global, national and state evidence, combined with local expertise provided a strong foundation for the basis of our strategy.

## Global

The United Nations (UN) (1993) define violence against women as: *‘Any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women.’* It affects women of all ages, race, abilities, culture and wealth, but disproportionately affects women from indigenous and marginalised communities (UN Women, 2015).

Violence against women is pervasive globally. It is estimated that 35% of women worldwide have experienced either physical and/or sexual intimate partner violence or sexual violence by a non-partner at some point in their lives (World Health Organisation, 2013). Worldwide, as many as 38% of all murders of women are committed by intimate partners (World Health Organisation, 2013). The variation in the prevalence of violence seen within and between communities, countries, and regions highlights that violence is not inevitable, and that it can be prevented.

**The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)**, is the most comprehensive human rights instrument to protect women from discrimination. It is the first international treaty to address the fundamental rights of women in politics, health care, education, economics, employment, law, property, marriage and family relations. Adopted in 1979 by the UN General Assembly, Australia became a signatory to the CEDAW in 1983 (Australian Human Rights Commission, 2015).

**The Declaration on the Elimination of Violence Against Women** was adopted without vote by the UN General Assembly in December 1993. The Declaration is often seen as complementary to, and a strengthening of, the work of the CEDAW. The Declaration articulated gendered violence ‘is a manifestation of historically unequal power relations between men and women’ (Wall, 2014), and is divided into three main categories:

- Violence perpetrated by the State, such as violence against women in custody and as part of warfare;
- Violence occurring within the general community, including rape, sexual harassment; and trafficking in women and intimidation at work, and
- Violence in the family and in the private sphere (Swedish Secretariat for Gender Research, 2014).

In September 2000, world leaders adopted the UN Millennium Declaration, known as the **Millennium Development Goals**. One of eight goals – “Promote gender equality and empower women” – aimed to eliminate gender disparity in education, as well as women’s participation in paid employment in the non-agricultural sector and the participation of women in National Parliament (United Nations Women, 2015).

In July 2010, the UN General Assembly created **UN Women**, the United Nations Entity for Gender Equality and the Empowerment of Women. UN Women merges and builds on the important work of four previously distinct parts of the UN system, which focused exclusively on gender equality and women's empowerment (UN Women, 2015). The main roles of UN Women are:

- To support inter-governmental bodies, such as the Commission on the Status of Women, in their formulation of policies, global standards and norms;
- To help Member States to implement these standards, standing ready to provide suitable technical and financial support to those countries that request it, and to forge effective partnerships with civil society; and
- To lead and coordinate the UN system's work on gender equality as well as promote accountability, including through regular monitoring of system-wide progress.

As violence against women and gender inequality are inextricably linked, primary prevention efforts that focus on redressing gender inequality are imperative in order to reduce violence against women on a global scale.

## National

*"Let me say this to you: disrespecting women does not always result in violence against women. But all violence against women begins with disrespecting women,"* Malcolm Turnbull, 2015

Violence against women in Australia, has been described as a 'national emergency', with Prime Minister Malcolm Turnbull describing it as "one of the great shames of Australia" (2015).

In 2008, the Commonwealth established the **National Council to Reduce Violence against Women and their Children** (the National Council) to advise on measures to reduce the incidence and impact of violence against women and their children. An evidence-based plan for reducing violence against women and their children was developed, based on community consultation, which focused on: assessing existing Australian and international research, investigating the effectiveness of legal systems and commissioning research on the economic costs of violence.

The council presented its recommendations in the report; **Time for Action: The National Council's Plan for Australia to Reduce Violence Against Women and their Children, 2009-2021** and four companion documents. The council recommended all governments, through the Council of Australian Governments, should agree to a long-term plan to reduce violence, with the Commonwealth taking a leadership role. The Commonwealth released its response, Immediate Government Actions in 2009, announcing that it would invest \$42 million to immediately address urgent recommendations.

In 2011, the 12-year **National Plan to Reduce Violence against Women and their Children 2010-2022** (the National Plan) was launched, with a vision that *Australian women and their children live free from violence in safe communities*. The national plan provides the framework for action by the Commonwealth, state and territory governments to reduce violence against women and their children. The national plan sets out six outcomes for all governments to deliver during the next 12 years that were divided into a series of four three-year action plans.

Supported by the national plan, VicHealth conducted a nationwide survey of community attitudes to safety and well-being in 2013. **The National Community Attitudes towards Violence Against Women Survey** (NCAS) was developed by VicHealth in partnership with The University of Melbourne, the Social Research Centre and experts across Australia. The third survey of its kind

(previously undertaken in 1995 and again in 2009), the NCAS provided a snapshot of community attitudes to violence against women over time, with findings highlighting the need for continued prevention activity.

**Our Watch** was established in 2013 to coordinate prevention work at a national level and drive change in the culture, behaviours and attitudes that lead to violence against women and children. Our Watch complements the work of **Australia's National Research Organisation for Women's Safety** (ANROWS).

In 2015, '**Change the Story, A shared framework for the primary prevention of violence against women and their children**' was launched by Our Watch, in partnership with ANROWS and VicHealth. *Change the Story* details a national approach to preventing violence against women and their children through:

- Identifying what drives and contributes to violence against women;
- Providing evidence-based guidance to government, the private sector, civil society and communities on how to strategically and effectively lead, coordinate, resource and support prevention effort across Australia; and
- Informing and supporting the development of policy and legislation, prevention strategies, programming and advocacy that targets and seeks to reduce the drivers of violence against women.

## State

In 2006, the Family Violence Interdepartmental Committee in consultation with the state-wide steering committee to Reduce Family Violence undertook a process to develop a whole of government plan that would guide activity in the primary prevention of violence against women. VicHealth was commissioned to develop a conceptual framework to guide action, based on a review of existing research evidence and input from a range of stakeholders and experts in the field, resulting in the production of the **VicHealth Preventing Violence against Women: A Framework for Action** (2007). The VicHealth Preventing Violence against Women Framework was a ground-breaking document that identified three key determinants of violence against women:

- 1) Unequal power between men and women;
- 2) Adherence to rigid gender stereotypes; and
- 3) A lack of systematic and community support along with weak legal and structural sanctions against gender violence.

An ecological approach, which the framework is founded on, considers the complex interplay between individual, relationship, community, and societal factors. The model demonstrates the range of factors that put people at risk for violence or protect them from experiencing or perpetrating violence. The overlapping rings in the model illustrate how factors at one level influence factors at another (Centers for Disease Control and Prevention, 2015).



Cultural values about gender roles and relations at the broader community and societal levels are a significant driver in the perpetration of violence (VicHealth, 2007). Research demonstrates cultures with rigidly defined gender roles, combined with masculine dominance and aggression have higher rates of VAW. To counteract this, the VicHealth Framework proposes three broad themes for action:

- Promoting equal and respectful relationships between men and women;
- Promoting non-violent social norms and reducing the effects of prior exposure to violence (especially on children); and
- Improving access to resources and systems of support.

In 2010, the Victorian State Government released **A Right to Respect: Victoria's Plan to Prevent Violence Against Women 2010-2020**. The Right to Respect Plan provides a 10-year framework to address the underlying factors contributing to family violence and sexual assault and identifies five key settings of focus: education and training, local government, health and community services, sports and recreation, workplaces and media, arts and popular culture. This multi-sectoral approach reinforces the need for preventative strategies to be implemented across all five settings.

In 2014, the Labor Government announced Australia's first **Royal Commission into Family Violence**. The Commission was to conduct an enquiry and provide practical recommendations on how Victoria's response to family violence can be improved. A recommendations report is due to the Governor of Victoria by March 2016.

An initiative of the Labor Government, **Respectful Relationships Education** will be included in the state school curriculum from 2016 in Foundation through to Year 10. It will focus on challenging negative attitudes such as prejudice, discrimination and harassment that can lead to violence, often against women. The statewide introduction of Respectful Relationships Education follows a pilot program in 19 Victorian secondary schools utilising 'Building Respectful Relationships: Stepping Out Against Gender Based Violence (DET, 2014).

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# Project History

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## Department of Justice and Regulation Funding

In 2011-12, the Victorian Government allocated funding to deliver a Community Crime Prevention Program. One element of this program is the Reducing Violence against Women and their Children grants program, which provided funding of \$4.8 million, for projects in each of the eight Victorian regions (Department of Justice & Regulation, 2014). The grants aimed to enhance collaborative working relationships at a local level and to help build an evidence base on primary prevention and early intervention in the prevention of violence against women and their children.

These one-off grants of up to \$600,000 each over three years supported primary prevention and early intervention focused partnership projects. The projects addressed a range of issues, with the focus on changing behaviours and attitudes that allow violence against women and children to continue, including:

- Promoting equal and respectful relationships between men and women;
- Working across local government, workplaces and sporting settings to coordinate a region-wide approach to preventing violence against women;
- Bringing about structural and systemic organisational change to promote gender equitable and non-violent workplace cultures; and
- Working within local government and faith-based settings to train and build the capacity of leaders in preventing violence against women.

WHGNE was successful in obtaining the 'Reducing Violence against Women and Children' grant funding in January 2013. The major aim of the Hume region project was to develop a PVAWC strategy that utilised a partnership approach with many diverse stakeholders.

The Hume region is located in the north east of Victoria, covering the Goulburn Valley and is bounded by the Murray River to the north and metropolitan Melbourne rural fringe to the south. Hume region comprises 18% of Victoria in area and some 40,427 square kilometres. It is one of Victoria's five regional areas with a population over 320,000. Hume region has 12 Local Government Areas: Alpine, Benalla, Indigo, Mansfield, Mitchell, Moira, Murrindindi, Shepparton, Strathbogie, Towong, Wangaratta and Wodonga. In 2013, the Hume region ranked fourth highest in the state for family violence incidents, with 10.7 per 1000 incidents in comparison to the state average of 9.1 per 1000 (Department of Health and Human Services, 2013).

As the lead agency, WHGNE drove the development of the Hume region PVAWC strategy and coordinated action across sectors, working with organisations and stakeholders to create sustained change.

## Development of the Regional PVAWC Strategy

The **Hume Region Preventing Violence against Women and Children Strategy** was heavily influenced by the work of VicHealth, and in particular, was strongly guided by the VicHealth Preventing Violence against Women Framework (2007). Based on an ecological model for understanding violence, the framework provided a sound theoretical and evidence base to develop a

primary prevention plan, identify priority strategies, settings and population target groups (VicHealth, 2007).

Primary prevention efforts are most likely to be effective when a coordinated range of mutually reinforcing strategies are targeted across a range of settings (VicHealth, 2007). Utilising both individual and population level approaches, the strategy aimed to promote gender equity and reduce rigid stereotypes across communities, as well as increase individual knowledge and understanding. To achieve this, five key themes were identified for action:

- 1) Partnerships** – To support, foster and connect with other organisations and individuals to work more effectively to promote the health and wellbeing of the community. Collaboration and engagement from all sectors are required to ensure the cultural change needed to prevent violence against women and children.
- 2) Supportive Environments** – Create supportive environments that fosters equal participation and generates living, working and playing conditions that are safe, stimulating and enjoyable. Community settings need to be inclusive, safe and gender equitable in order for respectful relationships and non-violent norms to grow. Attention will be directed to the following settings:
  - Local Government
  - Community
  - Sporting clubs
  - Youth services
  - Education
- 3) Capacity Building** – Empower individuals and organisations through increased knowledge and skills in order to create sustainable change. To raise awareness of the prevention of violence against women, leaders within key settings need to drive change and embed policies and structures within organisations, displaying a commitment to the health and wellbeing of the community.
- 4) Direct Participation in Programs** – Directly participating in programs has the ability to influence individual’s attitudes and behaviours, as well as increasing knowledge and skills. Such programs addressing the determinants of violence against women can significantly expose gender inequality. Challenging beliefs in traditional gender roles and gender inequity is pivotal in shifting societal attitudes.
- 5) Research and promoting the evidence base** – Use the evidence concerning the determinants of violence against women as the basis for primary prevention of violence against women initiatives. Provide learning opportunities by sharing and utilising resources, and develop a comprehensive evaluation framework and monitoring mechanisms to build the evidence base for the prevention of violence against women and children

To develop the regional PVAWC strategy, WHGNE invited key community leaders and organisations across the Hume region to form a steering committee. The Hume Region PVAWC steering committee united stakeholders across the Hume region, and utilised local knowledge and expertise for the development and subsequent implementation of the regional PVAWC strategy. Prior to this, there had been limited coordinated and collaborative efforts in relation to the primary prevention of violence against women and children across the region.

## Strategic Alignment with Key Plans

The Hume Region PVAWC strategy acted as a centralised framework, incorporating existing PVAWC activities across the Hume region, to represent a collaborative, sustainable and holistic approach to PVAWC. Whilst the DOJR project funding ceased in January 2016, the regional PVAWC strategy encompassed the period up to 2017 in order to align with existing plans and build sustainability. Three key regional plans were incorporated and mobilised within the strategy.

### Local Government Municipal Public Health and Wellbeing Plans (2013-17)

PVAWC was a consistent theme among the majority – 9 out of 12 – local government Municipal Public Health and Wellbeing Plans (MPHWP) across the Hume region, although there were varying degrees of commitment and strategies. Explicitly stated in four council plans was the commitment to support and participate in the Hume Region Preventing Violence against Women & Children Strategy.

Council	Inclusion of PVAWC in MPHWP	Inclusion of the Regional PVAWC Strategy and Regional steering committee
Rural City of Benalla	√	
Greater Shepparton City Council	√	
Mansfield Shire	√	√
Mitchell Shire	√	
Moira Shire	√	
Murrindindi Shire	√	√
Strathbogie Shire	√	√
Rural City of Wangaratta	√	√
Wodonga City Council	√	

### WHGNE Health Promotion Plan (2012-17)

The WHGNE Health Promotion Plan has three priority areas; healthy eating; sexual & reproductive health; and PVAWC. Three objectives underpin the PVAWC priority:

- 1) To increase knowledge and understanding of the determinants of violence and its gendered nature in Hume region organisations by 2017
- 2) To enable supportive environments in Hume region that promote nonviolent norms and equal respectful relationships by 2017
- 3) To undertake and support research that contributes to the evidence base to inform primary prevention responses addressing violence against women and children appropriate to rural areas

There were actions within the regional PVAWC strategy that were consistent and complimentary to WHGNE health promotion plan, in order to add value and provide a basis for sustainability beyond the project period.

## Goulburn Ovens Murray Integrated Family Violence Strategic plan (2012-15)

*Vision:* Women and Children live free from violence in the Goulburn and Ovens Murray Areas

*Priority Areas:*

1. Strategic partnership
2. Capacity Building
3. Advocacy for change

A strategy under the first priority area; *strategic partnerships*, in the GOMIFV Strategic Plan was to “support primary prevention efforts across the area”. A complementary action under *Partnerships* in the Regional PVAWC Strategy was to “Liaise with the GOMIFVSC”. It was important both the prevention and integration sector had an awareness of each other’s priorities and key activities, in order to understand how we can best support each other and best support women and children.

The Integrated Family Violence steering committee was a part of consultations during the development of the plan, due to the need for the family violence sector to work seamlessly together from prevention through to service response and integration. This was to ensure the system is working cohesively and women are receiving consistent messages from both ends of the spectrum.

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# Evaluation Methods

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The primary prevention of violence against women is an emerging and growing area of practice worldwide, with a small number of rigorously evaluated primary prevention interventions, including a scarce number of interventions conducted in rural contexts (VicHealth, 2007). The key goal throughout development, implementation and evaluation of the strategy was to gain a greater understanding of what is effective in the prevention of violence against women and children in the Hume region, and in turn, build upon the evidence base of primary prevention in rural areas.

The findings in this report cover the activities, processes and impacts of the project from January 2013 to December 2015.

## External Evaluation

An independent evaluation was a requirement of the project funding agreement, in order to build the evidence base in primary prevention and early intervention work. WHGNE engaged Deakin University to carry out the external evaluation of the project.

The evaluation approach utilised an overarching framework of theory-based evaluation drawing on elements of realist and theory of change evaluation<sup>1</sup>. A variety of different participative methods were employed to provide alternative ways of gathering qualitative views and experiences from a wide range of stakeholders and training recipients, as well as involving project partners in the evaluation design.

The external evaluation team at Deakin University have produced an independent evaluation report of the project, detailing all the evaluation tools and methodologies, as well as an analysis of the project impacts.

### Formative evaluation

The external evaluation encompassed a formative component, with interviews of steering committee members facilitated by the research team at Deakin University, undertaken between February and March 2014. This provided early feedback on project components and allowed issues with implementation and opportunities for further enhancement of outcomes to be identified and addressed. Project documentation, such as meeting minutes and the partnership analysis tool data, were utilised alongside the interviews to examine both intended and unintended effects.

### Summative evaluation

Summative evaluation interviews explored the extent to which the strategy actions met intended impacts and outcomes, and provided an opportunity to hear the voices of key stakeholders who participated in various stages of the project.

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<sup>1</sup> Whilst it is beyond the scope of this report to provide full details of this methodology, suggested further reading includes; *Evaluating with sense. The theory-driven approach. Evaluation Review* (Chen HT, Rossi PH. 1983) and *New Approaches to Evaluating Community Initiatives* (Connell et al 1995).

Interviews were conducted between June and November 2015, by the research team at Deakin University. Interviews were carried out with samples of individuals who participated in the different parts of the regional PVAWC strategy, in one or more of the following categories:

1. Steering committee/working group members
2. Workshop attendees at events run by WHGNE
3. Staff members of organisations who undertook a Gender Audit

## Evaluation tools

### *RE-AIM framework*

Steering committee members were invited to be involved in the development of the evaluation plan, through their participation in evaluation workshops facilitated by the project external evaluator. The RE-AIM framework was used as it provides a scaffold for evaluating the public health impact of health promotion interventions across five dimensions (Glasgow et al, 1999). This approach allowed steering committee members to identify and generate evaluation questions and further hypotheses to be tested in the strategy implementation, as well as identifying the data collection methods required.

### *Community Capacity Index*

The Community Capacity Index (CCI) was the partnership analysis tool utilised throughout the course of the project. The CCI is designed to help identify the extent of capacity available within a network of organisations and groups at the local level. Community capacity is defined as a collection of characteristics and resources which, when combined, improve the ability of a community to recognise, evaluate and address key problems (Bush et al, 2002). The CCI was chosen due to its thorough process of development and testing, and its sensitivity to change, based on empirical research into successful partnership working. The CCI examines capacity within four domains:

1. Network Partnerships: Relationships between groups and organisations within the network.
2. Knowledge Transfer: Development, exchange and use of information within and between the groups and organisations within a network.
3. Problem Solving: The ability to use well recognised methods to identify and solve problems in the development and implementation of an activity or program.
4. Infrastructure: The level of investment in a network by the groups and organisations that make up the network.

## Internal Evaluation

The internal evaluation was conducted primarily by the project coordinator as well as the project team at WHGNE, with input and support from project partners and key stakeholders. Information was collected through a variety of mediums over the course of the project to demonstrate impact;

- *Reflective journaling*: to capture in real time observations, perspectives, and experiences from the project coordinator in working on different aspects of the project, and used retrospectively to inform key learnings
- *Meeting minutes*: key actions from steering committee, local government network and CDW meetings were recorded, and minutes circulated amongst members
- *Observations and notes from meetings and conversations*

- *Project team meetings*: regularly held over the project period as a strategy for discussing progress with stakeholders and partners, problem solving, best practice approaches, and recording key actions
- *Review of current evidence*: evaluation activities included International and National Literature review, Policy Scan, and Mapping Process of existing primary prevention PVAW initiatives across the Hume region
- *Facebook and Twitter engagement*
- *Website engagement*: to record changes in campaign impact within broader community, measured by site visits, time spent on site, and popular pages
- *Emails*
- *Qualitative data from activities and events*: including written and verbal feedback from participants
- *Quantitative data from activities and events*: including the number of participants, ratings provided by participants
- *Photographs from event workshops*
- *Gender attitudes survey*: this survey was administered pre and post the Gender Audits undertaken at Alpine Health and Murrindindi Shire, and were to measure attitudes towards gender and gender roles and track changes
- *Gender audits*: Both Alpine Health and Murrindindi Council completed a gender audit of their organisation; identifying staff perceptions of how gender issues are addressed in programming and in internal organisation systems and activities.
- *Reflective meetings*: Steering committee members and the project team have participated in meetings to reflect on what worked well in the project, what didn't work well and what could be done differently to improve outcomes.

# Hume Region Preventing Violence Against Women and Children Strategy

The Regional PVAW Strategy sought to engage a diverse range of organisations and individuals in conversations and activities that promote gender equity and respect, resulting in whole communities participating in PVAW.

The nature of our approach to this project has meant that in some instances we have placed more emphasis on some strategies and activities over others, due to emerging opportunities and partner readiness.

The strategy has produced significant impacts and achievements in relation to the five objectives. The tables below summarise what has been achieved throughout implementation from March 2013 to December 2015, against the specific strategy actions.

## Strategy Objectives

<b>Objective 1: Partnerships</b> <b>Establish partnerships across government and non-government agencies as well as accountable leadership structures for sustainable prevention</b>		
<b>Strategy Action No.</b>	<b>Strategy Action</b>	<b>Implementation Status December 2015</b>
1.1	Partner with existing Family Violence and primary prevention networks to support the implementation of actions within the strategy.	Identified FVPN predominately consisted of service providers, with actions focused on service integration or early intervention. As strategy focus was on primary prevention, there was minimal engagement with FVPN from 2014 – 2015. WHGNE remained involved and supported networks through the Health Promotion program.
1.2	Liaise with the GOMIFVMSC.	The RIC was a member of the steering committee meetings, and the Project coordinator attended GOMIFVSC meetings. The project coordinator was heavily involved in the planning of the Family Violence “Busting the Myth” Conference in May 2015. Project coordinator delivered presentation to the GV operational group in Nov 2015. RIC and Project Coordinator partnered in the development and promotion of the Continuum of VAW resource
1.3	Liaise with DoJR regarding the implementation of the regional PVAWC strategy and expenditure of funds.	DoJR actively participated in steering committee meetings from 2013-2015. Biannual reports were submitted to DoJR, providing update of strategy implementation and budget expenditure.
1.4	Work collaboratively with project workers from other	Project coordinator participated in the Community of Practice, facilitated by VicHealth in

	PVAWC DOJ funded projects across the state, sharing resources and key learnings	2013 and Our Watch in 2014-2015, where learnings were shared with other project workers and challenges addressed
1.5	Utilise existing successful partnerships at a local level to implement PVAWC initiatives	Strategy developed two strong partnership networks; Steering committee and LGPVAW 12. Identified some existing partnerships, such as FVPN, had differing goals and focus regarding primary prevention.

## Objective 2: Supportive Environments

To support organisations to provide structural and cultural environments that promote equal and respectful relationships

Strategy Action No.	Strategy Action	Implementation Status Dec 2015
2.1 <i>Community (Local Government)</i>	2.1.1 Develop and implement a gender equity charter that can be embedded into a variety of community settings, with the support of Local Government	Based on the Charter of Human Rights, and the CEDAW, the Courageous Conversations PVAW Charter developed in 2013 by the Gender Equity Working group. The Charter has been adopted by 19 organisations in Benalla, as part of their White Ribbon Supporters program
2.1 <i>Community (Local Government)</i>	2.1.2 Engage with Local Government to promote PVAWC externally involving the broader community	LGPVAW12 worked together to identify strategies to engage their communities in PVAWC. 10 out of 12 councils in the Hume participated in the 16 Days of Activism campaign in November 2015, showcasing council activities in PVAW
2.2 <i>Sporting Clubs</i>	2.2.1 Work with local sporting assemblies to increase women's participation and create more family-friendly environments aligning with Healthy Sporting Environments	Partnership established with Valley Sports and Centre Active Recreation Network (CARN), and strengthened through active participation in the steering committee. Both partners had strong input and involvement in the development of the Courageous Conversations Sporting Club Handbook (to be disseminated March 2016).
2.2 <i>Sporting Clubs</i>	2.2.2 Promote the adoption of the Gender Equity Charter in sporting clubs, encouraging a positive and respectful culture	Charter was adopted at the Benalla Saints Sports Club. Benalla Saints Code of Conduct was adapted, promoting behaviours that encourage inclusivity and respect
2.2 <i>Sporting Clubs</i>	2.2.3 Engage with AFL NE Border and work with them to engage clubs in Courageous Conversations and PVAW	Engaged with AFL NE Border, obtained available statistics regarding participation levels of males and females in Football Netball clubs in NE Victoria
2.2 <i>Sporting Clubs</i>	2.2.4 Develop a tool sporting clubs can use to place a gendered lens over their club, adapting from existing gender audit tools	-CC Representation Checklist resource produced – applicable to sporting club environment. -Draft CC Handbook produced, with input from sporting assemblies, supporting clubs to review their current culture and take actions to promote respect and equity.

2.3 Youth Services	2.3.1 Support youth agencies to implement and deliver primary prevention activities, embedding the determinants of violence against women and children into existing programs and structures	Developed a tool, supporting agencies to review their programs with a PVAW lens, to examine and assess if the determinants of VAW are incorporated in program content and design. There was strong engagement from the youth sector in 2014, but decreased with staff turnover. Attention was focused where there was greater engagement
2.4 Education	2.4.1 Collaborate with alternate education providers to promote gender equity and non-violent norms within the organisation	Time and capacity within this sector was restricted, therefore attention was focused where there was greater buy-in and momentum.
2.4 Education	2.4.2 Advocate for the inclusion of gender equity in the school curriculum and existing respectful relationship programs in the curriculum	WHGNE worked with and supported local leaders to advocate for the State Government to resource the implementation of respectful relationships education in all public schools.
2.4 Education	2.4.3 Provide schools with tools and resources, supporting them to implement clear gender equity messages	A Whole of School Approach to PVAW Poster was developed in consultation with Benalla College. A case study of the Mansfield Primary School Respectful Relationships Whole of School approach is available via the CC website.

### Objective 3: Capacity Building

Build the capacity of leaders to take action against sexism, rigid gender roles and promote organisational change and workforce development

Strategy Action No.	Strategy Action	Implementation Status
3.1 Individuals	3.1.1 Build the capacity of leaders within key settings to take action against gender inequity and champion the PVAWC message  Key Settings -Sporting environments -Education -Local Government -Community	-Hosted the VicHealth PVAW Leadership course in November 2013, in conjunction with the regional PVAWC strategy launch. 12 senior leaders attended. -31 participants attended the NTV Bystander Workshop in Nov 2014 -Delivered the Courageous Conversations Bystander workshop to 103 participants across the Hume between August and October 2015 -Delivered PVAW training to 20 members of the Benalla Saints Leadership group
3.1 Individuals	3.1.2 Provide the prevention networks with training and support them to identify and up skill community leaders	WHGNE facilitated planning days for five of the six networks to develop 12 month action plans. These were held; <ul style="list-style-type: none"> <li>• Wodonga FVPN –July 22, 2013</li> <li>• Benalla FVPN – August 8, 2013</li> <li>• Lower Hume – August 28, 2013</li> <li>• Wangaratta –September 10, 2013</li> <li>• Goulburn Valley – February 2014</li> </ul>

		The process identified that focus and capacity of the FVPNs was on integration and early intervention rather than primary prevention. There was little engagement from the FVPN in the regional PVAW strategy beyond 2013. WHGNE continued to support the networks by providing resources and sharing knowledge.
3.2 <i>Workforce</i>	3.2.1. Promote WHGNE training opportunities of developed packages across the continuum of violence prevention to the Hume region	- FV Awareness Training and CC Bystander Workshop promoted to project partners and communities across the Hume. -Steering committee informed of local and state capacity building opportunities via email and committee meetings, with professional development being a standard agenda item. Local capacity building opportunities included; FV Busting the Myth Conference, Respectful Relationships Education forum, Charter Launch, VicHealth Leadership Workshop
3.2 <i>Workforce</i>	3.2.2 Provide youth providers with training to increase their knowledge of PVAWC, gender equity and skills to facilitate primary prevention actions	Due to minimal engagement this was not achieved. Youth providers remained informed via mailing lists and invited to all training opportunities.
3.2 <i>Workforce</i>	3.2.3 Encourage and support workplaces to undertake a gender audit of their organisation	Resourced a 12 month 0.2EFT position at Alpine Health and Murrindindi Shire to complete a gender audit of their organization. MOU signed with Alpine Health on the 10 <sup>th</sup> September 2014. MOU Signed with Murrindindi Council on September 27 2014.
3.2 <i>Workforce</i>	3.2.4 Support workplaces who undertake a gender audit to develop and implement a gender action plan	Alpine Health and Murrindindi Shire developed gender action plans and commenced implementation in November 2015.
3.3 <i>Organisational</i>	3.3.1 Engage with Local Government to promote PVAWC internally, increasing gender equity within the workplace	The LGPVAW12 identified opportunities to promote PVAWC internally. The group created a recommendation for all council policies to reference the Charter of Human Rights, and drafted briefing and report template for all councils to utilise.
3.3 <i>Organisational</i>	3.3.2 Partner with local government to build the capacity of all staff to take action against gender inequity and recognize it within the workplace	WHGNE actively participated in 12 of the 13 LGPVAW12 meetings. MAV representation at two LGPVAW12 meetings Strong local government representation at the following events and workshops <ul style="list-style-type: none"> <li>- VicHealth PVAW Leadership course</li> <li>- Charter Launch</li> <li>- NTV Bystander Workshop</li> <li>- Courageous Conversations Bystander Workshops</li> </ul>

3.3 <i>Organisational</i>	3.3.3 Partner with local workplaces to build the capacity of all staff to take action against gender inequity and recognize it within the workplace/communities	Strong partnership with Alpine Health and Murrindindi Shire Council. 103 professionals attending the Courageous Conversations Bystander workshops. CC Workplace Checklist developed and piloted supporting workplaces to take action on gender inequity.
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**Objective 4: Communications and Advocacy**  
**Promote and communicate key messages and tools that build respectful relationships, and influence social norms, attitudes and behaviours**

<b>Strategy Action No.</b>	<b>Strategy Action</b>	<b>Implementation Status December 2015</b>
4.1	4.1.1 Develop a social marketing campaign with clear and consistent messages of respect and equity and PVAWC to be delivered across the Hume region	Courageous Conversations campaign developed in October 2013. CC website launched in August 2014. Associated CC resources developed throughout 2013-2015.
4.2	4.1.2 Promote gender equality and respectful relationships key messages via social media	CC Facebook and Twitter Page developed in June 2014. Both pages have seen an increase in engagement.
4.3	4.1.3 Promote and engage organisations, clubs and networks in Courageous Conversations, across the Hume region	Benalla Saints displayed the CC logo on the club uniforms and adopted the CC campaign Both Alpine Health and Murrindindi Shire Council utilised the CC campaign and materials as part of their gender audit promotion Alpine CDW delivered a number of community presentations promoting CC resources and the campaign CC Bystander workshop participants provided with CC resource kit.
4.4	4.1.4 Utilise the Courageous Conversations website to promote resources and tools for key settings	All CC resources available to download from the CC website. CC webpage dedicated to four settings; Schools, Workplaces, Sporting Clubs and Local Government – providing targeted evidenced based resources on gender equity. The LGPVAW12 provided input to selecting resources available on the LG page.

**Objective 5: Research and Promoting the Evidence Base**  
**Undertake research, evaluation and monitoring to ensure continuous improvement and contribute to the evidence base**

Strategy Action No.	Strategy Action	Implementation Status December 2015
5.1	5.1.1 Conduct research investigating best practice of PVAWC in rural and community settings	Policy scan undertaken in March 2013 Review of PVAWC best practice projects provided to steering committee as workshop pre reading in April 2013 Literature review of PVAWC undertaken in rural settings completed in January 2014; highlighted dearth of evidence.
5.2	5.1.2 Make case studies of local champions and organisations promoting gender equality publically available on the Courageous Conversations website, as a learning tool for others	Five case studies of the following are available via the CC website <ul style="list-style-type: none"> <li>- Alpine Health Gender Audit</li> <li>- Murrindindi Shire Council Gender Audit</li> <li>- David Ryan; Victoria Police and Sporting Clubs</li> <li>- Alannah Johnson; life in a rural farming community</li> <li>- Mansfield Primary School Respectful Relationships</li> </ul>
5.3	5.1.3 Support professionals in the use and application of tools and resources, disseminating information throughout networks	-Facilitated discussion with DoJR, to utilize and implement the CC workplace checklist in June 2015. -Supported Alpine Health and Murrindindi Shire Council to conduct a gender audit utilizing the InterAction Gender Audit Handbook beginning September 2014 - Alpine Health and Murrindindi Shire Council gender audit case studies available via CC website -Project Coordinator presented CC resources to CC Bystander workshop attendees, summarizing and explaining CC resource kit (August and October 2015).
5.4	5.1.4 Provide professionals with the opportunity to participate in community of practice	-Alpine Health and Murrindindi Shire Council, acted as champions, sharing learnings, challenges of the gender audit and resources produced with the steering committee -Steering committee meetings provided opportunity to share new resources and learnings, and reflect on strategy implementation, conferences, workshops and work completed

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# Project Activities

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This section provides a detailed account of key project elements and activities completed as part of the PVAW strategy, and are grouped according to the five key objectives.

## **Objective 1: Establish partnerships across government and non-government agencies as well as accountable leadership structures for sustainable prevention**

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### Key Achievements

- Developed a regional PVAWC steering committee, comprising of a diverse range of stakeholders, with 18 organisations formally endorsing the regional PVAWC strategy and 21 organisations participating in steering committee over the course of the project; and
  - Establishment of the LGPVAW12 committee with seven of the twelve councils actively participating in the committee; providing an avenue for councils in the Hume region to collectively address PVAW.
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### Bringing stakeholders together

Previously in the Hume region, PVAW work generally occurred in isolation, and was predominately focused on awareness raising activities, or was dedicated to service integration and response. The purpose of the DoJR funding was to unite stakeholders in a primary prevention focused partnership project. Development of partnerships has been an indispensable activity and a defining outcome of the project, particularly important in a rural region. Our experiences over the three-year period suggests solid partnerships is an essential element for ensuring sustainability of continued activity to prevent violence against women and children beyond the period of DoJR funding.

The first six months focussed on inviting key stakeholders to participate in the project. Dedicating adequate time to progress and build partnerships in the initial phase was important, in order to develop a regional PVAWC strategy that was truly participatory. Representatives from organisations invited to participate in a steering committee member were identified due to their demonstrated leadership in PVAW, or the role they and their organisation plays in the community and their ties to community members. Broad invitations were sent to 24 organisations across the Hume region, including 12 local councils, as well as Victoria Police, Community Health, Family Violence Services, Aboriginal Cooperation's, Youth Services, Sporting Assemblies and DoJR. A phone call was made to each of these stakeholders, discussing the DoJR funding and the project, and followed up with an email, and a formal letter of invitation. A total of 15 committee representatives attended the first meeting.

### Development of the Hume Region Preventing Violence Against Women and Children Strategy

The strategy was designed to capture and bring together all activities across the region in relation to the prevention of violence against women into one centralised framework. The steering committee

undertook a six-month process to build the partnership and increase knowledge and understanding of PVAW, in order to develop a Regional PVAWC strategy based on best practice principles that also reflected regional strategies and activities. This commenced with documenting the current PVAW climate at a national, state and local context through a policy scan and undertaking a local mapping exercise.

A workshop was dedicated to the development of the strategy, with members given pre reading, featuring evaluated primary prevention PVAW programs and best practice evidence. The steering committee also utilised the mapping information, the policy scan, and their own local knowledge to inform the creation of the regional PVAWC strategy. Three draft versions of the regional PVAWC strategy were developed and circulated amongst the committee, with members invited to consult with and seek feedback from their colleagues.

These early activities were pivotal in building collaborative relationships and forming a basis of common understanding (see Regional PVAWC Strategy section to view the plan).

## Steering committee

Recognising the geographical vastness of the Hume region and the complexity of VAW, the committee was keen to move forward consolidating actions to gain the most impact. Meetings were held monthly in 2013 whilst building relationships and developing the strategy, with a total of 24 individuals participating that year, representing 19 organisations. Once the strategy had been developed, it was decided that bi-monthly meetings would be sufficient for strategy implementation and monitoring. This took into consideration members' time, capacity and distance of travel required to attend meetings (see Appendix 1 for detailed outline of all meetings).

## Working groups

To assist the effective implementation of the Hume region PVAWC strategy, establishment of three working groups were proposed, each focussing on different key actions: Local government; Community action; and Gender equity.

### *Local government working group*

Local government is an important setting in PVAW, due to their unique engagement with individuals, families, organisations and communities, and therefore can play an important role in influencing cultural and social norms (MAV, 2014). The purpose of this working group was to bring together council champions in a forum that would assist and support them to raise the profile of PVAWC on their council agenda. Local governments that had greater capacity or experience could provide key learnings and support other councils in their journey. With council representatives working together a consistent statement of PVAWC could be implemented across the Hume local governments, providing a powerful and united message.

The group named themselves the LG PVAW 12; symbolising the 12 local governments in the Hume region working collaboratively on PVAW. The LGPVAW12 held 13 meetings coinciding with the steering committee meetings in 2014 and 2015. The group have accomplished significant gains in raising the profile of PVAW within council and their communities, with key achievements including:

- 11 of the 12 councils have attended and participated in the LG PVAW 12;
- The group have had representation from MAV senior policy advisors at two meetings – 30<sup>th</sup> January 2014 and 26<sup>th</sup> March 2015 - with MAV representatives sharing resources MAV had produced, seeking feedback and input on draft resources targeted to rural councils, and

showcasing initiatives and actions implemented by other rural and metropolitan councils across the state in relation to PVAW

- Ten councils participated in the Hume region 16 Days of Activism campaign, showcasing what their council was doing in relation to PVAW in their community;
- Collaborated to identify opportunities and practices to promote PVAWC internally;
- Created a recommendation for all council policies to reference the Charter of Human Rights;
- Drafted a briefing and report template; and
- Networked and shared resources with other councils

As the only working group that has been active for the duration of the project, LGPVAW12 is self-driven and intends to continue meeting beyond the life of the DOJR funding, which is a testament to the commitment of these local government members and their dedication to PVAW

#### *Community action working group*

The community action group was to concentrate on adapting the structures and systems within key settings to create sustainable change. Key settings were selected due to the pivotal role they play in shaping attitudes and norms about gender roles at both peer and organisational levels (VicHealth, 2007). The settings included sporting clubs, education, workplaces and general community.

Activities to be completed by the group entailed:

- Working with Valley sport and CARN to implement and achieve the Inclusion criteria under VicHealth's Healthy Sporting environments;
- Support clubs and organisations to implement gender equity policies;
- Support clubs and organisations to adopt the community charter;
- Consult with youth regarding the development of a PVAWC social marketing campaign; and
- Identify leaders within key settings to champion the PVAWC message.

It was envisaged that WHGNE would drive this group, with key membership from members of the Hume region FVPNs. Due to limited capacity among steering committee and FVPN members to engage in primary prevention activities, this group never eventuated. The intended activities were instead progressed through concentrated partnerships with Regional Sporting Assemblies, and the pilot with Benalla Saints. More detail is described in Key Findings: Objective 2.

#### *Gender equity working group*

The purpose of the gender equity group was to ensure the principles of gender equity and the underlying determinants of VAW were embedded in strategy actions and adopted in organisations. Key aspects and tasks of the group included:

- Development of the community PVAWC charter;
- Organisational audits (Interaction Gender audit);
- Gender and equity tools and resources; and
- Measuring attitudes regarding gender equity.

WHGNE was the driver of the gender equity working group, with local government and community health represented at two meetings held in 2013 (30<sup>th</sup> of July and 5<sup>th</sup> of September), which were dedicated to researching and developing the Courageous Conversations Charter (see Appendix 1). Due to staff turnover within the steering committee, the group did not progress beyond 2013. Instead the aims and tasks of the group were pursued through the gender audit pilots with Alpine Health and Murrindindi Shire Council – these findings are detailed in Project Activities – Objective 2.

## Objective 2: To support organisations to provide structural and cultural environments that promotes, equal and respectful relationships

### Key Achievements

- Courageous Conversations Charter developed and adopted in 19 organisations;
- Code of conduct adapted at Benalla Saints Sports Club; and
- Resourced by 0.2 EFT position, Gender Audit undertaken by both Alpine Health and Murrindindi Shire Council, reaching and including a combined total of approximately 500 staff members, resulting in both organisations developing a gender action plan that supports the promotion of gender equity and inclusivity.

### Charter development

A Hume Region PVAW Charter was developed as a framework of guiding principles for organisations wanting to engage in PVAW action, and to unite stakeholders collaboratively. A list of existing charters related to PVAW was compiled and provided to the gender equity group prior to the first meeting. In total, 10 existing charters and declarations were identified: five international; two Victorian; and three community-based (see table below), which were drawn upon in the development of the charter.

Community Charters	State Charters	International Declarations and Charters
Ballarat Community Charter for the Prevention of Violence Against Women	Victorian Charter of Human Rights and Responsibilities	UN Declaration of the Elimination of Violence against Women (DEVAV)
Geelong – G21 Accord	Victorian Local Government Women’s Charter	Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)
The Knox Accord to end Violence against Women		Universal Declaration of Human Rights
		International Convention on Civil and Political Rights
		International Covenant on Economic, Social and Cultural Rights

The gender equity group reviewed the charters, identifying integral items for inclusion in the Hume Region PVAW Community Charter. A key priority of the Hume region charter was to feature the promotion of gender equity and respectful relationships, as opposed to focusing on the perpetration of violence against women.

The Courageous Conversations Hume Region Preventing Violence against Women Charter, principles, and statement of commitment is heavily based upon the Universal Declaration of Human Rights and the CEDAW. Given the significance of these documents universally, they provide

important links to the foundations of PVAW and are strong fundamentals for a regional community charter.

The CC Charter provides organisations with a framework for action in the prevention of violence against women and children, by promoting gender equality and respectful relationships in their environment, and communities. The charter was designed to be adopted by a diverse range of community organisations, including sporting clubs, local government, workplaces, schools, and community groups.

A range of resources and tools specific to different settings have been developed under the Courageous Conversations banner, to support organisations to promote equity and respect, and implementation of the charter. See Appendix 2 for summary of all CC resources.

## Charter pilot site

The role of the pilot site was to demonstrate a whole of community response to PVAW. It was anticipated that a broad population would be reached through such an approach, as diverse organisations would adopt the charter and promoting consistent messages via a number of channels throughout the community.

Benalla was initially identified as an ideal pilot site due to their existing commitment and engagement in PVAW activities. In December 2013, WHGNE initiated a meeting with Benalla Rural City and Benalla Health to discuss the possibility and practicalities of a Benalla pilot site for the implementation of the Courageous Conversations Charter.

Benalla Health and Benalla Rural City had an existing strong partnership, which offered an opportunity to pilot the charter's implementation with two of the community's largest employers. It was proposed that Benalla Health, Benalla Rural City and the Benalla Saints Sports club would all be involved in and lead the pilot, due to their strong links to the community, providing a prime opportunity to implement the charter utilising a whole of community approach. All parties present at the meeting were in favour of and supportive of the Benalla Pilot site, agreeing to discuss with their colleagues, and pursue the opportunity further. The strategy for Benalla to become the Courageous Conversations Charter pilot site was presented to the steering committee at the first committee meeting on January 30, 2014.

A number of meetings were held with Benalla project partners to discuss how to progress implementation of the Charter within their organisations, with a gender audit being identified as the primary activity. During a meeting on April 14<sup>th</sup> 2014, between Benalla Health and WHGNE, the possibility of Benalla Health conducting a gender audit as a key action in the pilot site was discussed and determined unfeasible at the time, as evidenced by the email excerpt below:

*"The Gender Audit Handbook was presented as the option for Benalla Health to implement the charter. The implementation of the Audit as presented in the first instance requires a far bigger commitment than Benalla Health is able to commit at the moment" (Health Worker).*

Communication between WHGNE and Benalla Council continued, in order to determine capacity of Council to lead and drive the pilot, both internally and within the Benalla community. A staff member was identified to lead the initiative and pursued the necessary and important processes at Benalla Council to gain leadership endorsement, as evidenced by the email below;

*"I have spoken briefly with our x, and she would like to raise this project with our Senior Management Team early next week. I am so sorry for the delay, but it is important from my*

*perspective to have our Leadership totally across and ready to embrace this great project” (Council Worker).*

Due to a significant period of transition and change within the council approval from leadership for the pilot was denied. Despite not being able to progress the pilot site, both organisations have continued to engage in the steering committee and lead PVAW activities locally. Benalla Health have continued to lead the White Ribbon Supporters program, which encourages local organisations to adopt the CC Charter. To date, 19 agencies have become members of this program in Benalla Community, receiving a framed plaque of the charter to hang in their organisation. Benalla Council has provided significant administrative support for the LGPVAW12 meetings, and organised venues for steering committee and LGPVAW12 meetings.

In order to still meet aims of the strategy within the timeframes, WHGNE invited EOI from other organisations in the Hume region to participate in the Courageous Conversations pilot. This is discussed below under the heading “Gender Audit”.

## **Benalla Saints Sports Club**

The Benalla Saints Sports Club was invited to participate in the Benalla pilot site, due to their strong ties with the community, and for being a forward thinking and progressive club that had previously acted on a number of social issues.

WHGNE, the club’s vice-president and club football coach met to discuss what the partnership would look like as well as the roles and responsibilities of each member. A formal partnership was reached with the club president signing a MOU in March 2014.

### *Code of Conduct*

The first action and achievement of the partnership was a review and update of the club’s code of conduct. All club members sign the code of conduct at the beginning of the season, committing to adhere to the behaviours and principles outlined in the code. The club’s existing code from AFL Victoria was reviewed and WHGNE presented suggestions to Benalla Saints, to incorporate principles of equity, inclusivity and bystander behaviours. These changes were adopted and reflected in the club’s 2014 code.

### *Courageous Conversations logo*

The Courageous Conversations logo was displayed on all netball and football players’ uniforms for the 2014 home and away season. In addition, the Saints were keen to develop a tagline more applicable to a sporting community. The tagline “It’s a level playing field” was developed by Benalla Saints, and featured alongside the CC logo on all the playing uniforms. This tagline has developed into a belief and mentality the club strived for. The tagline has been used more broadly for Courageous Conversations work with other sporting clubs.

### *Leadership group training session*

The vice-president and coach identified training as a priority for their leadership team to mature their understanding of VAW and what the Courageous Conversation pilot was aiming to achieve.

On March 6<sup>th</sup> 2014 WHGNE delivered a one-hour training session at the clubrooms to the club’s leadership group consisting of the president, vice-president, coach, netball and football captains and senior leaders, and senior club members. Based on elements of WHGNE Family Violence Awareness training, the session introduced participants to the prevalence of VAW, the different aspects of

violence (emotional, financial, verbal, psychological abuse) and the underlying causes of VAW. The training also added elements of bystander behaviours and what individuals can do at the club, particularly the role the leadership team could play in modelling respectful relationships.

This training generated robust discussions among members and many participants were genuinely shocked at the statistics. At the end of the training session, participants provided a one word evaluation to describe their feedback on the training session and what impact it had on themselves as individuals. The participants used words such as; *informed, enlightened, courageous, encouraged and challenged*. This type of evaluation was chosen due to recommendations from Benalla Saints Vice President and Coach that conducting formal evaluation would be difficult, as members were unlikely to complete surveys prior to or post activities, and therefore any evaluation would need to be brief and collected during the session.

## Gender audit

### *Expression of interest*

In order to pursue original aims intended for the Benalla pilot site, WHGNE invited EOI from other organisations to participate in undertaking a gender audit. A gender audit was seen as an important initiative of the strategy, as it allowed workplaces to address the underlying causes of VAW, through conducting a gender analysis of organisational culture, policy, planning and service delivery leading to more equitable outcomes (Women's Health in the North, 2010).

Through the project WHGNE offered a Community Development Worker 0.2EFT position to support implementation of the gender audit pilot. The Community Development Worker (CDW) position would promote and advance actions articulated within the Courageous Conversations Charter both within their organisation and the local community. The 12-month position would be additional to an existing employee's current role, minimising staff recruitment, induction process and a new employee establishing relationships within the community.

A total of three EOIs were received in May 2014, however as Benalla was unable to continue, Alpine Health and Murrindindi Shire Council were confirmed as successful pilot sites. Both communities were identified as areas of need, being rural and remote with limited services and limited activity in relation to PVAW. Murrindindi had also been badly affected by the Black Saturday bushfires of 2009, which research has found that family violence increases after natural disaster (Zara and Parkinson, 2013).

### *Formal partnership*

With both community development workers and pilot sites identified, all parties moved forward to begin the audit process. A MOU was signed with Alpine Health and Alpine Council on September 10 2014. While Alpine Health was the lead agency, Alpine Shire Council was incorporated in the MOU due to the existing strong partnership between these organisations and the intention that Alpine Council could utilise learnings from Alpine Health's process, in conducting their own gender audit in the future. Alpine Shire was provided with a bi-monthly update of progress at Alpine Health to further enable this opportunity.

The MOU between WHGNE and Murrindindi Council was signed on September 27 2014. The MOU outlined the key tasks and deliverables for the community development officer, which correlated with actions outlined in the Regional PVAWC Strategy. Key priorities and outcomes achieved at the completion of the 12-month audit process were:

- Gender audit of their organisation completed utilising the InterAction Gender Audit Handbook as a guide;
- Gender action plan based on the outcomes of the gender audit, developed and implemented;
- Audit process and outcomes communicated to all staff members
- Changes to policy or practice documented
- Professional Development opportunities for staff that increased their knowledge of gender, gender equity, violence against women and its prevention.

*InterAction Gender Handbook*

The *Gender Audit Handbook* is a self-assessment tool for identifying staff perceptions regarding how gender issues are addressed in programming and in internal organisational systems and activities. Recommended by the projects external evaluator, the Handbook was selected as an evaluation tool during an evaluation workshop in the first year of the project.

The handbook provides a process for creating ongoing gender action planning three useful outputs for organisations:

- A reflection of the status of gender equality within the organisation;
- A baseline for collective discussion and analysis; and
- A participatory process that builds organisational ownership for the agency's gender equality initiatives and ongoing gender action planning.

The *Audit* is organised into four steps:

1. Preparing the organisation to carry out a *Gender Audit*.
2. Surveying staff to uncover their perceptions regarding gender equality in the organisation and programs
3. Conducting focus groups to develop an organisational vision of gender equality; and
4. Creating the organisation’s Gender Action Plan

The below tables detail the step-by-step process both organisations took, and achievements throughout the 12 month project.

<b>Step 1: Preparing for the Audit</b>	
The IGA Handbook recommends three steps for preparing for a gender audit: 1) assessing organisational readiness 2) gaining senior management buy-in 3) developing a communications strategy	
<b>Alpine Health</b>	<b>Murrindindi Council</b>
<i>Community Development Worker Induction</i> A meeting was held on July 3 2014, with the project coordinator, the CDW, and the Alpine Health Early Intervention Manager. Evidence demonstrating gender equity and its correlation with PVAW, was presented and discussed as well as the Gender Audit process according to the InterAction Handbook	<i>Community Development Worker Induction</i> A meeting was held on September 17 2014, with the project coordinator and the CDW. Evidence demonstrating gender equity and its correlation with PVAW, was presented and discussed as well as the Gender Audit process according to the InterAction Handbook
<i>Development of Work plan</i>	<i>Development of Work Plan</i>

<p>The project coordinator provided a draft work plan, which was adapted by the CDW</p>	<p>The project coordinator provided a draft work plan, which was adopted by the CDW and modified throughout the audit</p>
<p><i>MOU</i> An MOU was signed with Alpine Health, the Alpine Shire Council and WHGNE on September 10 2014.</p>	<p><i>MOU</i> The MOU between WHGNE and Murrindindi Council was signed on September 27 2014.</p>
<p><i>Development of Working Party</i> All members of the working party self-volunteered through an EOI process during September 2014. The working party consisted of nine members from a range of departments of Alpine Health, including, human resources, acute and district nursing, workforce training, health promotion, youth services, health information and Alpine@Home and client services. The group named themselves the C-CREW: Courageous Conversations – Respect and Equity Working Party</p>	<p><i>Development of Working Party</i> Membership to the working party was sought via the council’s intranet, through emails and personal contact. A total of nine members comprised the working group, with a diverse representation from children’s services, community service, human resources, library, administration, youth and recreation, environmental services and parks maintenance. During the audit, membership was reduced, as four members were unable to continue participation</p>
<p><i>C-CREW TOR</i> A TOR for the group was endorsed on the group’s first meeting on October 10, 2014. The TOR outlined the group’s:</p> <ul style="list-style-type: none"> <li>- Role</li> <li>- Membership</li> <li>- Decision Making</li> <li>- Accountability</li> <li>- Confidentiality</li> <li>- Meetings</li> <li>- Quorum</li> </ul> <p>Meetings were held on a fortnightly basis.</p>	<p><i>Working Party TOR</i> The group’s TOR was adopted in December 2014. The TOR were based on the C-CREW TOR and outlined the working party’s:</p> <ul style="list-style-type: none"> <li>- Purpose</li> <li>- Membership</li> <li>- Decision Making</li> <li>- Confidentiality</li> <li>- Meetings</li> <li>- Communication with Staff</li> </ul> <p>Meetings were held on an as needed basis, dependent on when majority of the group was available. Group decisions were also made via email or phone call if unable to physically meet</p>
<p><i>Communication Strategy</i> Developed in October the communication strategy was updated and discussed regularly at C-CREW meetings, and detailed the following:</p> <ul style="list-style-type: none"> <li>- Action</li> <li>- Resources</li> <li>- Who to tell</li> <li>- Who’s responsible</li> <li>- Timeframe</li> <li>- Completion</li> </ul> <p>A key element of the communication strategy was a monthly newsletter developed by the CDW. The purpose of the newsletter was to inform staff of the audit process and key dates, but also to provide information more broadly on PVAW and gender equity. A letter from Alpine’s CEO was disseminated, which outlined his support and endorsement of</p>	<p><i>Communication Strategy</i> A communication strategy was developed in December by the working party. The strategy outlined;</p> <ul style="list-style-type: none"> <li>- Action</li> <li>- Who’s responsible</li> <li>- Timeframe</li> </ul> <p>The communication strategy encompassed all steps within the audit. The Murri (Staff newsletter) and the staff intranet was heavily utilised to promote the audit keep staff informed. Posters were also displayed across the organisation informing staff of key dates. Four newsletters were developed and distributed to staff throughout the audit process; and included audit key dates as well</p>

the gender audit, as well as encouraging staff to participate in the process.	information relating to gender equity and PVAW more broadly.
<p><i>Gender Attitudes Survey</i></p> <p>The Gender Attitudes Survey was open to staff from November 23 to December 5 2014, with online and hard copies available over three Alpine Health sites.</p> <p>A newsletter with a focus of explaining the link between attitudes towards gender, the gender audit and PVAW was made available to all staff. Intranet posts regarding the survey were also published in this period.</p> <p>124 surveys were completed.</p>	<p><i>Gender Attitudes Survey</i></p> <p>The Gender Attitudes Survey was open from December 15, 2014 and January 30, 2015. Original timeframes (December 15-31 2014) were extended to encourage greater uptake and completion of the survey.</p> <p>A number of information posters were displayed throughout the organisation, with survey link available on the staff intranet. Hard copies were also made available in staff tea rooms, with some departmental meetings allocated time for staff to complete the surveys.</p> <p>88 surveys were completed in total.</p>

### Step 2: Surveying staff to uncover their perceptions regarding gender equality in the organisation and programs.

Conducting the *Gender Audit* survey provides a snapshot of staff perceptions regarding the status of gender equality in their organisation. The IGA Handbook provides two survey options: a long survey containing 78-93 questions and a shorter survey with 22-27 questions. The longer survey provides considerable data to work with, which can be indexed according to two organisational dimensions: programming and operations. Both surveys can be analysed using the Gender Integration Framework components (political will, accountability, technical capacity, and organisational culture) and yields sufficient data for holding successful focus group conversations. Both organisations utilised Survey Monkey in administering the survey.

#### Alpine Health

##### *Development of Survey*

The C-CREW chose to adapt long survey, created over a number of meetings, with the survey finalised in January 2015.

The staff survey contained 42 questions, made up of 3 open questions, 1 combined question (9 yes-no statements and 1 open question), and 38 rating questions (three categories of responses were collected: 1) to what extent, 2) to what intensity, and 3) with what frequency).

##### *Conducting Staff Survey*

Alpine Health Gender Audit survey opened on February 2 and closed February 27. The survey was available online and in hard copies across all three sites - Mount Beauty, Bright and Myrtleford.

C-CREW members provided presentations at team meetings, encouraging staff to participate in the survey. The CDW presented to senior staff across the organisation explaining the

#### Murrindindi Shire Council

##### *Development of Survey*

The short survey was selected, with the working party making some alterations

The gender audit survey consisted of 23 questions; three questions were open-ended questions and 20 required a rating, with participants given the following choices: (1) to a very small degree, (2) to a small degree, (3) to a moderate degree, (4) to a great degree, (5) to a very great degree.

##### *Conducting Staff Survey*

The staff survey was opened on March 1 and closed on April 10. The survey was available online and in hard copy

The survey was promoted via a newsletter, the daily bulletin and a poster displays. Working party also discussed the audit survey with their teams.

A lunchtime talk was held on March 19 to present findings of the attitude survey and

<p>audit process and promoting staff involvement. This communication was seen as very effective in gaining participation from staff members. The survey was also promoted via staff newsletters, staff intranet and posters. A total 118 respondents were received. Data of five respondents were discarded due to incomplete surveys, leaving a total sample size of 113 respondents</p>	<p>encourage participation in the staff survey. Six staff attended this session. 68 responses were received, with four excluded due to being incomplete, reducing the sample to 64. This equates to 52% of the total staffing population (n=117).</p>
<p><i>Analysing Staff Survey</i></p> <p>An evaluation consultant from La Trobe University completed the survey analysis. A meeting held on March 6 between WHGNE, the evaluation consultant, and both CDWs discussed the analysis timeframes and specific information each organisation required to support the development of the gender action plan. The evaluation consultant was also able to obtain further information regarding the survey design. The evaluation consultant analysed the surveys in line with the recommendations from the IGA Handbook, conducted the analysis in the statistical software package, SPSS, and performed univariate, composite measure and bivariate analyses.</p>	
<p><i>Promoting the Results</i></p> <p>A report for Alpine Health Gender Audit Survey results was produced in April 2015. Results were disseminated via the monthly newsletter created by the CDW.</p>	<p><i>Promoting the results</i></p> <p>The Murrindindi Gender Audit survey report was produced in May 2015 and results were disseminated via a staff newsletter; 'cheat sheet' and a summary of key results and a poster display</p>

### Step 3: Conducting focus groups to develop an organisational vision of gender equality

The handbook provides detailed instructions for conducting the focus group process, including participant selection, and questions. The IGA recommends each focus group conversation incorporate a short presentation of the survey results along with key guiding questions that allow the group to explore results and potential actions. The goal of the focus group conversations is to gain deeper insights into the survey findings and data trends. These conversations provide the basis for identifying actions to promote gender equality.

The IGA Handbook suggests four questions to guide the focus groups:

1. Which of the results of the Gender Audit Questionnaire were in line with your experiences at this organisation?
2. Which results were a surprise?
3. What do you recommend that your organisation do to build on its strengths and address remaining challenges?
4. What is your vision of gender equity for your organisation?

#### Alpine Health

##### *Conducting Focus Groups*

Invitations were sent to the organisation in early April 2015, with all respondents provided with the survey results report. The focus groups were conducted as follows

- Bright – 23rd April (5 participants)

#### Murrindindi Shire Council

##### *Conducting Focus Groups*

Murrindindi held their focus group on June 22 2015 with 13 staff attending, facilitated by the community services manager (a working party member) and the CDW.

<ul style="list-style-type: none"> <li>• Mt Beauty – 23rd April (4 participants)</li> <li>• Myrtleford – 30th April (6 participants)</li> </ul> <p>The focus groups were guided by four questions:</p> <ol style="list-style-type: none"> <li>1. Which of the results of the Gender Audit Questionnaire were in line with your experiences at Alpine Health?</li> <li>2. Which of the Gender Audit Questionnaire results were a surprise?</li> <li>3. What do you recommend that Alpine Health do to build on its strengths and address remaining challenges?</li> <li>4. What is your vision of gender equity for Alpine Health?</li> </ol>	<p>The focus group did not follow the recommended format according to the IGA Handbook, as majority of the time was dedicated to discussing the key results in the survey report.</p> <p>Small amount of time was allocated to discussing recommendations for actions, and the participant’s vision of a gender equitable organisation.</p>
<p><i>Analysis of Focus Groups</i></p> <p>A Masters student from Deakin University attended each focus group as a note taker and recorded each session.</p> <p>The student produced a report in April 2015 that identified themes;</p> <ul style="list-style-type: none"> <li>- Gender audit survey results in line with staff experiences</li> <li>- Surprising results from the gender audit survey</li> <li>- Key issues and recommendations</li> <li>- Visions of a gender sensitive organisation</li> <li>- Potential limitations</li> </ul>	<p><i>Analysis of Focus Groups</i></p> <p>A Masters student from Deakin University attended the focus group as note taker and recorded the session.</p> <p>The student produced a report in June 2015 that identified themes</p> <ul style="list-style-type: none"> <li>- Responses to gender audit survey results</li> <li>- Key issues and recommendations</li> <li>- Visions of a gender equitable organisation</li> <li>- Potential limitations</li> </ul>

#### Step 4: Creating the organisation’s Gender Action Plan

Data from the staff surveys and focus groups identified opportunities for improvement and this information formed the basis of the Gender Action Plan. The IGA recommends utilising this information in a planning session with the Gender Team to develop the Action Plan.

##### Alpine Health

###### *Developing Gender Action Plan*

The C-CREW held a 4 hour planning session Friday 29<sup>th</sup> May 2015. This session used the **Gender Integration Framework (GIF)** to divide survey questions into the relevant GIF areas to ascertain the Key Themes and recommendations. A draft plan was developed based on the IGA gender action plan template and workshopped by the C-CREW.

Staff were able to provide feedback on the action plan, promoted via: Site meetings, Intranet posting, Tea room information, Notice Boards, and Monthly newsletter.

##### Murrindindi Shire Council

###### *Developing the Gender Action Plan*

Based upon the results, and the recommendations identified in the survey analysis report and the focus group, the CDW prepared a draft action plan for review by the Working party.

Staff were invited to provide feedback on the draft action plan.

Instead of developing a standalone gender equity policy, the working party chose to focus on specific actions from the audit, and have embedded these actions into existing internal processes and structures.

<p>The Alpine Health Senior Leadership group was presented with the gender action plan, accompanied by resources and handouts. During this meeting the Respect &amp; Equity action plan, an organisational Gender Equity Policy and Gender Equity Lens was approved.</p>	
<p><i>Gender Action Plan</i> The Gender Action plan titled, the <i>Respect and Equity</i> work plan was implemented in November 2015. The plan addresses sustainability by embedding strategies into existing workplace roles, strategic documents, internal committees and work practices. A major aspect of the plan is the alignment with the Healthy Together Victoria Achievement Program which Alpine Health has recently joined. The Respect and Equity plan has been linked to benchmarks within the Mental Health and Wellbeing domain.</p>	<p><i>Gender Action Plan</i> The Gender Action Plan began implementation in November 2015, and focused on two major actions:</p> <ul style="list-style-type: none"> <li>• Reviewing policies and systems with a gender lens <ul style="list-style-type: none"> <li>○ Reviewing internal and external communication policies</li> <li>○ Review of the project management system</li> </ul> </li> <li>• Linking actions and recommendations to the Council plan and the Health and Wellbeing plan</li> </ul>
<p><i>Gender Attitudes Survey</i> 40 staff members completed the Gender Attitudes follow up survey. The survey was made available via survey monkey and hard copies in staff rooms across the organisation between 9<sup>th</sup> – 21<sup>st</sup> of November.</p>	<p><i>Gender Attitudes Survey</i> 17 respondents completed the Gender Attitudes follow up survey. The survey was made available via survey monkey and hard copies in staff rooms across the organisation between 19<sup>th</sup> October –27<sup>th</sup> of November.</p>

Both CDW developed a case study of the gender audit process undertaken at their organisations, highlighting the challenges encountered and how these were overcome, and the successes that enabled the process. Case studies are available via the Courageous Conversations website: <http://www.courageousconversations.org.au/take-actions-promote-cultural-change/>

## Objective 3: Build the capacity of leaders to take action against sexism, rigid gender roles and promote organisational change and workforce development

### Key Achievements

- Delivered eight capacity-building workshops to a total of 156 participants, including the VicHealth PVAW leadership course, NTV Bystander training, How to become an ally in PVAW workshop, evaluation workshops and a social marketing workshop;
- Delivered training to approximately 20 members of the leadership team at Benalla Saints Sports Club;
- Five Courageous Conversations Bystander workshops delivered to 103 participants across the Hume; and
- Increased capacity within Local Government sector; previously in 2013 only three councils involved in PVAW, increased to nine councils demonstrating commitment to PVAW.

### Workshops

In bringing together stakeholders for the steering committee, it was identified there were varying levels of knowledge and understanding in relation to PVAW. Whilst some members had years of experience in working in VAW, others entered this project with limited exposure to this public health issue. In addition, primary prevention theory was novel to many and there was minimal experience in working in this field. A key aim of the strategy was to build the capacity of members to understand and implement primary prevention initiatives. See Appendix 3 for an overview of all capacity building initiatives delivered throughout the project.

Three workshops were held in 2013 to support the development, implementation and evaluation of the strategy. All were externally facilitated by consultants to add rigour to the process.

Workshop	Facilitator	Attendees	Purpose	Outcomes
<b>Strategy Development Workshop</b> (2 <sup>nd</sup> May 2013)	Lisa McKoy, Local Logic Place	-Wodonga Council -WHGNE (x4 representatives) -Mitchell Shire Council -Victoria Police -Gateway Health -Nexus -Strathbogie Shire Council -NESAY (x2 representatives) -Murrindindi Shire Council	-Identify target population -Identify key settings applicable to target population -Identify key actions/strategies directed to target population and settings	Identification of -Key partners -Key settings -Target population -Key themes for strategy actions

		-DoJR -RIC -Benalla City Council		
<b>Evaluation workshop</b> (17 May 2013)	Ann Taket, Deakin University	-WHGNE (x2 representatives) -Greater Shepparton City Council -Benalla Council	-Identify a range tools to measure project impact, including - attitudinal change, organisational change and partnership strength	Two measurement tools for project use identified -CCI -Interaction Gender Audit
<b>Social Marketing Workshop</b> (3 October 2013)	Brett de Hoedt, Hootville Communica- tions	-WHGNE (x4 representatives) -Wodonga Council -Strathbogie Council -Victoria Police -Gateway Health	To develop a campaign brand and key messages for a regional PVAW social media campaign	Development of the campaign brand "Courageous Conversations"

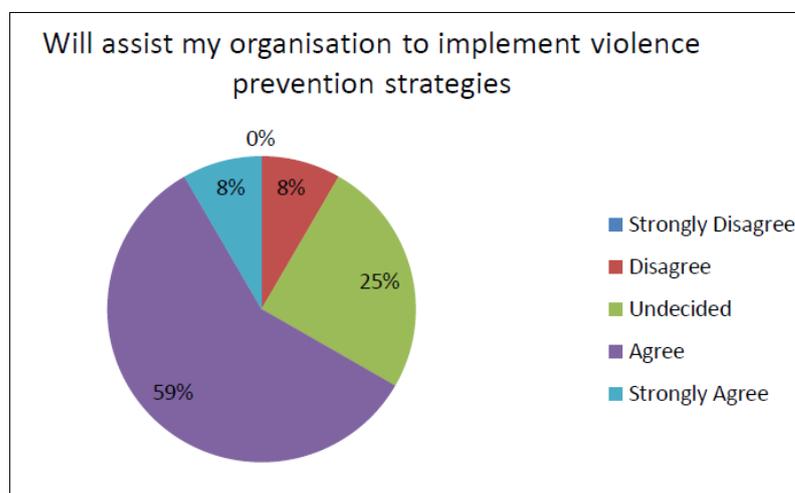
## Strategy launch celebrated with the VicHealth Leadership workshop, November 21, 2013

On the 21st of November 2013, the *Hume Region Preventing Violence against Women & Children Strategy 2013 - 2017* was launched in Benalla, with guest speaker Phil Cleary. Cleary is a passionate advocate in PVAW, and has had a long history campaigning since his sister's murder by her partner. Thirty people attended the launch, with majority being steering committee members.

The VicHealth Preventing Violence against Women Leaders Course was held following the launch. Targeting CEO's and senior managers from across the Hume region, the course aimed to engage local leaders in dialogue about the nature of VAW and inspire effective action to prevent it before it occurs. An intended outcome was that participants would be encouraged to act as ambassadors in their local communities and organisations.

A total of 18 senior leaders from a diverse range of organisations from across the region had registered to participate, with 12 attending for the full duration of the three hour workshop.

A total of 67% agreed or strongly agreed that the training would assist them in implementing PVAW strategies (see figure right).



Participants also made recommendations to improve the course, which included; possible pre-reading, more time for workshop discussion and further examples or case studies (see Appendix 3 for more evaluation results).

## Courageous Conversations website launch, 27<sup>th</sup> August 2014

Positioned as an event to engage key stakeholders, the website was launched on the 27<sup>th</sup> of August and unveiled the CC website and Charter, as well as associated resources to assist in the implementation of the charter. The launch involved a number of activities:

- Overview of the Courageous Conversations key messages
- Presentation from Benalla Saints Vice President and Coach about the partnership and pilot with WHGNE
- Presentation from Alpine Health CDW on the Gender Audit project
- Workshop: Becoming a Male Ally in Challenging Men's Violence against Women: Theory, Politics and Practice (open to professionals)
- Workshop: How to become an ally in challenging VAW (with Benalla Saints)

A total of 40 professionals from health, local government, and community services attended the launch. A feedback form was completed by 33 participants on the day (82.5% response rate) (see Appendix 3). A follow up evaluation survey was sent to participants one month after the event with a 61% response rate (n=20). Results were promising and showed positive intentions from participants:

- 75% (n=15) recommended colleagues and peers visit the Courageous Conversations website
- 95% (n=19) discussed the information and resources received with peers and colleagues
- 80% (n=16) had thought about the way in which they interact with men, women, boys and girls
- 70% (n=14) had become more conscious of sexism and gender stereotypes
- 50% (n=10) said there were changes they would like to make to their organisation
- 35% (n=7) had implemented changes in their organisation since the launch
- 35% (n=7) had taken the Courageous Conversations Charter to their organisations

## Workshop: Becoming an Male Ally in Challenging Men's Violence against Women: Theory Politics and Practice, August 27, 2014

Thirty two participants attended the workshop facilitated by professor Bob Pease, which aimed to increase participants' knowledge of PVAW and provide evidence and strategies to support the engagement of men in PVAW. Professor Pease conducted a timeline activity where all males were invited to identify periods in time in which women were subjected to discrimination, sexism, violence, abuse and disrespect. A powerful reflective exercise, many of the men identified a substantial number of historical event, and also a number of personal experiences with women that were close to them. During this activity, all female participants sat outside the circle and observed. The remainder of the workshop explored PVAW frameworks at an academic level, discussed patriarchy and examined the engagement and involvement of men in PVAW.

An evaluation feedback sheet was completed immediately post the workshop, by 31 of the 32 participants (see Appendix 3). Participants were asked to identify actions they would like to take as a result of the workshop. Some responses provided were:

- *Naming men's violence-engaging men to help create a community shift and change*
- *Use my professional position to provide support, awareness and leadership about the issues to community groups and organisations that aren't currently involved*
- *Look for opportunities to embed the "CC" message into existing programs and seek avenues in community to promote*
- *To engage my male colleagues and family members to have the 'courageous conversations' with their male peers*

Valuable aspects of the workshop were identified by participants:

- *The exercise was incredibly powerful and a great opportunity to be reflective. Really enjoyed Bob's presentation on masculinity*
- *Some of the discussion and teasing out of issue complexity was very useful. Refreshing to have an academic perspective*
- *Much clearer thinking about masculinity and strategies to engaging men to gain this understanding*

Participants also identified a number of issues and concerns relating to the workshop including:

- Lack of discussion on preventative measures, including evidence based programs
- Workshop was too academic and not action focused
- Presenter was not appropriate for the audience/target audience was not clear
- Female respondents felt excluded from the workshop

Long-term impacts of the workshop were analysed as part of the projects summative evaluation and are discussed in detail in the external evaluation report.

## Workshop: How to become an Ally in Challenging Violence Against Women, August 27, 2014

Fifty members of the Benalla Saints Sports club attended a workshop on the 27<sup>th</sup> of August. Participants included both males and females, with the age group spanning 15 – 50 years.

The same timeline activity was conducted as in the professionals' workshop, inviting male participants to examine their own male privilege, personally reflect on the injustices women have faced, and record it on the timeline. Examples were identified from the sporting sector and popular media. Once participants had exhausted all the examples they could think of, there was silence. Professor Pease challenged this silence, expressing he was disappointed with the level of responses that were brought forward and the lack of contribution by some members. This caused a degree of defensiveness from some of the Saints, articulating that in comparison to other club activities the engagement level in this activity was quite high, and the males had contributed all they could. This then generated into a discussion regarding level of equality within the club. The activity did not have the same intended impact as it did earlier with the male professionals, which led to further analysis and reflection by WHGNE project team

WHGNE provided feedback to the Saints following the workshop, acknowledging that the activity may not have been appropriate for their members, and their knowledge level. On 16<sup>th</sup> March 2015, a meeting was held between WHGNE and the Benalla Saints to discuss the Workshop. The Saints acknowledged that there had been a level of unease, as some members felt confronted during the workshop. Despite this, the Saints were still enthusiastic to remain involved with the campaign, and

utilised the meeting to discuss potential activities throughout the season. It was agreed that future guest speakers would need to resonate with the members of the club, and therefore speaker from the Sporting sector would be more appropriate. This is discussed in further detail in Key Findings: Objective 3.

## Bystander workshop, November 12, 2015

The Bystander phenomenon was a priority action of the regional PVAWC strategy and attracted much interest from steering Committee members due to its practical application. On the 12<sup>th</sup> of November, WHGNE hosted a Bystander workshop, facilitated by Rodney Vlasis from No To Violence (NTV), at the Benalla Lakeside function centre.

The purpose of the closed workshop was for project partners to evaluate the workshop, and be involved in the development of a Bystander training package suitable for local needs. Partners critiqued how the training could be beneficial to their organisation, sector and communities, and what would add value and strengthen local application.

Thirty-one people attended the training representing the following sectors; Local Government, Community Health, Victoria Police, Sporting Assemblies, Department of Justice and TAFE. Participants were invited to complete an evaluation sheet and participate in a facilitated discussion, to identify positive aspects of the training and what could be improved. Out of the 24 responses received, it was found that:

- 79% (n=19) of participants confirmed the training had increased their ability to identify sexism and gender stereotyping
- 8% (n=2) of participants reported no increase in ability to identify sexism and gender stereotypes, due to possessing strong skills in this, having participated in training previously
- 91% (n=22) of participants said they felt more confident to take action when confronted with sexism and gender stereotyping
- 75% (n=18) reported the training had provided them with practical skills to take Bystander action

In order to make the workshop more relevant and applicable to organisations, participants provided responses such as;

- *Information on background gender inequalities this training session was good for those who understand F.V already*
- *Context – stats, gendered nature of violence, prevention, visual aids, theory behind bystander phenomenon, website*
- *Would be great to have some take away handouts on where to get further info and resources*

This evaluation feedback was incorporated into the development of the Courageous Conversations Bystander training package.

## Courageous Conversations bystander workshops, August 2015

### *Development*

A project team consisting of two workshop facilitators, two WHGNE PVAW Health Promotion Officers and one consultant developed the Courageous Conversations Bystander workshop. The following resources were used to develop a training package specific to the rural context, including:

- VicHealth “*Stepping In: A Bystander action toolkit to support equality and respect at work*”, A resource for State Sporting Associations (2014)
- No To Violence Bystander Preventing Violence against Women Training (based upon the training package that Rodney Vlasis delivered in November 2014)
- Mentors in Violence Prevention (MVP)

Evaluation of the NTV Bystander workshop was of significant value in the development of the Bystander training package. The team also utilised adult learning principles, and experience in delivering Family Violence Awareness training in the development of the Bystander package.

### *Delivery*

The Courageous Conversation Bystander Roadshow was delivered across three regional centres in the Hume, facilitated by two female consultants. The three-hour workshop aimed to provide participants with:

- Understanding of the bystander effect and be empowered to take personal action;
- Comprehension of the concepts of sex and gender;
- Recognition gender inequities and sexism;
- Understanding of the determinants of violence against women; and
- Focus on courageous conversations that can change environments, cultures and structures.

The workshops were open to professionals and members of the community, though the vast majority of participants that attended were professionals. All participants that attended the training were provided with a resource pack of Courageous Conversations Resources (see Appendix 2).

WHGNE project team adapted the content as needed following each workshops, taking on board participant feedback and the project team’s own perceptions and critique (see Appendix 3 for detailed evaluation results). The below table summarises the delivery and adaption of the Courageous Conversations Bystander Workshop.

<b>Location</b>	<b>Shepparton</b>	<b>Wodonga</b>	<b>Seymour</b>
<b>Date</b>	August 6, 2015	August 13, 2015	August 20, 2015
<b>Attendees</b>	24 (2males)	30 (5 males)	23 (2 males)
<b>Completed Evaluations</b>	18	28	22
<b>Workshop Adaptions</b>	-Improved handouts readability -Adapted workshop content to enhance participant discussion and involvement based upon adult learning principals -Included activity asking participants to complete continuum of VAW, exploring the links between gender stereotypes and murder	-Altered the delivery of the first activity, exploring the continuum of VAW -Adjusted final small group activity to include 4 different settings	

	-Altered small group activity, providing different scenarios for bystander actions		
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This developmental approach to improve the workshop content correlated with increased value reported by participants from 77% to 90% between the first and third workshops.

<b>Workshop</b>	<b>% Participants ranking the workshop as Valuable or Very Valuable to their work</b>
Shepparton	77% (n=14)
Wodonga	68% (n= 19)
Seymour	90% (n=20)

Pre and post evaluation of the workshop was conducted via Survey Monkey with registered participants to assess their knowledge of VAW, attitudes towards gender roles and whether they had engaged in Bystander action. One month after each workshop the same survey was distributed, with the addition of four questions, included to obtain views on the training package. The table outlines responses received.

<b>Location</b>	<b>Shepparton</b>	<b>Wodonga</b>	<b>Seymour</b>
<b>No. participants completed pre survey</b>	14	14	14
<b>No. participants completed post survey</b>	8	11	11

## Courageous Conversations bystander workshops in Alpine, October 2015

In addition to the roadshow, the Courageous Conversations Bystander workshop was delivered in the Alpine Shire, as part of the community's resilience month in October 2015. This training was open to professionals and members of the community. No further adaptations to the workshop content were made following the delivery of these training sessions. The tables below detail the number of attendees;

<b>Location</b>	<b>Bright</b>	<b>Mt Beauty</b>
<b>Date</b>	October 13	October 27
<b>Attendees</b>	14 (2 males)	12 (1 male)
<b>Completed evaluations</b>	14	11

The table below summarises how valuable participants felt the workshop was to their work

<b>Workshop</b>	<b>% Participants ranking the workshop as Valuable or Very Valuable to their work</b>
Bright	85% (n= 12)
Mt Beauty	100% (n= 11)

The same method of pre and post surveys were used to evaluate the training. The following number of responses were received;

<b>Location</b>	<b>Bright</b>	<b>Mt Beauty</b>
<b>No. participants completed pre survey</b>	8	10
<b>No. participants completed post survey</b>	5	8

In total 103 participants attended the workshops in Alpine and the regional roadshow. A consistent theme among participants was the lack of men attending the training, this is discussed in further detail in Key findings: Objective 3.

## Objective 4: Promote and communicate key messages and tools that build respectful relationships skills and influence social norms, attitudes and behaviours

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### Key Achievements

- Development and promotion of the Courageous Conversations campaign, including a total of nine resources produced for use by professionals and communities;
  - Development of the Courageous Conversation website, providing a central hub for gender equity and project resources, with a total of 6,337 page views (dated January 15, 2016);
  - Development of the Courageous Conversations Facebook and Twitter page, with increased engagement and a combined total of 548 followers; and
  - Ten councils promoted in video stories during global 16 Days of Activism campaign in November 2015, showcasing an array of PVAW initiatives across Hume region.
- 

### Courageous Conversations

A social marketing campaign was developed to raise awareness of the drivers of VAW present in society and engage the community in preventative actions. The Courageous Conversations campaign was developed at the Social Marketing workshop on October 3, 2013. Those present at the workshop deliberated the key messages of the campaign and the intended target audience, resulting in the campaign brand “Courageous Conversations” and tagline “Let’s talk about respect and equity”.

The campaign, branding and tagline was further refined with feedback from the project team and the steering committee. The project coordinator engaged a graphic designer to create a logo for the campaign, a short list of potential logos was generated, with steering committee members able to vote for their preferred logo that would be best engage with the community and reflect the campaigns key messages.

This logo formed the trademark of the Courageous Conversations campaign, and all project resources and materials were branded with Courageous Conversations, including the website, the Bystander training and organisational tools. Courageous Conversations also provided a platform to engage with community members and encourage them to reflect on their own lives, and to take action, both professionally and personally.

### Website development

The Courageous Conversations website reflected the Charter principles and aimed to provide a central hub for gender equity resources and practical information, categorised into four themes;

<b>Educate Yourself</b>	<b>Check Your Own Environment</b>	<b>Take Action to Promote Cultural Change</b>	<b>Have a Courageous Conversation</b>
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Information and resources on -gender -gender stereotypes -the negative impact of stereotypes -the correlation between gender stereotypes and VAW	Information and resources to support individuals and organisations to -review their organisation with an equity and gender lens -actions they can take to promote respect and equity within their organisation	Resources and case studies demonstrating how others had made positive changes	Resources and tips to support individuals to have Courageous Conversations on respect, equity, sexism etc.
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Working with a consultant, a WordPress site was developed as a long-term and sustainable approach with WHGNE committed to monitoring and maintaining the website on an ongoing basis beyond the project period.

The steering committee had input into website development, particularly the LGPVAW 12, and provided advice on what information would be valuable to attract and engage local councils in PVAW.

## Website maintenance and improvement

The site has seen a number of changes since its development in July 2014, with particular emphasis on simplifying the layout and the language to enhance its user friendliness. A consistent challenge has been the need to achieve a balance between uploading appropriate, factual and evidenced based information, whilst at the same time making this information engaging and user friendly.

Gender equity is not a common or popular topic among community members, and can be a challenging topic to communicate effectively. Some challenges have been identified below;

Website Aspect	Challenge	Solution
'Join the Campaign' feature, allowing site visitors to sign up to the charter	'Join the Campaign' feature was initially designed to track those who had adopted the charter and further engage them with ongoing resources, in the form of blogs or toolkits. This feature was not being utilised by site visitors and risked being viewed as a token gesture with individuals registering, yet doing little to engage in PVAW or with the charter. Blogs and emails were found to be an ineffective method to engage with registered users, as many are time poor and have limited capacity.	Remove 'Join the Campaign' feature
Project workers lacking technical skills and capacity	Website maintenance and development required technical skills to upload and present content that was inviting and engaging. The Project Coordinator possessed limited skills in WordPress, and	Employ Digital Media consultant to support the development and maintenance of the website

	time was better utilised on other project priorities	
Utilising images that promote diversity and do not reinforce gender stereotypes	WHGNE were very conscious of using images that reflected the diversity of our communities and did not perpetuate or reinforce gender stereotypes. When seeking photos for use of the website, the following options were investigated: -Hire a photographer to provide a suite of photographs for website use (cost-prohibitive) -Buy Photo Stock Images (often lack diversity, propagate gender stereotypes and have a corporate feel) -Take own photos for the use of the website (issues of image quality and time consuming)	Employ Digital Media consultant Consultant take photos of local people engaged in the campaign and utilise for website

Utilising feedback and consultation with stakeholders, digital media consultants and community members, the website was streamlined and updated from the original design (see table below). Whilst the content of the website didn't alter significantly, there was a large emphasis on localising the campaign, using images and stories of local champions and organisations, as well as simplifying the language to adopt a more community friendly and inviting tone.

<b>Have a Courageous Conversation</b>	<b>Get Your Organisation on Board</b>	<b>Learn More</b>	<b>Case Studies</b>
Resources and tips to support individuals to have Courageous Conversations on respect, equity, sexism etc.	Information and resources to support schools, sporting clubs, workplaces and local government to -review their organisation with an equity and gender lens -actions they can take to promote respect and equity within their organisation	Information and resources to educate readers on -gender -gender stereotypes -the negative impact of stereotypes -the correlation between gender stereotypes and VAW	Case studies of local organisations and ambassadors undertaking work to promote respect and equity

The website's evolution has correlated with an increase in engagement, from 265 page views in October 2014 to 865 in November 2015. See Appendix 3 for website data.

Throughout continual modifications, the Courageous Conversations website has been a valuable resource, with its reach and impact seen beyond the Hume region. The Women's Cottage in Hawkesbury, NSW sought approval from WHGNE to implement the campaign within their community, after being inspired when visiting the Courageous Conversations website, as evidenced in email excerpt below:

*"We would like to develop our own Hawkesbury's Courageous conversations inspired by the project.... Basically we are wanting to know if is ok to use the phrase as in 'Hawkesbury's Courageous*

conversations’ and use the charter and resources on your website referencing your project as the inspirations for ours” (22<sup>nd</sup> April, 2015).

WHGNE have continued communication with the Women’s Cottage, remaining informed of the Hawkesbury Courageous Conversations progress, further described in the email excerpt below.

*I have attached to this email some “acts of courage” cards the women’s cottage developed for the launch of Hawkesbury’s Courageous Conversations. We have printed them as business cards, intended as prompts and encouragement to inspire courageous behaviour. Please feel free to use them (30<sup>th</sup> July, 2015).*

The Women’s Cottage was further inspired by the Courageous Conversations Bystander training, and is looking at implementing it in their local community.

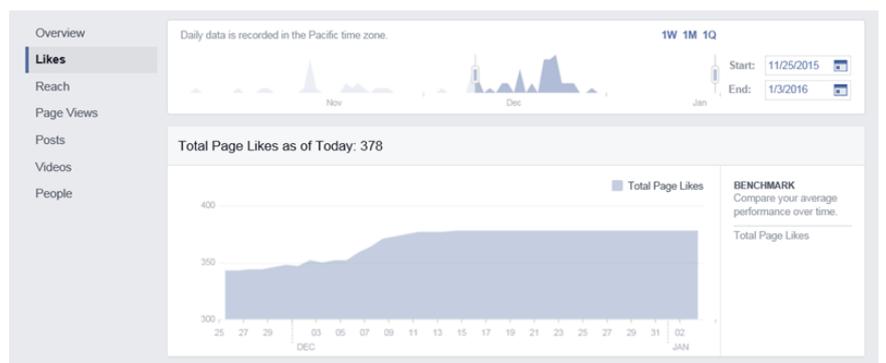
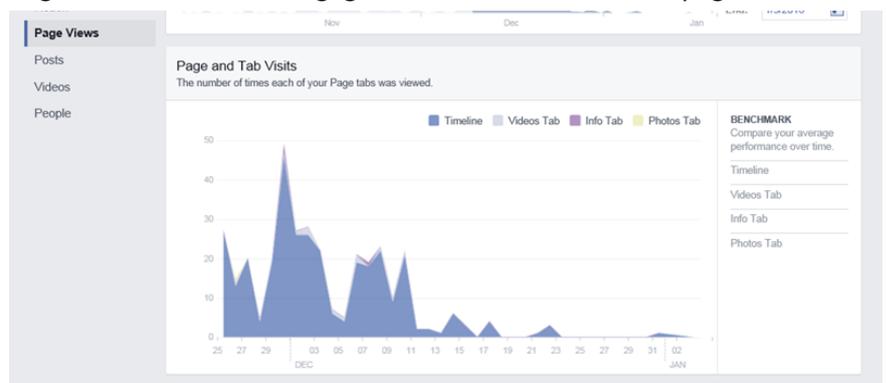
## 16 Days of Activism

The 16 Days of Activism is a global campaign beginning on November 25, coinciding with the International Day for the Elimination of Violence against Women, and ending on December 10 (UN Women, 2015).

A LG PVAW12 initiative, a digital marketing consultant was engaged to lead and co-ordinate a local 16 Days of Activism campaign. All 12 council in the Hume region were invited to participate in the local campaign to demonstrate how Hume region councils are working together to Prevent Violence against Women, under the banner and support of the LG 12 PVAW. The marketing consultant met with councils, one health service and one sporting club and filmed ambassadors discussing the actions that had been undertaken, or that were planned in the near future. Over each of the 16 days of the campaign, one council or organisation’s story about PVAW was featured in short videos (see Appendix 4).

Videos were promoted and uploaded onto the Courageous Conversations website and Facebook page. The Facebook page received a significant increase in engagement, with an increase in page likes and page visits, evidenced in the graphs.

The Courageous Conversations campaign was a consistent theme evident in video stories, demonstrating the broad impact the social marketing campaign has had across Hume region communities.



## Objective 5: Undertake research, evaluation and monitoring to ensure continuous improvement and contribute to the evidence base

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### Key Achievements

- Production of a literature review and PVAW policy scan reviewing the PVAW climate;
  - Completion of mapping process, identifying 23 existing PVAW initiatives in the Hume region mostly focused on early intervention;
  - Community Capacity Index used to analyse partnership development, which identified increased capacity of the steering committee to collectively solve problems and source infrastructure; and
  - Formative and Summative evaluation undertaken by the external evaluation team.
- 

### Mapping process

A mapping process was completed by steering committee to identify existing primary prevention activities being undertaken in Hume region, in relation to the prevention of violence against women. A necessary initial activity, the purpose was to gain an understanding of current PVAW activities, in order to prevent duplication and offer opportunity for alignment under the PVAWC strategy.

Steering committee members completed a simple matrix for their respective local government area, utilising local knowledge and networks to inform and complete the mapping tool. Any missing or incomplete data was followed up by the project coordinator. The mapping exercise was completed between March and May 2013, allowing sufficient time for collection of data, particularly for new members joining the steering committee. Program information was collected from 13 different organisations on a total of twenty three initiatives. Four additional programs were identified, but were excluded as they did not meet the prevention criteria.

The mapping identified four broad areas of strategies and programs, including; Parenting Programs, Relationship programs, White Ribbon Day activities and Local Government actions.

A consistent theme across the programs was a lack of evaluation. Only one program had undergone a rigorous evaluation, which showed inconclusive evidence of effectiveness. A lack of focus on addressing the determinants of violence against women was another consistent theme as minimal programs focused on gender roles, or healthy and respectful relationships among intimate partner relationships. Some parenting and relationships programs focused on reconnecting individuals with key services in the community, whilst others focused on building interpersonal skills, such as leadership and communication skills. Two programs that did address the underlying drivers of violence, had not been evaluated and was unable to demonstrate effectiveness.

White Ribbon Day activities adopted various evaluation approaches and collected different impact measures. Evaluation of community awareness raising activities are difficult to capture effectively, with measuring percentage of community members who are able to recall campaigns key messages is both time and resource intensive. Some activities chose to record the number of attendees as an

evaluation measure, whilst other events measured participant’s knowledge and awareness of family violence pre and post. However, none of the events or evaluation measures incorporated the drivers of violence against women in their activities (such as speakers presentations or resources), or were integrated as a component of evaluation.

When this mapping process was first undertaken in 2013 there were only three local governments in the Hume region that had identified involvement in PVAW, such as including PVAW in Public Health and Wellbeing Plans, holding International Women’s day events, and participation in the MAV PVAW network. These events and strategies had not been evaluated, and the level of success and impact at a community level was unable to be determined.

As the first activity of the steering committee, the mapping process was valuable for understanding the context of PVAW locally, and produced the following outcomes:

- Educative process for steering committee members, and demonstrating the difference between early intervention and primary prevention
- Highlighted the lack of primary prevention initiatives, and opportunity to develop a local and collaborative approach through the regional PVAWC strategy
- Showcased community leaders, such as Strathbogie Shire who had been engaged in this space for a number of years
- Identified lack of resources and capacity , providing impetus and drive for steering committee to work together as a strong partnership to share resources and learnings

### RE-AIM workshop

The RE-AIM evaluation workshop was held with steering committee members to develop an evaluation plan and identify data that needed to be collected in order to evaluate strategy components. The project external evaluator facilitated the workshop on February 20<sup>th</sup> 2014 with 13 participants.

<b>The RE-AIM framework for evaluating the public health impact of health promotion interventions</b>		
<b>Dimension</b>	<b>Area for exploration</b>	<b>Level</b>
Reach	Absolute number and proportion of the target population that participated in the program and the representativeness of participants	Individual
Efficacy	Impact on important outcomes, including potential negative effects, quality of life and economic outcomes	Individual
Adoption	Absolute number, proportion and representativeness of settings and intervention agents who are willing to adopt program	Organisation/individual
Implementation	Extent to which the program is implemented as intended in the real world	Organisation/individual
Maintenance	Extent to which a program is sustained over time	Individual/organisation

The RE-AIM framework (see figure above) is used to evaluate the public health impact of health promotion interventions. The framework explores five different dimensions of Reach, Efficacy, Adoption, Implementation and Maintenance. Data collection processes were examined by steering committee for three key elements of the strategy;

1. Local government/community
2. Sporting clubs
3. Charter

Whilst not all elements of the strategy could be examined in the workshop timeframe, it allowed participants to explore methods of data collection revealing some common themes; particularly in pre- and post-attitudinal surveys, and pre- and post-organisational audits/review. This was particularly useful for informing the gender audits that were undertaken by Alpine Health and Murrindindi Shire Council. See Appendix 3 for workshop findings.

## Gender Attitudes Survey

The Gender Attitudes Survey was adapted from the NCAS, created by VicHealth in partnership with other key stakeholders. The NCAS aims to gauge community knowledge of, and attitudes towards, violence against women. The NCAS addresses four factors involved in violence against women and its prevention:

- Community knowledge of violence against women;
- Attitudes towards violence against women;
- Attitudes towards gender roles and relationships; and
- Responses to witnessing violence and knowledge of resources.

(VicHealth, 2014)

The Gender Attitudes Survey employed at Alpine Health and Murrindindi Shire Council was created from the NCAS, with questions drawn from the attitudes towards gender roles and relationships section. The project external evaluator had recommended the survey, as it provided a comparison to the Australian population and was a validated measurement tool.

The purpose of implementing the survey at two points in time (pre and post) was to determine whether conducting a gender audit across an organisation has an impact on individual staff attitudes. There were a number of practical challenges associated with the use of this survey at both Alpine and Murrindindi, which are discussed in Key findings: Objective 2.

## Community Capacity Index

The CCI was the partnership analysis tool employed in the project, identifying the extent of capacity available in the steering committee, and measuring change over time. As the CCI is a flexible tool, the steering committee was allocated responsibility for deciding the method of implementation in 2013. The same procedure was followed again in 2015 and involved:

- Viewing each SC member as a key informant who would complete the index from their particular perspective as a key network member;
- If members want they could discuss questions with others within their own organisation, so it might be filled in collaboratively with a team; and
- Where two responses from one organisation are received, they have been merged as appropriate in the analysis stage.

Recognising the degree of staff turnover in the steering committee, members who had recently joined were encouraged to consult with others, where possible. Time was dedicated to explaining the CCI at steering committee meetings in both 2013 and 2015. The external evaluator participated via teleconference for the 2015 meeting, allowing for further explanation and to answer questions from steering committee. Survey Monkey was used to collect the data and the survey remained open for four weeks in both 2013 and 2015. During the time the data was being collected, telephone and email support was available from the external evaluator.

The CCI was completed by the steering committee members in August 2013 and followed up in August 2015. The below table indicates the number of participants and organisation in 2013 and 2015. There were six organisations that had responses in both 2013 and 2015. Results are further explained in Key Findings: Objective 1.

	<b>2013</b>	<b>2015</b>
<b>No. of organisations</b>	13	9
<b>No. of participants</b>	14	12

## Formative evaluation

Formative evaluation of the project covered the first year of project activities from March 2013 to February 2014. This evaluation was employed to provide early feedback on project components and processes, identify opportunities for further enhancement of outcomes, and ascertain appropriate action to be taken.

Four interviews (three face-to-face and one phone) were conducted between February and March 2014. Informants came from local councils and health organisations and were located in different local government areas. Those who participated in the interviews had differing levels of involvement in the project. One informant had been involved from the outset and consistently throughout the course of the project, whilst the other three informants had been less involved with two informants commencing their involvement in the previous six months.

### *Findings*

The findings from the inductive analysis clustered around six interconnected themes: commitment; breadth of work; ownership; participation; communication; and sustainability (see Appendix 3).

The formative evaluation report produced a number of suggestions, which were considered by the steering committee. All agreed suggestions were actioned and implemented, including;

- Simplification of use of terms
- Provision of list of key terms and acronyms
- Organisations reviewed methods for enhancing steering committee participation, for example multiple representation from each organisation
- Review communication within the project, aiming for clear and regular communication mechanisms
- Clear focus on elements of strategy to be prioritised in the time remaining within the DoJR funded project.

A detailed description of methods and findings can be found in External Evaluation Report

## Strategy revision

In order to ensure progress and sustainability of the project, the steering committee conducted a strategy revision to ensure it reflected priorities, current actions, and future direction. Steering committee members were guided by two key questions;

- What have we achieved so far?
- Where to next; what are the future priorities for action in the next 12 months?

Participants identified and grouped actions under 10 themes, using the Collaboration of Community-based Obesity Prevention Sites (CO-OPS) 10 Building Blocks of Sustainability framework:

- |  |                            |
|--|----------------------------|
| 1. Planning for sustainability                   | 6. Building capacity       |
| 2. Evidence of the need                          | 7. Policies and procedures |
| 3. Organisation support                          | 8. Evaluation              |
| 4. Community engagement and partnership building | 9. Evolving and adapting   |
| 5. Program champions/heroes                      | 10. Funding                |

(CO-OPS, 2013)

The overall structure of the strategy did not alter, however, objectives were added to give focus and direction, and organisations were allocated responsibility against specific strategy actions. Some strategy actions were removed as they were no longer regarded as a priority, or there was reduced capacity to realistically achieve these actions. Two of the project aims were modified to better reflect current actions and priorities;

- promoting equal and respectful relationships between men and women (~~during their transition to parenthood~~)
- build the capacity of (~~male~~) leaders in preventing violence against women

## Sustainability plan

The Program Sustainability Assessment Tool v2 instrument (Washington University, 2013) was used by the steering committee to develop the Sustainability Plan and enabled the committee to:

- Assess the strategy's current capacity for sustainability across a range of specific organisational and contextual factors
- Identify sustainability strengths and challenges
- Use the results to guide sustainability action planning

A total of 11 Committee members participated in completing the Program Sustainability Assessment Tool, scoring the regional PVAWC strategy against eight themes, as identified in table below:

Theme	Capacity Score (Range 1-7, where 1=to little or no extent; 7=to a great extent)
Environmental Support	4.2
Funding Stability	1.8
Partnerships	5.0
Organizational Capacity	5.8
Program Evaluation	4.8
Program Adaptation	6.0
Communications	3.8

Strategic Planning	3.6
<b>Overall Capacity for Sustainability</b>	<b>4.4</b>

Endorsed in December 2014, the Sustainability Plan identified the following strengths and elements for improvement;

<b>Project Strengths</b>	<b>Elements for Improvement</b>
Organisational Capacity	Funding Stability
Partnerships	Communication
Program Adaption	Strategic Planning

Key strategy actions that were prioritized in the Sustainability Plan (Appendix 3) and drove focus for steering committee activities in 2015 were:

- Courageous Conversations website
- LG PVAW 12 (Local government committee)
- Bystander training
- Courageous Conversations resources
- Courageous Conversations Facebook and Twitter pages
- Partnership with Regional Sporting Assemblies
- Gender Equity Plans for organizations

## Summative evaluation

The summative evaluation was based on interviews with a sample of those that partook in the different components of the regional PVAWC strategy. The summative evaluation explored the strategy actions with stakeholders, examining their impacts and outcomes. There were three different groups of participants who were invited for interview:

1. Steering committee members and members of local government preventing violence against women network;
2. Workshop and training session attendees at events run by WHGNE;
3. Users registered on website run by WHGNE.

A fourth group, consisting of staff members of Murrindindi Shire Council and Alpine Health was to be included, investigating the gender audits undertaken at both organisations. Due to data collection timeframes it was not possible to interview this group as the action plans were still being completed in November 2015. Instead a separate study will be undertaken by a masters student from Deakin University in mid-2016; once the gender action plans have been implemented for at least six months.

In all 19 people consented to interviews across from the first two of the three groups identified above; none of the small number of users registered on the website came forward for interview. A further four people contributed extended answers to the open questions on the CCI, and thus has been treated as a form of interview data.

A summary of participant demographics is provided below;

<b>Characteristics of interview participants Gender</b>	
Female	19 (83%)

Male	4 (17%)
<b>Sector</b>	
Community member	3 (13%)
Community services	2 (9%)
Health	8 (35%)
Local government	7 (30%)
Justice	3 (13%)

The methods and findings from the summative evaluation are discussed in the external evaluation report.

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# Key Findings

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This section presents the key findings attained from project activities, and correspond to the regional PVAWC strategy's five key objectives:

1. Partnerships
2. Supportive Environments
3. Capacity Building
4. Communications & Advocacy
5. Research and Building the Evidence Base

## Objective 1: Partnerships

### Steering committee partnership

As the steering committee was the central driver of the project, it was necessary to measure the strengths and changes of this partnership over time. The CCI was used to evaluate and analyse the partnership. Comparison of responses between 2013 and 2015 revealed a mixed pattern of results with major strengths in two key domains – Problem Solving and Infrastructure – and are summarised below;

Domain	Capacity Increase/Decrease	Key Findings
<b>Network partnerships</b>	Decreased capacity	While decreased overall, agreement there is an increased capacity in having a reservoir of leaders within the community who are interested in PVAW Particular challenges remain regarding developing skills and knowledge of existing leaders
<b>Knowledge transfer</b>	Mixed views	Knowledge transferred through the steering committee and when developing the strategy identified as achievement
<b>Problem Solving</b>	Increased capacity	Evidence of increased capacity to solve problems and recognition of the strengths of members inside and outside the steering committee
<b>Infrastructure (policy, financial, human and social investments)</b>	Increased capacity	Strong increase in capacity in policy and social investments Human investments, indicates further work is required regarding supporting emerging leaders Staff time and contribution in the steering committee was seen as a large financial investment by organisations

These findings demonstrate the complexities involved in collaboration and partnership work, and that such complexity needs to be clearly understood by potential project partners at the beginning of any collaboration (Douglass, Webb and Lamont, 2004).

Research has shown that group formation and development typically 'occurs through a sequence of relatively predictable phases or stages' known as Forming, Storming, Norming and Performing model

developed by Bruce Tuckerman (Douglass, Webb and Lamont, 2004). The table below summarises the four phases of the model, with examples from the regional PVAWC strategy.

<b>Partnership phase</b>	<b>Phase features</b>	<b>Example in Hume Region PVAWC strategy</b>
<b>Forming</b>	<i>“Why are we here?”</i> Members are uncertain about roles, who is in charge, group goals	Development of steering committee; bring together stakeholders Development of TOR and MOU’s Development of regional PVAWC strategy
<b>Storming</b>	<i>“What is my role here”</i> Individuals test leaders policies and assumptions as they try to determine how they fit into power structures Subgroups take shape	Confusion regarding strategy implementation and members roles and responsibilities LG PVAWC 12 developed
<b>Norming</b>	<i>“Can we agree on roles and work as a team”</i> Leaders challenge the group to resolve power struggles Team spirit is experienced when members have found their roles	Revision of Regional PVAWC Strategy EOI for organisations to undertake gender audits
<b>Performing</b>	<i>“How can I best perform my role?”</i> <i>“Can we do this properly?”</i> Conflicts and job boundary disputes handled constructively Cohesiveness and personal commitment to group goals	Supporting CDW to achieve goals and complete gender audit, resolving challenges Support and input regarding the development of Courageous Conversations resources and Bystander Workshop

The CCI findings could be further analysed against these stages and demonstrated that, at the end of the project, the steering committee had reached the performing stage. The Storming Stage was exhibited in the second year of the project, as members were somewhat uncertain regarding their role in the strategy and how implementation would occur. Committee members challenged the group to clarify roles and responsibilities so that actions could be accomplished, which moved the committee into stage three; Norming (Kreitner & Kinicki 2013). This increased capacity to collectively problem solve, as identified in CCI results, led to a climate of open communication, noted as a feature of stage four; Performing (Kreitner & Kinicki 2013).

In addition, CCI results found an increased capacity for infrastructure, particularly social and policy investments. Policy investments refer to activities that achieve agreement about direction the network will take to achieve outcomes, and social investments involve the commitment to building trusting relationships between network partners (Bush et al, 2002). Cohesive agreement on project direction and trusting and cooperative relationships are both key elements of the Performing stage.

## Engaging project partners as champions

Engaging project partners was a continual process that occurred across the entire life of the project. A cumulative approach, rather than a linear step-by-step process, was employed to capitalise on momentum and buy in, as more stakeholders become aware of the project and campaign. Engaging project partners and stakeholders in PVAWC can be a slow process, as everyone is at different points

of understanding of PVAW and everyone has their unique experience they bring to this issue (Maribyrnong City Council, 2011).

The Regional PVAWC steering committee was comprised of many PVAWC ambassadors that possessed a solid understanding of prevention, and the correlation between VAW and gender inequity. The Northern Interfaith Respectful Relationships Project recognised *“the sheer physical presence of a member of staff who is an advocate for primary prevention of violence against women cannot be underestimated (2012)*. This perception corresponded with the experiences of this project. Steering committee members were able to act as leaders, championing the PVAWC message and driving action within their organisation. Champions were able to identify synergies of the PVAWC strategy with other aspects of their organisation’s work, and showed keen interest in reviewing their organisation’s programs with a gendered lens. However, a focus on individual impact is fraught with risk, as *“when key champions and leaders across the organisation move onto other employment, the gap left needs to be smaller than the sum of PVAW influence”* (Maribyrnong City Council, 2011).

Due to the transient nature of work in the rural health sector, when key champions left their organisation this required the engagement process to start again. Despite organisational commitment to participate in the regional PVAWC strategy, it wasn’t always possible to identify another worker that also possessed a strong understanding of PVAW, and the same level of passion and enthusiasm. This generally caused the organisation’s participation in the regional PVAWC strategy to diminish, remaining informed via email, yet not actively contributing.

## Capacity of stakeholders

Despite the passion, enthusiasm, and eagerness of steering committee members to be involved, at times this conflicted with capacity of stakeholders and project partners. PVAW was one of many priorities for many organisations. Stakeholders had capacity to attend meetings and workshops yet their ability to engage in and complete PVAW actions back at their organisation was limited. This was particularly evident in the local government group, who were an immensely passionate group of stakeholders, yet held large portfolios with multiple priority areas. PVAW is one issue in the community which local government addresses, and each council places varying degree of significance on this issue. There were also a small number of senior managers and leaders present on the committee, and therefore the members had to be granted approval for their participation and level of contribution.

According to Our Watch, (2015) *“primary prevention requires significant investment in workforce and organisational development and capacity building, both to meet existing demand for prevention activities in various settings safely and effectively, and to expand the reach and take-up of initiatives”*. Without the required level of investment, the primary prevention sector does not have sufficient capacity to be able to effectively grow and mature the necessary preventative initiatives further within communities.

## Objective 2: Supportive Environments

### Courageous Conversations Charter

In developing the Courageous Conversations PVAWC Charter it was intended that organisations would formally endorse and adopt the charter to signify their local commitment to PVAW. As Ballarat City Council had previously led the successful promotion and implementation of a charter within their community, a similar approach was considered by LG PVAW12 group, where local governments were encouraged to adopt the charter in their workplace. However the group quickly identified that endorsement would require a lengthy process, and one that was not necessary, as the majority of councils had already completed a rigorous process by going through the appropriate channels and forums to endorse the regional PVAWC strategy. LG PVAW12 members acknowledged that this commitment was already a substantive dedication to the project and as the charter was featured within the strategy, going through another formal adoption process was not required. Instead, it was agreed councils could act as local champions, encouraging and supporting organisations within their community to adopt the charter. Many councils had already formally adopted Victorian Local Government Women's Charter and highlighted the actions they were committed to. It was seen as a duplication of efforts to formally endorse another charter, with similar and complimentary strategies.

Another issue identified with the charter was the concern that adoption was a token gesture and contributed little to the cultural change required to have an impact on VAW, therefore further research is required to determine if the charter has long-term impact on redressing the drivers of VAW; gender inequity and rigid gender stereotypes.

### Benalla pilot site

The projected Benalla pilot site provided many learnings regarding partnering with communities in creating supportive environments. The aim of the pilot site was to demonstrate a whole of community approach to PVAW focused on primary prevention activities. For a whole of community approach to be successful, those leading and driving the pilot needed to have a solid understanding of primary prevention and the capacity to coordinate actions. A shared understanding of *“primary prevention approaches must recognise gender inequality and gender stereotyping as key underlying factors associated with men's violence against women. To ignore the gendered nature of such violence excludes essential elements that must be tackled for effective primary prevention”* (Walden and Wall, 2014). Walden and Wall (2014) also emphasise that those responsible for the delivery of programs and training must be adequately trained and resourced.

In the early stages of partnership negotiation, two key learnings were identified:

- *Primary prevention knowledge:* Activities in the Benalla community had previously focused on raising awareness of VAW, with limited activity dedicated to addressing the causes of VAW and key determinants. Moving partners and stakeholders upstream is a big shift in way of thinking and working. Therefore the concept requires significant investment of time to effectively educate partners and develop shared understanding.
- *Capacity:* PVAW is one issue amongst many in the community. Worker roles encompassed a range of community priorities and often did not have a sole focus on PVAW. Dedicated time to addressing PVAW was difficult due to multiple competing priorities.

Having fully investigated the opportunities with partners, it was identified that a whole of community approach was unrealistic and could not be progressed at that time. The process of ensuring project partners have a solid understanding of primary prevention does require a significant investment of time. However, it was crucial to invest time and resources into exploring such partnership options, despite the pressures of project timelines. Investing this time early was also necessary in order to lay firm foundations for the partnership, and to confirm all project partners had shared vision and expectations.

Through this process, key elements required for a whole of community approach and community partnership were identified, relating to three Community Capacity Building principles:

- *Ownership*: Bottom up or grassroots practice; local people are free to decide how best to address the issues that concern them
- *Time invested in the partnership*: Investment in community capacity; Investments must extend beyond the infrastructural elements of a community, so they can resonate at the service delivery level
- *Capacity*: Aim for sustainability; Services must seek ways to sustain their own capacity so they can continue to work with communities to help address needs

(Australian Institute of Family Studies, 2013)

Despite not being able to establish the Benalla pilot site, these principles were evident in the partnership with the Benalla Saints, as outlined below;

<b>Ownership</b>	The Benalla Saints demonstrated a high level of ownership through; <ul style="list-style-type: none"> <li>- The development of the Courageous Conversations tagline “It’s a level playing field”, specific to sporting clubs</li> <li>- Courageous Conversations logo displayed on all home and away football and netball uniforms</li> <li>- Training held for leadership team and senior club members</li> </ul>
<b>Time invested in the partnership</b>	<ul style="list-style-type: none"> <li>- One meeting was dedicated to determining what the champions at Benalla Saints were hoping to achieve from this partnership, discussing some of the activities they might like to implement.</li> <li>- An MOU was developed between the parties, clearly outlining the roles and responsibilities of each partner</li> </ul>
<b>Capacity</b>	Both the key leaders – club vice president and coach – had the capacity within their roles to perform additional tasks and to instigate club activities. The vice-president was the primary contact and had flexibility and capacity to dedicate time furthering actions within the club and gaining member involvement.

## Gender audits

The Gender Audits undertaken at Murrindindi Shire Council and Alpine Health provided many learnings regarding what enables and supports the audit process, as well as common challenges experienced. The tables below consider both these factors:

<b>Factors that supported the Gender Audit</b>	
<i>Leadership support and involvement</i>	<p>“Buy-in’ by leaders and organisations is crucial in any program” and was evident at both organisations, which identified leadership support as paramount to the audit process (Holmes and Flood, 2013). This is due to:</p> <ul style="list-style-type: none"> <li>- Leaders have the authority to grant approval for the audit</li> </ul>

	<ul style="list-style-type: none"> <li>- Leaders can authorise staff time to participate in the audit. An example from Alpine Health was where a number of nursing and medical staff were unable to leave their regular duties to participate in focus groups but were supported and reimbursed to attend outside their normal shift.</li> <li>- Leadership support adds rigour to and validates the process</li> <li>- Leadership support that aligns with the organisational values and strategic direction can increase engagement from staff members. For example, both organisations had strong support from their CEOs. The CEO at Alpine Health wrote a formal letter to all employees at the organisation, outlining the audit process, the organisation’s commitment to the audit and encouraged participation from all staff.</li> </ul> <p>Another supportive aspect was the presence of managers and senior leaders in the working parties. This ensured audit timeframes, processes and outcomes could be more effectively communicated to staff. These leaders championed the key messages amongst their teams, encouraging participation and provided a point of contact.</p>
<i>Whole of organisation represented on working party and involvement from HR</i>	<p>Diversity among the working party members was seen as largely positive at both Alpine and Murrindindi. Both working groups’ composition reflected the multiplicity and different departments of their organisations. This ensured each departments needs were considered in the process, and allowed communication to flow through each department in a more seamless manner. Those on the working party acted as champions and were able to communicate the audit within their teams.</p> <p>The participation of the Human Resources Manager in both organisations working parties was seen as a beneficial inclusion. The HR managers have a comprehensive knowledge of the organisation’s policies and procedures, and as both organisation’s gender action plans included implementing changes to these areas, it was identified as a benefit their have their knowledge and expertise readily available. It also assisted in instigating actions within the gender action plan, due to their involvement in the working party, it provided them with a level of ownership.</p>
<i>InterAction Gender Audit provided sound process</i>	<p>The InterAction Gender Audit Handbook provided a sound process and comprehensive framework to follow a step-by-step process. This allowed both organisations to create and encourage participation by obtaining the views of a diverse range of staff members and rich data to inform their gender action plan.</p>
<i>Consistent Communication</i>	<p>The CDW at Alpine Health stated “a clear and operational communication strategy maintained direction within the project, which supported a committed and focused team”. Managing clear and consistent communication with the organisation regarding the audits purpose, timeframes, processes and outcomes was imperative to staff participation and understanding.</p> <p>A key example was the monthly newsletter, which provided information associated with the audit, but also educated readers on PVAW and gender equity more broadly allowing for open and candid discussion to take place.</p>

### Challenging factors in the audit process

<i>InterAction Gender Handbook was</i>	<p>While the handbook did provide an appropriate and valuable process to follow, it was not designed with an Australian workplace context in mind as the primary intended audience was development and humanitarian assistance</p>
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<p><i>not designed for an Australian workplace context</i></p>	<p>organisations (InterAction, 2010). Alpine Health and Murrindindi Council are quite disparate from a humanitarian organisation and this meant that the language employed throughout the handbook was not always easily applicable or transferrable. Both the long and short staff surveys within the handbook were comprised of questions that did not relate to the organisational practices at Alpine and Murrindindi, or required a significant adaptation of language to be made applicable. This process was difficult as it was:</p> <ul style="list-style-type: none"> <li>• Time consuming; and</li> <li>• Not always feasible as language alteration would lose the original meaning of the question</li> </ul> <p>Both working parties spent a number of meetings drafting the staff survey, to ensure they had a tool that was easily comprehensible by all staff members and would elicit relevant data.</p>
<p><i>Analysis of results required technical knowledge and software, making this not possible in some organisations</i></p>	<p>The IGA Handbook recommended using statistical software package to conduct three types of data analysis – univariate, composite measure, and bivariate. Both organisations did not have access to the statistical software packages required, nor did they possess a strong skillset in data analysis. The complexity involved in data analysis, the volume of survey responses, and limited timeframes meant external resources were required. An evaluation consultant independently analysed the data according to the Handbooks recommendations, which added rigour to the process. An understanding of survey design, and analysis is recommended for future organisations undertaking a gender audit.</p>
<p><i>Gender Attitudes Survey</i></p>	<p>The Gender Attitudes survey was drawn from the VicHealth NCAS (2014) providing a comparison with the Australian population, and a validated and evidenced based tool. However, this survey was met with much negativity and opposition from both organisations as:</p> <ul style="list-style-type: none"> <li>• participants found the questions to be out dated and thus the activity was perceived to be meaningless</li> <li>• participants found the questions to be leading and highly prone to social desirability</li> <li>• it was felt there was disconnection between the gender audit and the gender attitudes survey</li> </ul> <p>Feedback from VicHealth at an “Understanding the NCAS” forum (2015) revealed that it was only the full series of NCAS questions that had been employed and validated. The VicHealth project worker confirmed that dividing up the questions and utilising single components of the survey may have impacted on acceptance of the survey among participants (VicHealth, 2014).</p>

## Objective 3: Capacity Building

### Appropriate speaker for target audience

Evaluation of the 'Becoming a Male Ally in Challenging Men's Violence against Women' workshops identified areas for future improvement, as some female participants felt excluded from the activities and other participants became disengaged from the topic. Upon reflection it was recognised that the key messages of Courageous Conversations are somewhat inconsistent to the key messages of facilitator Professor Pease's work, which were promoted at the launch and associated workshops. Courageous Conversations aims to engage all members of the community in discussions regarding respectful relationships and gender stereotypes, whereas Professor Pease specifically advocates for men to increase their responsibility and involvement in PVAW. It is acknowledged speakers for campaign events must concur and champion the key messages to achieve the best outcomes.

The timeline activity conducted in the workshop with Benalla Saints may not have been the most beneficial and appropriate exercise for the target group. The 2013 National Community Attitudes towards Violence Against Women Survey for respondents 16–24 years found that *"research in education for young people to address other complex social issues indicates that young people prefer, and respond better to, strategies that are less 'top-down passive learning and more action-based, interactive and peer-to-peer"* (Harris et al, 2015). Young people's own shared experience, rather than cross-generational, hierarchical approaches, are a valuable basis for learning. Identifying peer relationships critical to young people make them an important resource in the development of priority strategies. International research demonstrates young men's perceptions of the attitudes and behaviours of their peers are among the strongest influences of their own attitudes and actions (Harris et al, 2015).

Harris et al (2015) advocates for the adoption of a peer-led model in youth settings, stating *"community interventions that identify young men in highly masculinised cultures who are open to gender equality, and then draw on their knowledge for peer education, have been noted for their promise"*. This evidence suggests a peer-led model, whereby leaders in the club that were supportive of gender equality would lead and implement initiatives, may have been more successful than the use of a traditional, academic approach. Future work with sporting clubs and youth settings will further investigate peer approaches, drawing upon young peoples shared experiences.

### Bystander training

The Courageous Conversations Bystander training was a much anticipated and sought after aspect of the regional PVAWC strategy, having been identified as a priority for action in the strategy development workshop. Some participants were confused regarding the purpose of the workshop, with reported expectations that the workshop would focus on early intervention and response topics, such as how to identify a woman who may be experiencing violence, and how to respond to and support her. This challenge was also experienced in the Northern Interfaith Respectful Relationships project, that found one of the barriers to engaging faith leaders in primary prevention was their awareness of firstly wanting to be better equipped in knowing how to respond who may be experiencing violence (Holmes, 2012). This stems from the limited understanding the general population have in regards to primary prevention, and the prevention of VAW. The WHGNE project team identified that more nuanced language is required when communicating the purpose of the

Courageous Conversations Bystander workshop, and more broadly, further education of PVAW and primary prevention within the community is pivotal.

## Engaging men in PVAW

Holmes (2012) articulates *“Strategies for better engagement of men is a general topic of exploration in the PVAW field. The experience of those working in the field of violence prevention have long debated the challenges of engaging men in prevention, and know full well the regular defensive responses of men when confronted with both the prevalence of violence against women, and the gendered nature of that violence”*. This experience has been encountered throughout this project, with a major challenge being the lack of representation of men at PVAW activities. The health and community sector was a primary setting within the project and, as males are often underrepresented in this sector, it was difficult to engage champions to participate in the strategy.

The small number of male participants at the Courageous Conversations Bystander workshops was recognised by other participants. Many attendees were disappointed and questioned why there were so little males in the room. Men’s participation in the workshops and project was deliberated with the steering committee, and members recommended stronger partnership and ties to male dominated sectors, such as trade industries and finance, as a strategy to further engage with men in future.

The training workshops, the gender audits and our conversations with stakeholders identified potential barriers to men’s engagement. Northern Interfaith Respectful Relationships project found that *“the very people who are most in a position to be advocates for change are also the ones who may be most resistant to change, and who may see themselves as having the most to lose by advocating for gender equality within their organisation”* (Holmes, 2012). For males to engage in PVAW and gender equity, a personal reflection is required to identify ways to more equally and respectfully share the workload with women, both personally and professionally. Males (particularly white males) must recognise their privilege in society, and be willing to share their power. Some men may be unable to recognise their sense of privilege and power, and others may not be comfortable to give up a portion of their power, therefore preventing them from fully engaging in PVAW and gender equity.

## Objective 4: Communications and Advocacy

### Courageous Conversations campaign

As PVAW is still a relatively new discipline, identification of effective and engaging methods of communicating PVAW to different stakeholders remains largely undetermined. Key elements of effective and promising practice for social marketing campaigns include:

- Address the drivers of violence against women (beyond ‘raising awareness’); and
- Promote positive behaviours, practices and social norms (Our Watch, 2015).

The ‘Change the Story’ framework recommends to “develop key messages that are simple, strong and consistent, with tailored messages for specific target audiences and channels” (Our Watch, 2015). The Courageous Conversations campaign aimed to adopt these principles, however it was identified that some of the language used in the campaign, and when conversing with stakeholders, was not always clear and simple to understand. Stakeholders felt the language was dense in jargon, and at times academic and alienating.

Terms such as ‘gender equity’, ‘unconscious bias’, ‘gender lens’ and, to a lesser degree ‘gender stereotypes’, are predominately not terms or concepts that the general population can easily comprehend or readily identify with. The project team promoted the use of this language, in order to offer opportunities for individuals to learn and develop an understanding of these concepts, related to the end goal of ‘gender equity’. This has been a consistent challenge across the PVAW sector and was experienced at the Maribyrnong City Council, Respect and Equity project;

*“This need to avoid jargon has been a key learning through the project. We need to use language that is accessible, resonates with the audience we are speaking with and coincides with the priorities, values and interests of the audience. We need to use examples that are context specific and offer a point of influence and connection for the listener” (Maribyrnong City Council, 2011)*

Effective communication has been an important learning, and the project team has become more sophisticated and refined with language, demonstrated through the website modifications and continual update of resources. Language was adapted and simplified, permitting engagement with a broader range of stakeholders and allowing understanding to occur, without intimidating individuals. Enhanced communication techniques have resulted in engagement and momentum with broader partners that is pivotal to capitalise on beyond the life of the project.

### White Ribbon campaign

White Ribbon is Australia’s best known national, male-led campaign to end men’s violence against women and has become a prominent foundation, being highly successful in engaging men in PVAW (White Ribbon, 2014). The campaign resonated with Hume region local communities for its tangible and practical application. The mapping exercise in 2013, highlighted White Ribbon related activities were one of the most utilised and implemented activities in relation to PVAW across the Hume region.

Despite high levels of engagement, often these activities do not impact beyond awareness raising activities, as they are largely focused on communicating statistics, impact and appropriate services. It is beyond the scope of the campaign to address the structural barriers of gender inequality and gender role socialisation, or the social norms that ignore, condone or support violence against women (Australian Women’s Health Network (AWHN), 2014).

Increasing knowledge of primary prevention initiatives has been a challenge experienced throughout the project. Project activities have continually aimed to move discussions beyond awareness raising, to conversations and activities that engage and challenge the drivers against women. As identified by AWHN, “the goal of prevention is to make these attitudes and behaviours (determinants of VAW) visible and change them through the promotion of equal and respectful relationships” (2014).

Through our discussions with project partners it was identified that White Ribbon can reinforce gender stereotypes and promote the very inequalities PVAW aims to reverse. White Ribbon Ambassadors are men who recognise the importance of men taking responsibility and playing a leadership role in preventing men’s violence against women (White Ribbon, 2014). Ambassadors have generally been seen to be men in leadership positions, as this position of authority can: legitimise key messages spoken, and incite involvement and interest from other men. This can suggest that men in positions of power have more influence than women working in this space, and male leadership is required to affect change. According to Our Watch (2015) “devising campaigns that reinforce gender stereotypes are less effective and harmful practice”.

Courageous Conversations aims to engage the whole community in conversations of respect, equity and gender stereotypes and advocates that everyone can have a role in PVAW and make a difference, both personally and professionally. As White Ribbon focuses on the role men can play in PVAW, there is a slight divergence of key messages between the two campaigns, with each one having a specific purpose in PVAW.

## Objective 5: Research and Promoting the Evidence Base

### Understanding primary prevention

The AWHN Position Paper on the Primary Prevention of Violence against Women (2014) identified *“primary prevention remains a poorly understood concept across sectors and between stakeholders. It is often conflated with early intervention or the response to existing violence, or else limited to awareness raising or social marketing campaigns”*. The 2013 mapping process found that preventative work undertaken in the Hume region had largely focused on awareness raising activities. Much of these activities had concentrated on discussing statistics, the prevalence and the impact of family violence in the community, with little regard the key determinants of VAW.

Understanding the correlation between VAW and gender stereotypes can be a difficult concept to grasp, yet is absolutely pivotal for the prevention of VAW (Walden & Wall 2014). Many of the project partners and stakeholders were familiar with a service delivery model, and identified with responding to the violence after it had occurred, or at an early intervention level. When engaging project partners many conversations were centred around; how to identify a woman who may be experiencing violence, or how to identify a male who may be perpetrating violence.

As the project was focused on moving conversations and actions upstream to primary prevention, there was a risk that stakeholders would be lost at this point, due to foreignness of this concept. This generated a two-fold approach by endeavouring to engage community and stakeholders in PVAW in a manner in which they were comfortable, whilst at the same time, educating them on primary prevention and PVAW, by promoting strategies and actions that addressed the determinants of VAW.

In order to address this challenge, a strong partnership was developed with Hume Region RIC, with the aim of communicating the continuum of VAW to the community and family violence sector using the ‘What is the Link?’ resource. The goal of these discussions were to support workers and community members to understand the correlation between gender stereotypes and VAW, to identify where their work aligns along the continuum and to recognise how they can have an impact in prevention.

These goals were often not achieved in one conversation, but over a series of exchanges. Due to the complexity of the topic, comprehension was generally gained after a number of robust conversations and through drawing upon a variety of methods such as evidence, research, infographics, images and anecdotes. A tactic Elizabeth Broderick utilised when engaging male leaders in the Champion of Change program (2016), was to personalise the concept for men *“taking it from the head to the heart”* (Broderick, 2015). The WHGNE team, the RIC and project partners adopted this method by sharing stories to illustrate this concept or asking stakeholders to personally reflect of this issue. With a combination of storytelling and dedicating time to these discussions, this method was found to be successful, and yielded an understanding in individuals that incited a sustained personal commitment to PVAW and gender equity.

The timeframe and manner required for individuals to understand PVAW varies greatly. It is acknowledged that many stakeholders may not have the time or capacity to be able to participate in series of discussions, or undertake the reflection and research they require to gain comprehension. It is also acknowledged that some stakeholders may not have an interest in doing so. There is no

‘one size fits all’ approach or document that clearly and immediately demonstrates the concept of PVAW and primary prevention. We recognise that for the community and stakeholders to attain an understanding of PVAW, a number of key elements are required: a readiness on the individuals’ behalf; a solid investment of time and resources; and utilising plain and everyday language.

## Project scope and revision

Working with a diverse range of stakeholders and settings across 12 local government areas in relation to PVAW was an ambitious task in itself, and was further complexed by an evolving and developing evidence base. The limited evidence base has meant the project encompassed many different elements, as steering committee members were keen to investigate and contribute to the evidence base according to their areas of interest. The development of the strategy saw many of the steering committee members put forward their passion as a priority for action, resulting in the following areas included in the strategy:

- Working with youth services
- Workplaces
- Local Government
- Working with male leaders
- Working with families
- Sporting clubs
- Education

Incorporating all the above settings within the strategy produced an ambitious yet unrealistic project. However, as a consultative process, it was important that stakeholders felt that their ideas were being considered and reflected in the strategy, as this created buy-in. The regional PVAWC strategy was intended to be a centralised and overarching framework that encompassed all regional PVAW activities.

Complexity of the strategy generated some confusion for steering committee members during the early stages of implementation, as some were unclear about how resources would be allocated and which actions would be prioritised. This ambiguity was further compounded by a limited understanding of primary prevention and what successful PVAW initiatives look like, due to the limited evidence base. Walden and Wall (2014) state “without a clear understanding of what we are looking for to articulate success or failure, it is difficult to interpret success or failure as sufficient, complete or in need of refinement”.

On reflection, it was acknowledged that a more streamlined strategy would have been more achievable, due to the following insights:

- Enhanced understanding and recognition of the limited capacity of project partners;
- The need to build knowledge and understanding of PVAW and primary prevention; and
- The vastness and diversity of the Hume region.

In 2014, the project’s sustainability plan was developed, which supported simplifying the strategy’s focus and creating a sense of achievability. The sustainability plan centred on key actions that had existing momentum and buy in. This produced a clearer understanding of the projects direction and key activities. Having refined the Courageous Conversations campaign, the key messages also provided a shared vision of working towards respect and equity in key settings.

Shared goals and aims, understood and accepted by each partner, lead to improved coordination of policies, programs and service delivery, and, ultimately, better outcomes. A clear understanding of individual members' roles and responsibilities regarding the division of labour is imperative to any partnership work (Compassion Capital Fund National Resource Center, 2010). This was evident following the generation of sustainability plan, which reinvigorated a shared understanding, resulting in improved strategy outcomes.

## PVAW evaluation

In relation to violence against women, the lack of an extensive evidence base from which to draw knowledge for intervention design provides the sector with a challenge. It is also an opportunity to design evaluations to inform an evidence base that can provide stakeholders with the most useful information possible (Walden and Wall, 2014). A developing PVAW evidence base, combined with difficulties associated with evaluating complex social issues provided multiple challenges in the project's evaluation.

### *Evaluating complex social problems*

Based on the VicHealth PVAW framework and an ecological approach, the Regional PVAWC strategy aimed to adopt a whole of community approach, implementing a range of mutually reinforcing PVAW initiatives at multiple levels in the community within the three-year project period.

Kwok (2013), identifies *"the challenge of addressing violence against women is conceptualised as a long-term endeavour: reducing or ending violence against women is unlikely to be seen in the life of a project or program"*. This belief is further supported by Walden and Wall (2014) who affirm;

*"The nature of primary prevention means there will be a relatively long time period between the intervention and the desired outcome of behaviour change...An expectation that primary prevention interventions will be immediately recognisable as "successful" or "unsuccessful" is limiting for the process of developing an evidence base"*

Therefore, it is unrealistic for workers and stakeholders to expect projects to produce immediate outcomes in their short life span of two to three years. Rather PVAW and primary prevention should be seen as a journey, requiring sustained investment in order to see the desired cultural change, which can take a generation to be fully achieved.

### *Appropriate tools to measure attitudinal and behavioural change*

A core ambition of the regional PVAWC strategy and the Courageous Conversations campaign was to increase knowledge of the presence and persistence of gender stereotypes in society, and understanding of the associated negative impacts (chiefly the correlation to VAW). It was envisaged that a focus on knowledge and understanding would ultimately translate into behavioural change, meaning that individuals and organisations would engage in activities that promoted equal and respectful relationships, and challenge reinforcement of gender stereotypes.

This led to the desire to obtain a tool to be able to measure individual's attitudes towards gender and gender roles, in order to determine if project initiatives impacted on knowledge and understanding, and by extension, behaviour. However, the relationship between attitudes, beliefs and behaviours is complex. Evidence may detect an increase in awareness and knowledge rather than an actual change in behaviour and practices, as evidence demonstrates people don't always act according to their beliefs, even when their understanding is high (Walden and Wall, 2014).

What was originally anticipated to be a simple task, proved to be a challenge experienced throughout the duration of the project, as an applicable and appropriate tool to measure attitudes towards gender and gender roles was difficult to source. The tool that was utilised to measure individual attitudes in a range of settings was drawn from the NCAS, but was met with criticism due to beliefs it was outdated and leading. However its use was continued due to the need for consistency in tools pre and post initiatives and the inability to identify another validated and evidenced based instrument.

Whilst there is merit and validity in measuring knowledge and attitudes based on the philosophy that attitudes will eventually translate to behavioural change, this measurement has its drawbacks and needs to be strengthened with other forms of evaluation methodologies. Kwok (2014) advocates for PVAW evaluation to 'get inside the black box of projects' to obtain a full grasp of the success and achievements, and in doing so, uncover the powerful information of those directly involved in the project, drawing upon personal meaning and experiences.

Programs are located in dynamic historical, social, political, economic and cultural environments that produce constant modification to program features. It is vital that evaluations are aware of, and open to, the different pathways to change as well as the variable nature of implementing programs – and recognise these facets as central to why and how programs are successful in doing what they do (Kwok, 2014). The external summative evaluation allowed for further examination of the projects journey including exploration of context.

As PVAW is a growing field of practice, both in Victoria and internationally, there is still much to be determined in regard to effective evaluation approaches and is still widely based on theory (Kwok, 2014). For effective evaluation to occur, appropriate measurement tools and methods must be developed and applied (Walden & Wall 2014).

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# Future Work and Recommendations

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PVAW is a new and emerging discipline and particularly a new field of practice in the Hume region of Victoria. The development, implementation and evaluation of the Hume Region PVAWC strategy, as well as the involvement in the PVAW sector more broadly, has incited a number of recommendations for future work. These ideas and suggestions have emerged from project partners reflections regarding their experiences of PVAW and implementation of the strategy, combined with best-practice elements deemed essential for effective PVAW initiatives.

While our recommendations are universal and applicable to all PVAW work, they have been developed through a rural lens and identify ways the rural workforce can be strengthened to effectively carry out PVAW initiatives. These recommendations will be most effective, if applied with a participatory and locally contextualised approach. PVAW is a whole of community effort, with each and every one of us, having an important role to play.

The recommendations constitute six broad themes:

## Leadership

Our findings of the Hume Region PVAW strategy reveal leadership support is paramount to any organisation undertaking PVAW initiatives, particularly demonstrated through the partnership and work with the Benalla Saints, and the Gender Audits undertaken by Alpine Health and Murrindindi Shire Council. We advocate for the following:

- Leadership that is supportive of PVAW initiatives allows for more efficient implementation of actions, encourages staff participation, validates the process and promotes sustainability;
- Organisational leaders and champions should demonstrate and model respectful relationships and equity;
- Alignment of organisational PVAW initiatives with organisational values and strategic direction has merit, as demonstrated through Gender Audits undertaken at Alpine and Murrindindi, and we would encourage this in future work; and
- When identifying leaders to champion key messages and activities, potential leaders must possess (or demonstrate an openness to develop) an understanding of PVAW and primary prevention, as having a strong comprehension of these concepts facilitates greater outcomes.

## Communication

A central theme of the project has been the communication of gender stereotypes and gender inequity present and underpinned in society. As highlighted throughout the report, this is not a topic the general community readily engages in, and to correlate the link between gender stereotypes with VAW can be a challenging concept to comprehend. While the women's health and PVAW sector has become more nuanced and sophisticated in the manner in which we communicate these notions, due to the complexity and history of this issue, there is still a need and opportunity to further refine our methods of engaging the community in this topic. Our recommendations are:

- Language that is jargon free and adopts a community friendly tone is pivotal to gender mainstreaming. Resources and tools developed in consultation with target audience would enhance engagement and communication outcomes;
- As gender interactions and stereotypes are played out in all parts of life, it is critical we make these patterns visible and articulate in plain language appropriate to the audience; and
- We encourage the utilisation of stories and examples in training and within targeted community settings that have the ability to make this concept real and personal for stakeholders.

## Increase Knowledge and Understanding of Primary Prevention and PVAW

At a minimum, primary prevention programs should promote gender equity and respectful relationships, as well as challenging violence supportive behaviours, environments and structures that are the social determinants of VAW (Walden and Wall, 2014). The relative ‘newness’ of PVAW locally and in the broader literature highlights that it still remains a sparsely understood concept with a limited evidence base. The project mapping and strategy development activities highlighted that true primary prevention PVAW activities were scarce across the Hume. We recommend:

- Further investment of resources to support the women’s health and PVAW sector to continue to build the capacity of stakeholders to understand primary prevention and PVAW;
- Ongoing professional development and practical advice is key to support stakeholders understanding of PVAW, which requires the PVAW sector to be adequately resourced to deliver this information;
- Further refinement of methods to engage and communicate PVAW and primary prevention is required (this recommendation is closely tied with communication);
- We encourage greater sharing of resources and learnings amongst the PVAW and women’s health sector through opportunities such as Communities of Practice and regional forums; and
- PVAW workers increase time dedicated to reviewing, reflecting and consulting with stakeholders regarding effective methods of communicating PVAW and primary prevention.

## Capacity

Throughout implementation of the regional PVAWC strategy, there was a distinct lack of capacity among stakeholders to fully participate in and contribute to PVAW initiatives. Despite the sustained commitment of the LGPVAW12 committee, members predominantly held roles at the council that encompassed a diverse portfolio, and covered multiple community issues, resulting in scarce time dedicated to PVAW. We strongly recommend:

- Organisations wanting to invest and engage in PVAW need to demonstrate such commitment through resourcing a distinct position. As demonstrated through the CDW at Alpine and Murrindindi, these organisations would not have been able to conduct a gender audit if it wasn’t for the CDW having the time to be able to dedicate to drive the audit process. We would advocate 0.4 EFT position at a minimum in order to see effective and tangible results; and

- Further investment is required to be able to adequately resource the prevention of VAW at a community level, as current demand for PVAW initiatives exceeds the capacity of the sector, and as momentum and awareness builds, this will only become greater.

## Long-term Investment into PVAW

The prevention of VAW requires a societal shift in which the attitudes towards roles and genders are challenged and expelled, and allowing acceptance and fortification of fluid gender roles to be reflected in all levels of society. This level of cultural change is a long-term endeavour and can only be realised through generational change. Therefore, we recommend:

- A substantial amount of time is required to bring stakeholders together and develop their skills and knowledge in relation to PVAW. This is indeed a core component of PVAW and should not be underestimated. Projects need to be adequately resourced, allowing time to nurture these partnerships and knowledge building, and to also invest significantly in project implementation, accommodating for deviations to occur due to the complexities associated with PVAW work; and
- Sustained investment for PVAW projects is required in order to effect and realise the cultural change required to achieve gender equity, which in turn will have significant impact on the prevalence of VAW.

## Evaluation

As PVAW evidence is quite disparate and still new, much of the evidence has yet to be measured over a longer term to ensure the impacts of change are lasting. This doesn't mean that primary prevention won't work, rather it means that there is much to be done in evaluating and documenting change (Walden and Wall, 2014). We strongly recommend:

- All PVAW initiatives to be evaluated to assist in building the evidence base. The mapping activity demonstrated that only two out of 23 initiatives had included an evaluation;
- One of the major barriers to doing this is the lack of resources provided or allocated for evaluation (Walden and Wall, 2014). This is a resource and knowledge issue, ensuring project workers have a solid understand of primary prevention, and also capacity to do so;
- We also recommend in future PVAW projects, there is greater acknowledgement of the lag time in which projects produce outcomes. Kwok (2013) advocates "*any evaluation of primary prevention effort must start with a view of such work as a process heading towards determinants-level change*". While process impacts can be identified and communicated it is unrealistic for projects to achieve determinant level change in their timeframe, without an increase in sustained and long-term investment; and
- Time needs to be dedicated to explore and test evaluation tools and methodologies that measure attitudes and behaviours towards gender and gender roles. As highlighted through the work completed with Alpine health and Murrindindi Shire Council, measurement tools have a significant impact on individual's participation and project effectiveness. Further investment into developing tools that resonate with the target audience and effectively capture change is required.

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# Conclusion

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In conclusion, the Hume Region PVAWC strategy has been effective in building the evidence base in relation to PVAW activities in the rural and regional communities of North East Victoria. The strategy has brought together a diverse group of regional stakeholders and incited robust conversations regarding PVAW. These Courageous Conversations have been held in numerous settings, rousing reflection both personally and professionally.

The regional PVAWC strategy has had a positive impact on the PVAW work on rural and regional Victoria, and provided a number of initiatives and actions to carry on and build upon, including:

- Uniting passionate stakeholders and taking collaborative action on PVAW;
- The LGPVAW12 committee to continue to raise the profile of PVAW on local council's agenda and further actions internally in their organisations and externally in the community;
- A PVAW social marketing campaign;
- Delivery of Courageous Conversations Bystander training;
- PVAW champions in a diverse range of settings;
- Courageous Conversations resources to support a range of settings to engage in PVAW;
- A centralised hub of resources and PVAW information in the Courageous Conversations website; and
- Case studies of leaders and organisations promoting PVAW, including case studies sharing the learnings of undertaking a gender audit at Alpine and Murrindindi.

Rather than focus on negatives, primary prevention must take a positive, community building or strengths-based approach. A strengths-based approach calls for programs to be positive, inclusive and enabling (Walden and Wall, 2014). This was the approach adopted by the Courageous Conversations campaign and the regional PVAWC strategy, which aimed to engage the community in positive conversations about promoting respect, equity and fluid gender norms. The Courageous Conversations campaign will continue to promote these courageous conversations among individuals and organisations, further engaging more members of the community in PVAW.

*As greater numbers of ordinary people become involved in prevention programs the combined effect has the potential to create a groundswell of momentum that will lead to the kind of long-term cultural change that is required to create a society in which all people are equal, and respectful relationships and behaviours are the norm (Walden and Wall, 2014).*

# Appendices

## Appendix 1: Meeting documentation

### Steering committee meetings - 2013

The below table outlines the process the steering committee undertook in 2013 and the organisations involved.

Month	Organisations Represented	Focus of meeting
March 7	<ul style="list-style-type: none"> <li>- WHGNE (x2 representatives)</li> <li>- RIC</li> <li>- Murrindindi Shire Council</li> <li>- GV CASA</li> <li>- Dep of Human Services</li> <li>- Strathbogie Shire (x2 representatives)</li> <li>- Gateway Health (formerly known as Ovens &amp; King Community Health)</li> <li>- NESAY</li> <li>- CAV</li> <li>- Shepparton Shire Council</li> <li>- Mitchell Shire Council</li> <li>- NEXUS</li> <li>- Benalla Shire Council</li> </ul>	<ul style="list-style-type: none"> <li>- Overview of DoJR Funding</li> <li>- PVAW as a public issue summary</li> <li>- VicHealth evidence and framework</li> <li>- Role of the steering committee</li> <li>- Partnership agreements (MOU, TOR)</li> <li>- Policy Scan</li> <li>- Mapping of PVAW initiatives</li> <li>- Strategy development timeframes</li> </ul>
April 4	<ul style="list-style-type: none"> <li>- WHGNE (x2 representatives)</li> <li>- RIC</li> <li>- Murrindindi Shire Council</li> <li>- GV CASA</li> <li>- Strathbogie Shire</li> <li>- Mitchell Shire Council</li> <li>- Gateway Health</li> <li>- NESAY</li> <li>- Wodonga City Council</li> <li>- Mungabareena</li> <li>- Alpine Health</li> <li>- Mansfield Shire Council</li> <li>- DoJR</li> </ul>	<ul style="list-style-type: none"> <li>- TOR and MOU's</li> <li>- Mapping Outcomes</li> <li>- Review of Policy Scan</li> <li>- Strategy Development Workshop</li> <li>- Workshop pre reading</li> <li>- Project External Evaluator engaged</li> </ul>
May 2	<ul style="list-style-type: none"> <li>- Wodonga Council</li> <li>- WHGNE (x4 representatives)</li> <li>- Mitchell Shire Council</li> <li>- Victoria Police</li> <li>- Gateway Health</li> <li>- Nexus</li> <li>- Strathbogie Shire Council</li> <li>- NESAY (x2 representatives)</li> <li>- Murrindindi Shire Council</li> <li>- DoJR</li> <li>- RIC</li> <li>- Benalla City Council</li> </ul>	<p><b>Strategy development Workshop</b> Workshop facilitated by external facilitator</p> <p><i>Workshop aims:</i></p> <ul style="list-style-type: none"> <li>- Identify target population</li> <li>- Identify key settings applicable to target population</li> <li>- Identify key actions/strategies directed to target population and settings</li> </ul>

June 6	<ul style="list-style-type: none"> <li>- Gateway Health</li> <li>- NESAY</li> <li>- NEXUS (x2 representatives)</li> <li>- RIC</li> <li>- Mansfield Shire Council</li> <li>- Strathbogie Shire Council</li> <li>- DoJR</li> <li>- Mitchell Shire Council</li> <li>- Benalla City Council</li> <li>- Victoria Police</li> <li>- Mungabareena</li> <li>- Murrindindi Shire Council</li> <li>- WHGNE (x2 representatives)</li> <li>- Shepparton City Council</li> </ul>	<ul style="list-style-type: none"> <li>- Workshop Review</li> <li>- Groups discuss Strategy Draft</li> <li>- Feedback of strategy draft</li> <li>- Commitment/Support to actions</li> <li>- Process for endorsement of strategy with organisations</li> <li>- Review of Evaluation Workshop 17th May</li> <li>- Review of Evaluation Tools and methodologies identified in workshop</li> </ul>
July 4	<ul style="list-style-type: none"> <li>- Gateway Health</li> <li>- NESAY</li> <li>- Victoria Police</li> <li>- Strathbogie Shire Council</li> <li>- DoJR</li> <li>- RIC</li> <li>- WHGNE (x2 representatives)</li> </ul>	<ul style="list-style-type: none"> <li>- Feedback/Input Strategy Draft</li> <li>- Organisational commitment/support to strategy actions</li> <li>- Working Groups</li> <li>- Endorsement Process</li> <li>- Local government Working party</li> <li>- MPHWP update</li> <li>- DoJR progress report</li> <li>- Vichealth PVAWC Leadership seminar</li> </ul>
August 1	<ul style="list-style-type: none"> <li>- Murrindindi Shire Council</li> <li>- DoJR</li> <li>- WHGNE</li> <li>- Gateway Health</li> <li>- Mungabareena</li> <li>- Nexus (x2 representatives)</li> <li>- Strathbogie Shire Council</li> <li>- Mansfield Shire Council</li> <li>- Victoria Police</li> <li>- Mitchell Shire Council</li> <li>- Shepparton City Council</li> <li>- RIC</li> </ul>	<ul style="list-style-type: none"> <li>- Endorsement process</li> <li>- Strategy Launch</li> <li>- Gender Equity Working Group</li> <li>- Review of Gender Equity group first meeting</li> <li>- Charter</li> <li>- Local Government Working Group</li> <li>- Community Action Working Group</li> <li>- Community Capacity Index; explanation of tool and process</li> <li>- Training opportunities</li> </ul>
September 5	<ul style="list-style-type: none"> <li>- Gateway Health</li> <li>- WHGNE (x2 representatives)</li> <li>- DoJR</li> <li>- Shepparton City Council</li> <li>- NESAY</li> <li>- Mitchell Shire Council</li> </ul>	<ul style="list-style-type: none"> <li>- Strategy Endorsement; review the process with agencies</li> <li>- Strategy Launch details; Launching with VicHealth Leadership Preventing VAW Course</li> <li>- Local Government Working Group</li> <li>- Social Marketing Workshop recap</li> <li>- Community Capacity Index; results and feedback</li> <li>- Training and Resources</li> </ul>

## Gender Equity meetings 2013

Meeting Date	Agencies Represented	Outcomes
July 30	WHGNE (x2 representatives) Mitchell Shire Council (x2 representatives) Gateway Community Health Mansfield Shire Council	<p><u>1. What is the role of the gender equity group</u></p> <ul style="list-style-type: none"> <li>-Group consensus of the role of the group</li> <li>-identified groups key actions for the next 6 months; development of charter and support development of social marketing campaign</li> <li>-confirmed flexibility of membership</li> <li>-agreed to invite colleagues to participate in the group</li> </ul> <p><u>2. Charter</u></p> <ul style="list-style-type: none"> <li>-Agreed Hume Charter needed monitoring mechanisms and tools to support organisations to implement</li> <li>-Outlines elements for draft PVAW Charter</li> </ul> <p><u>3. Gender Equity Tools</u></p> <ul style="list-style-type: none"> <li>- Identified tools not currently pertinent as premature in strategy</li> </ul> <p><u>4. Training</u></p> <ul style="list-style-type: none"> <li>- Confirmation of training package to be developed</li> </ul>
September 5	Mansfield Shire Council WHGNE (x2 representatives) Gateway Community Health	<p><u>1. Charter</u></p> <ul style="list-style-type: none"> <li>-Identified useful resources to support agencies in implementing and actioning the charter</li> <li>-Identified resources will need to be tailored to specific settings e.g. sporting clubs</li> <li>-Required feedback from local government group</li> </ul> <p><u>2. Social Marketing Workshop</u></p> <ul style="list-style-type: none"> <li>-Members agreed to meet after social marketing workshop to discuss ramifications and correlation with charter</li> </ul> <p><u>3. Training</u></p> <ul style="list-style-type: none"> <li>-Informed of Gender equity training WHV developing</li> </ul>

## Steering committee meetings - 2014

Date	Attendees	Meeting Focus
January 30	<ul style="list-style-type: none"> <li>- WHGNE (x3 representatives)</li> <li>- Benalla Rural City</li> <li>- Gateway Health</li> <li>- Strathbogie Shire</li> <li>- Moira Shire Council (x2 representatives)</li> <li>- Wodonga City Council</li> <li>- CARN</li> <li>- Shepparton City Council</li> <li>- Victoria Police</li> <li>- Benalla Health</li> <li>- Murrindindi Shire Council</li> </ul>	<ul style="list-style-type: none"> <li>• Staff changes at WHGNE</li> <li>• Recap of Strategy Launch               <ul style="list-style-type: none"> <li>○ VicHealth Leadership course</li> </ul> </li> <li>• New organisations endorsing the strategy</li> <li>• PVAWC Charter               <ul style="list-style-type: none"> <li>○ Overview of the charter</li> <li>○ Pilot site</li> <li>○ Courageous Conversations</li> <li>○ Launch</li> </ul> </li> <li>• RE AIM Evaluation workshop</li> <li>• Update MAV PVAW Network</li> <li>• Update Local Government Working group</li> <li>• Community Action and Gender Equity Working group</li> <li>• Review of TOR and meeting schedule</li> </ul>
March 27	<ul style="list-style-type: none"> <li>- Murrindindi Shire</li> <li>- Wodonga City Council</li> <li>- Benalla Rural City</li> <li>- Gateway Health</li> <li>- Benalla Health</li> <li>- Shepparton City Council</li> <li>- WHGNE (x3 representatives)</li> </ul>	<ul style="list-style-type: none"> <li>• Changes at WHGNE</li> <li>• Strategy activities               <ul style="list-style-type: none"> <li>○ Benalla Saints Workshop</li> <li>○ Project funding criteria</li> <li>○ Benalla Pilot Site</li> <li>○ Lit Review</li> </ul> </li> <li>• Update LGPVAW12</li> <li>• Update Gender Equity group</li> <li>• RE-AIM Evaluation Workshop</li> <li>• Resources</li> </ul>
May 22	<ul style="list-style-type: none"> <li>- Shepparton City Council</li> <li>- Wodonga City Council</li> <li>- Benalla Rural City</li> <li>- Benalla Health</li> <li>- Murrindindi Council</li> <li>- Moira Shire</li> <li>- WHGNE (x3 representatives)</li> </ul>	<ul style="list-style-type: none"> <li>• Interim Evaluation Report               <ul style="list-style-type: none"> <li>○ Communication</li> <li>○ Regular practice forum to share knowledge and experiences</li> <li>○ List of terms and key acronyms</li> <li>○ Simplification of terms such as “target”</li> <li>○ WHGNE website</li> <li>○ WHGNE team and support</li> </ul> </li> <li>• Benalla Community Coordinator Role</li> <li>• LGA for second pilot site</li> <li>• Charter               <ul style="list-style-type: none"> <li>○ Changes to Charter</li> <li>○ How to action the Charter document</li> <li>○ Charter Launch – August</li> </ul> </li> </ul>

		<ul style="list-style-type: none"> <li>• Courageous Conversations <ul style="list-style-type: none"> <li>○ Website</li> <li>○ Facebook page</li> </ul> </li> <li>• PVAW Newsletter</li> <li>• Update LGPVAW12</li> <li>• Update Gender equity group</li> <li>• Upcoming training</li> </ul>
July 24	<ul style="list-style-type: none"> <li>- Benalla rural City</li> <li>- Victoria Police</li> <li>- WHGNE</li> <li>- Murrindindi Council</li> <li>- Strathbogie Shire (x2representatives)</li> <li>- Benalla health</li> <li>- Alpine Health</li> <li>- Shepparton City Council</li> </ul>	<ul style="list-style-type: none"> <li>• Community Development Officer <ul style="list-style-type: none"> <li>○ Alpine gender Audit</li> </ul> </li> <li>• Charter launch August</li> <li>• Courageous Conversation Website</li> <li>• Courageous Conversations Facebook page</li> <li>• Update LGPVAW12</li> <li>• Upcoming training; Rodney Vlasis Bystander training</li> </ul>
September 25	<ul style="list-style-type: none"> <li>- WHGNE (x3 representatives)</li> <li>- Wodonga Council</li> <li>- Benalla Council</li> <li>- Benalla Health</li> <li>- CARN</li> <li>- Murrindindi Shire</li> <li>- Mitchell Shire</li> <li>- DoJR</li> </ul>	<ul style="list-style-type: none"> <li>• Courageous Conversations Launch <ul style="list-style-type: none"> <li>○ Courageous Conversations welcome kit</li> <li>○ Facebook and Twitter</li> </ul> </li> <li>• Courageous Conversations Website</li> <li>• Alpine Health gender Audit</li> <li>• Murrindindi Shire Council Gender Audit</li> <li>• Hume Region PVAWC Strategy Revision</li> <li>• Update LGPVAW12</li> <li>• Upcoming Training</li> </ul>
November 27	<ul style="list-style-type: none"> <li>- WHGNE (x3 representatives)</li> <li>- DoJR</li> <li>- CARN</li> <li>- Valley Sports</li> <li>- Murrindindi Shire</li> <li>- Shepparton Council</li> <li>- Alpine Health</li> <li>- Moira Shire</li> <li>- Victoria Police</li> </ul>	<ul style="list-style-type: none"> <li>• Bystander training Review</li> <li>• Strategy Revision</li> <li>• Alpine Health Gender Audit</li> <li>• Murrindindi Shire Council Gender Audit</li> <li>• Update LGPVAW12</li> <li>• Meeting dates and format 2015</li> <li>• Sustainability Plan</li> </ul>

## Steering committee meetings - 2015

Date	Attendees	Meeting Focus
January 22	<ul style="list-style-type: none"> <li>- WHGNE (x2 representatives)</li> <li>- DoJR</li> <li>- Alpine Health</li> <li>- Murrindindi Shire Council</li> <li>- Valley Sports</li> <li>- Benalla Health</li> <li>- RIC</li> <li>- Mitchell Shire Council</li> </ul>	<ul style="list-style-type: none"> <li>• Bystander Training</li> <li>• Courageous Conversations Website and Resources</li> <li>• Alpine Health gender audit</li> <li>• Murrindindi Shire Council Gender audit</li> <li>• Update Local Government Working group</li> <li>• Upcoming Events               <ul style="list-style-type: none"> <li>○ Family Violence Busting the Myth Conference</li> <li>○ Sexuality and Respectful Relationships Forum</li> </ul> </li> </ul>
March 26	<ul style="list-style-type: none"> <li>- WHGNE (x3 representatives)</li> <li>- Victoria Police</li> <li>- Alpine Health</li> <li>- Benalla Rural City</li> <li>- DoJR</li> <li>- Strathbogie Shire Council (x2 representatives)</li> <li>- Valley Sports</li> <li>- Shepparton City Council</li> <li>- Mitchell Shire Council</li> <li>- MAV</li> <li>- Towong Shire Council</li> <li>- Benalla Health</li> </ul>	<ul style="list-style-type: none"> <li>• TOR Update</li> <li>• Summative Evaluation</li> <li>• Bystander Training (summarise process and timeframes)</li> <li>• Courageous Conversations website</li> <li>• Courageous Conversations resources feedback               <ul style="list-style-type: none"> <li>○ Charter Flyer</li> <li>○ Let's Talk About Gender info sheet</li> <li>○ Continuum: Gender Stereotypes link to VAW</li> </ul> </li> <li>• Alpine Health gender audit</li> <li>• Murrindindi Shire Council Gender audit</li> <li>• Update Local Government Working group</li> <li>• Upcoming Events               <ul style="list-style-type: none"> <li>○ Respectful Relationships Education Forum</li> <li>○ Family Violence Busting the Myth Conference</li> </ul> </li> </ul>
May 28	<ul style="list-style-type: none"> <li>- DoJR</li> <li>- Benalla Health</li> <li>- Rural City of Wangaratta</li> <li>- Wodonga City Council</li> <li>- Murrindindi Shire Council</li> <li>- Alpine Health</li> <li>- WHGNE (x2 representatives)</li> </ul>	<ul style="list-style-type: none"> <li>• TOR Update</li> <li>• Family Violence "Busting the Myth" Conference reflection</li> <li>• Royal Commission</li> <li>• Summative Evaluation</li> <li>• Community of Practice</li> <li>• Resources</li> <li>• Sporting Clubs</li> <li>• Wangaratta Hospital training</li> <li>• Alpine Health gender audit</li> <li>• Murrindindi Shire Council Gender audit</li> <li>• Update Local Government Working group</li> <li>• Upcoming Events - Bystander training               <ul style="list-style-type: none"> <li>○ Shepparton 6th August</li> <li>○ Wodonga 13th August</li> <li>○ Seymour 20th August</li> </ul> </li> </ul>
July 23	<ul style="list-style-type: none"> <li>- WHGNE (x2 representatives)</li> <li>- RIC</li> <li>- Alpine Health</li> <li>- Shepparton City Council</li> <li>- DoJR</li> <li>- NESAY</li> </ul>	<ul style="list-style-type: none"> <li>• Community Capacity Index (Partnership analysis tool)               <ul style="list-style-type: none"> <li>○ External evaluator phoned in to explain the CCI tool, it's completion and the process</li> </ul> </li> <li>• Summative Evaluation               <ul style="list-style-type: none"> <li>○ External evaluator discussed the interviews and encouraged committee members to</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>- Murrindindi Shire Council</li> <li>- Strathbogie Shire Council</li> <li>- Wodonga City Council</li> <li>- Benalla Health</li> </ul>	<p>participate, highlighting there was still time to participate</p> <ul style="list-style-type: none"> <li>• Reflections from VicHealth Policy, People and Prevention Conference <ul style="list-style-type: none"> <li>○ Committee members that attended provided highlights from the conference</li> </ul> </li> <li>• Alpine Health Gender Audit</li> <li>• Murrindindi Shire Council Gender audit</li> <li>• Update Local Government Working group</li> <li>• Upcoming Events; Bystander training <ul style="list-style-type: none"> <li>○ Shepparton 6th August</li> <li>○ Wodonga 13th August</li> <li>○ Seymour 20th August</li> </ul> </li> <li>• Sustainability Planning – discussed plans to sustain Courageous Conversations campaign</li> </ul>
September 24	<ul style="list-style-type: none"> <li>- Benalla Rural City Council</li> <li>- Murrindindi Shire Council</li> <li>- DoJR (x2 representatives)</li> <li>- Digital Marketing Consultant</li> <li>- WHGNE (x3 representatives)</li> <li>- Benalla Health</li> <li>- Valley Sports</li> <li>- Alpine Health</li> <li>- Strathbogie Shire Council</li> </ul>	<ul style="list-style-type: none"> <li>• Community Capacity Index <ul style="list-style-type: none"> <li>○ Review of preliminary results</li> </ul> </li> <li>• Bystander Training <ul style="list-style-type: none"> <li>○ Summary of training and participant feedback</li> </ul> </li> <li>• Alpine Health Gender Audit</li> <li>• Murrindindi Shire Council Gender audit</li> <li>• Update Local Government Working group</li> <li>• Final Project Report steering committee Input <ul style="list-style-type: none"> <li>○ What worked?</li> <li>○ What didn't?</li> <li>○ What would we do differently?</li> </ul> </li> </ul>
November 26	<ul style="list-style-type: none"> <li>- DoJR</li> <li>- Benalla Health</li> <li>- Alpine Health</li> <li>- Strathbogie Shire Council</li> <li>- WHGNE (x2 representatives)</li> <li>- Digital Marketing consultant</li> </ul>	<p>Presentation summarising the key achievements and activities undertaken by the steering committee throughout the projects three years.</p>

## Appendix 2: Courageous Conversations Resources

Resource	Year Produced	Purpose	Utilisation
<b>Workplace Checklist</b>	2015	To be used in team or leadership meetings, enabling discussions regarding gender, equity, inclusivity and unconscious bias to occur. Identifies areas where further action may be taken, and provides resources to support this.	The checklist was utilised in a facilitated conversational manner at a Regional Executive Crime Prevention Meeting on June 22, 2015. Positive feedback was provided, and prompted regional DoJR to further investigate unconscious bias and include gender in planning.
<b>Representation Checklist</b>	2015	To identify the level of diversity within work teams, boards, management. Provides evidence to prompt further action.	
<b>Charter</b>	2013	Provides a framework organisations can adopt to promote respect and equity within their setting. The charter encourages organisations to take action on the determinants of VAW.	Charter has been adopted in 19 organisations in Benalla, as part of their White Ribbon Supporters program.
<b>Charter Flyer</b>	2014	Offers an overview of the charter, and outlines actions you can take to progress the charter's statement of commitment.	
<b>Key Terms and Definitions</b>	2014	Defines health promotion and PVAW jargon terms, providing a common understanding.	
<b>Welcome to Courageous Conversations</b>	2014	Explains the key messages of the Courageous Conversations campaign, and encourages individuals to become involved.	
<b>Continuum; What is the link between Gender stereotypes and VAW</b>	2015	Uses research and evidence to demonstrate the link between gender stereotypes and the perpetration of VAW.	Has been utilised and adapted by Women's Health Gippsland on the "Make the Link" website, and by the Hawkesbury Women's Centre in NSW.
<b>Whole of School approach poster</b>	2015	Provides a framework to begin conversations with schools, outlining actions they could take to undertake whole of school approach.	
<b>Stats and Facts</b>	2013	Provides evidence and statistics on the then current state of VAW in Australia.	

## Appendix 3: Evaluation Results

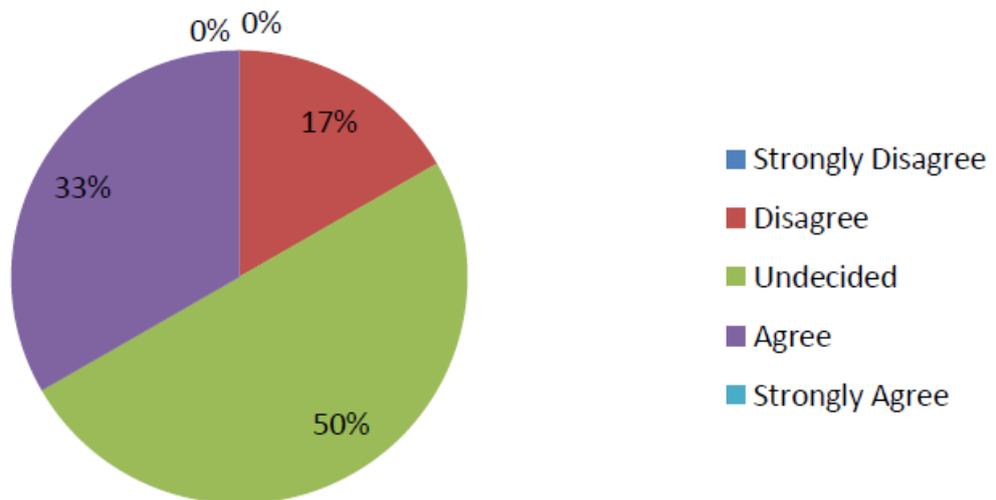
### Overview of capacity building workshops

Workshop	Date	Purpose	No. of Attendees
Evaluation Workshop	May 17, 2013	Identify tools to support the evaluation of strategy key activities	5
Social Marketing Workshop	October 3, 2013	To develop the regional PVAW campaign brand and key messages	8
VicHealth PVAW Leadership Course	November 21, 2013	To build the capacity of leaders to understand and take action on PVAW	18
RE-AIM evaluation workshop	February 20, 2014	To identify key evaluation questions and methods data collection	13
Becoming a Male Ally Workshop (Professionals)	August 27, 2014	To build knowledge of PVAW, and strategies to engage men in PVAW	32
How to Become an Ally Workshop (Benalla Saints)	August 27, 2014	To build knowledge of PVAW, and strategies to engage men in PVAW	50
NTV Bystander Workshop facilitated by Rodney Vlais	November 1, 2014	To increase knowledge of PVAW, and to build understanding of how to take action on the determinants of VAW in a range of settings	31
Courageous Conversations Bystander Workshop Shepparton	August 6, 2015	Participants would gain; <ul style="list-style-type: none"> <li>• Understanding of the bystander effect</li> <li>• Comprehension of concepts of sex &amp; gender</li> <li>• Recognition gender inequities and sexism</li> <li>• Understanding of the determinants of VAW</li> <li>• Support and strategies to conduct courageous conversations that can change environments, cultures and structures</li> </ul>	24
Courageous Conversations Bystander Workshop Wodonga	August 13, 2015		30
Courageous Conversations Bystander Workshop Seymour	August 20, 2015		23
Courageous Conversations Bystander Workshop Bright	October 13, 2015		14
Courageous Conversations Bystander Workshop Mt Beauty	October 27, 2015		12

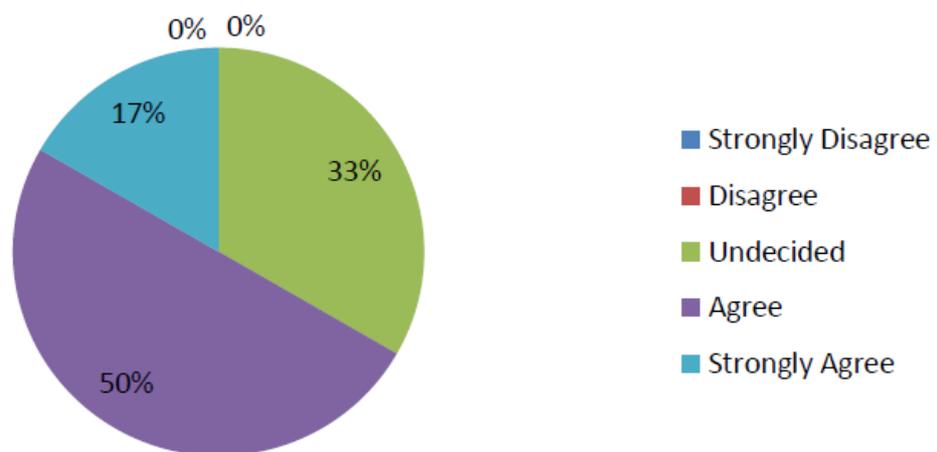
## VicHealth PVAW Leaders Course November 21, 2013

Evaluation feedback provided by 12 respondents:

### Exposed me to information that was new to me



### Provided me with knowledge which I can take back to my organisation



## Courageous Conversations Launch immediate post-evaluation findings, August 27, 2014

From a total of 33 respondents:

- 97% (n=32) said they would recommend peers and colleagues visit the Courageous Conversations website.
- 90% (n=30) said they would discuss the information and resources they received with peers and colleagues.
- 97% (n=32) said they would consciously think about how they act with men, women, boys and girls.
- 97% (n=32) said they would look out for everyday sexism and gender stereotypes.
- 81% (n=27) said they planned to make changes to their workplace as a result of the workshop.
- 81% (n=27) would take the courageous conversations charter to their organisation/club and encourage its implementation.

The below quotes are a sample of actions, participants recorded on their feedback sheet, said they would like to take following the launch:

- *“Look for opportunities to embed the ‘CC’ message into existing programs and seek avenues in community to promote.”*
- *“Review the Men’s Shed Constitution to include the four points of commitment. Sign up to the charter and issue the media statement.”*
- *“To engage my male colleagues and family members to have the ‘Courageous Conversations’ with their male peers.”*

## Becoming a Male Ally in Challenging Men’s Violence Against Women workshop evaluation findings, August 27, 2014

Participants were asked to rate their agreement with two statements on a scale of 1 to 10, which produced the following results:

**Today my knowledge about gender inequity increased.**

1 Disagree Strongly	2	3	4	5	6	7	8	9	10 Agree Strongly
			1	2	6	4	8	5	3
							25%	15%	10%

**This workshop increased my knowledge and awareness of masculinity and its implications for violence against women.**

1 Disagree Strongly	2	3	4	5	6	7	8	9	10 Agree Strongly
			2	2	3	4	9	6	3
							29%	19%	9.5%

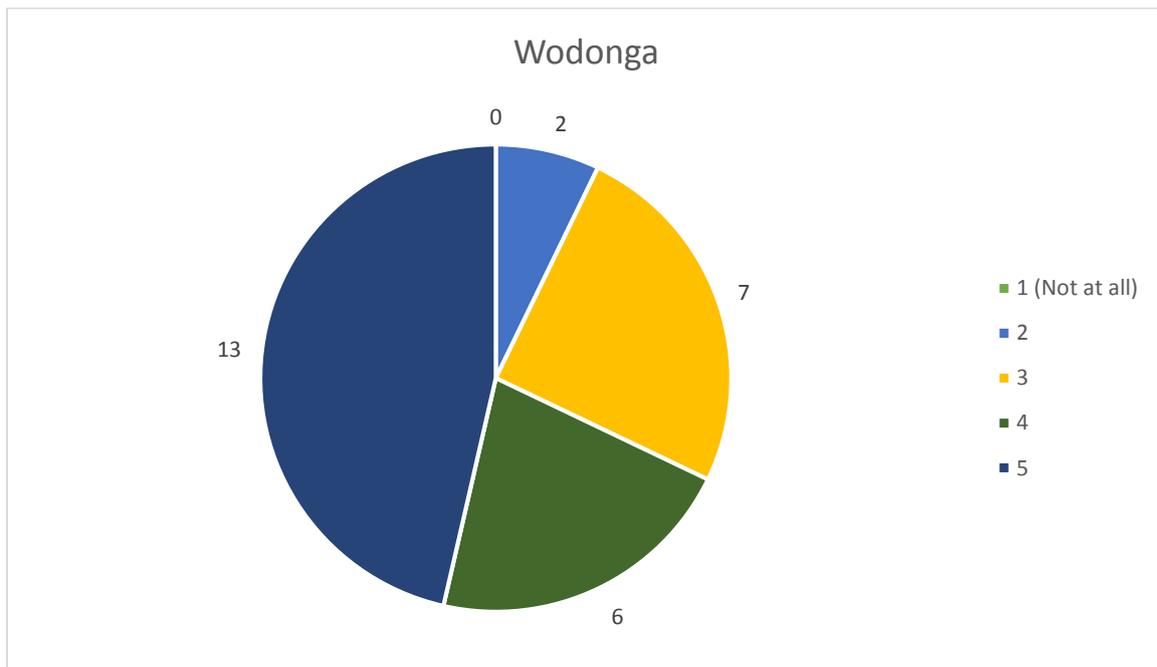
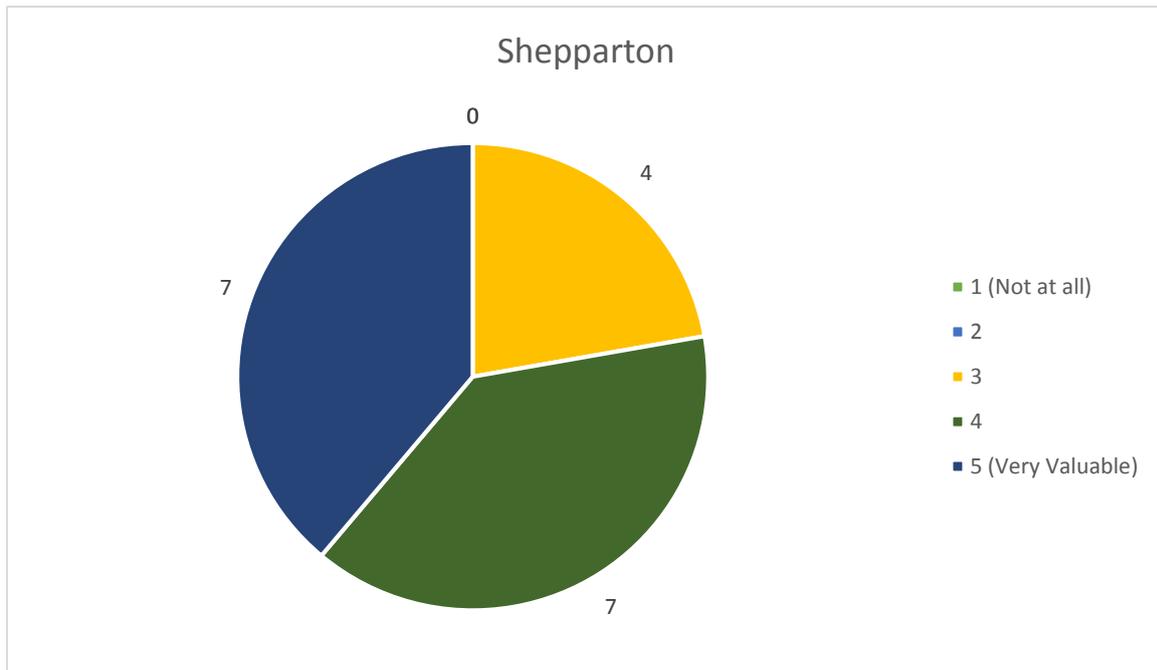
Average scores for these two items were 7.5 and 7.6 respectively.

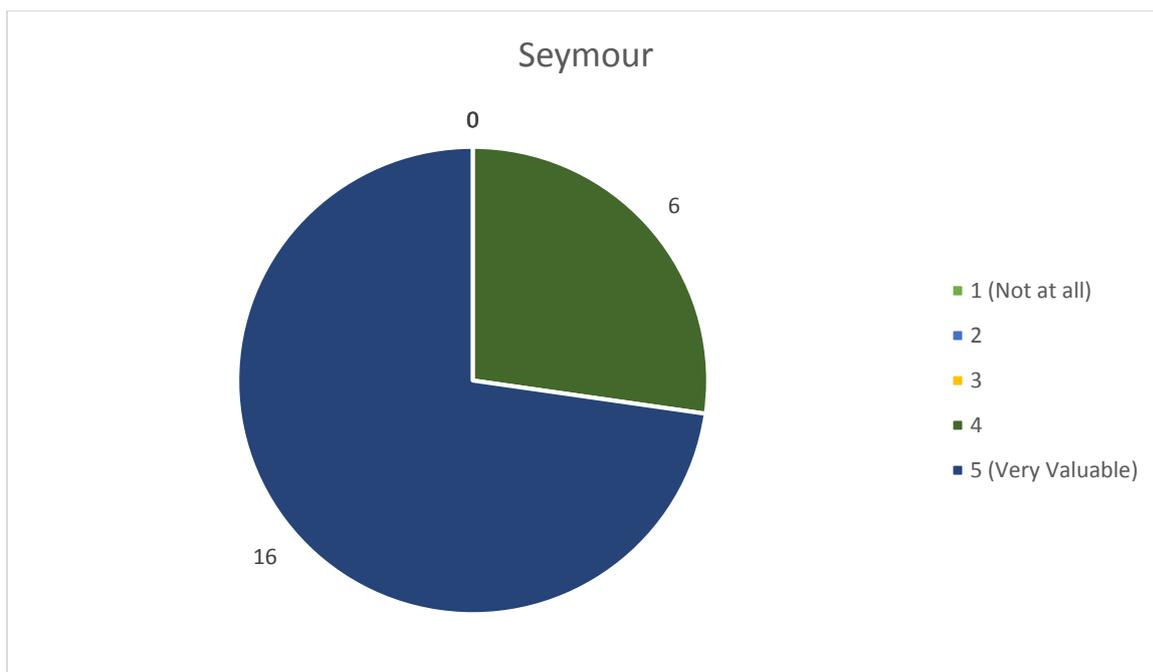
The highest scores were found from those working directly in the field of domestic violence or social work (9.5 and 9.7 for the two items), and the lowest scores from those working outside the health and social welfare field (6.7 and 6.7 for the two items).

## Courageous Conversations Bystander Roadshow workshop evaluation, August 2015

Participants were asked to complete a feedback sheet immediately post completing the workshop. The results of the Shepparton, Wodonga and Seymour workshops are summarised in the table and graphs below.

### Question 1 – How valuable was today’s training session for your work?





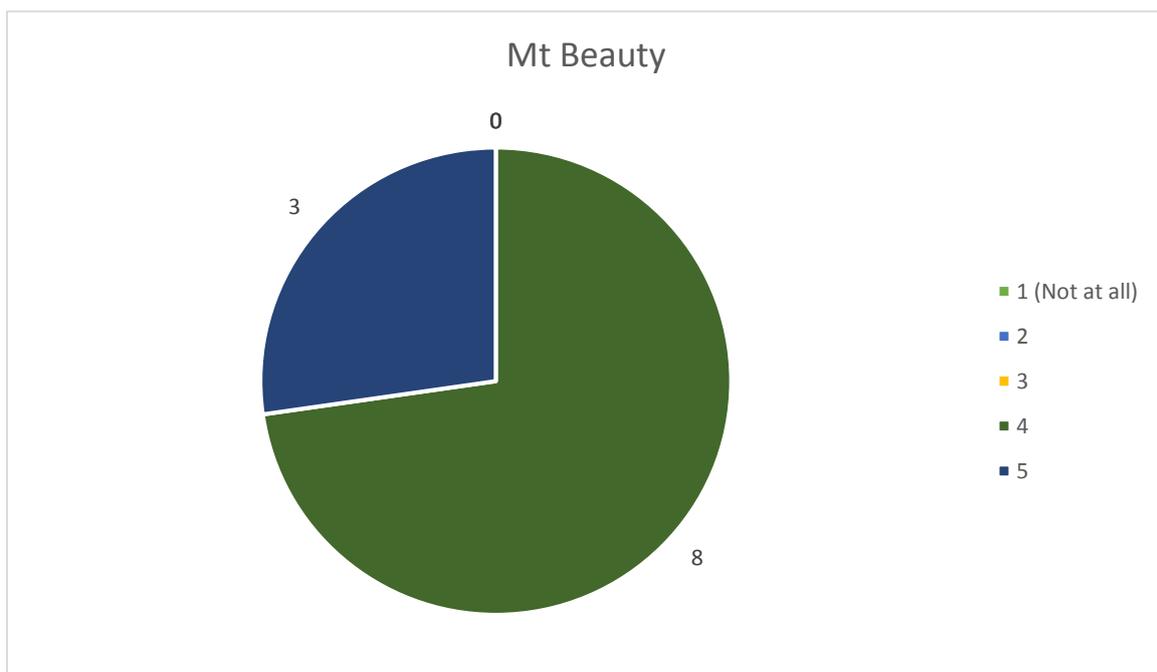
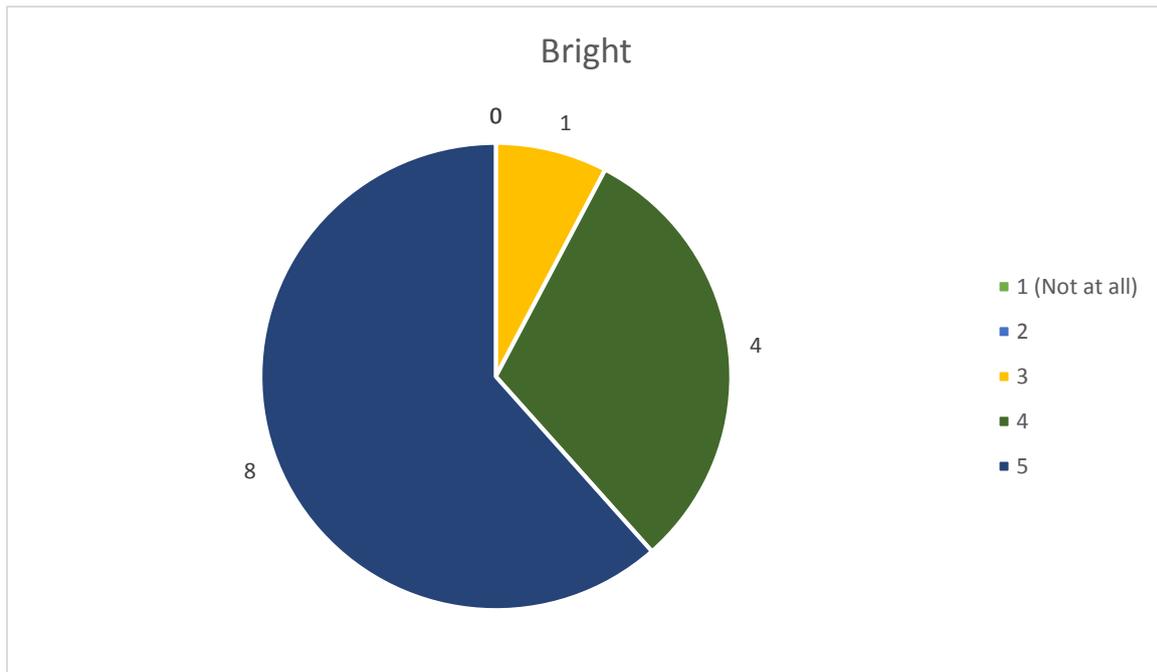
Location	Shepparton	Wodonga	Seymour
<b>Question 2: What did you find most valuable from today's training?</b>	<p><i>"Benevolent sexism - &gt; it is good to have some terminology around this type of 'less obvious' sexism"</i></p> <p><i>"Taking action – Direct, Indirect, Distraction, Protocol"</i></p> <p><i>"Pyramid information. Where violence against women stems from and can lead to. Receiving information about courageous conversations"</i></p>	<p><i>"I think sharing examples opened people's minds to the breadth of scenarios where sexism can take place"</i></p> <p><i>"Strategies 'the everyday person' can use and how small actions by us may actually save a life later on"</i></p> <p><i>"Some ways to challenge gender stereotypes, looking through gender goggles"</i></p>	<p><i>"Having my ingrained values challenged"</i></p> <p><i>"Understanding the importance that gender stereotyping plays in VAW"</i></p> <p><i>"The ability to look at courageous conversations in all areas of life – not just workplace"</i></p>
<b>Question 3: What actions will you take following today's training?</b>	<p><i>"I am very keen to use it in my world also to share the info with my community services diploma class"</i></p> <p><i>"Be more courageous when"</i></p>	<p><i>"Going through resource pack and discussing content in my workplace and at home"</i></p> <p><i>"Take all back to work, read over and think about boys I am raising"</i></p> <p><i>"Continue to speak up about issues including"</i></p>	<p><i>"Speak up more, challenge more, joke less (put up with less sexist jokes)"</i></p> <p><i>"Put it into practice, talk openly with my children (sons and daughter)"</i></p>

	<i>witnessing sexist comments etc. Start changes in my household, try not to be so gender biased"</i>	<i>attitudes to females/stereotypes/roles of sexes etc. etc."</i>	
<b>Question 4: What could be improved?</b>	<i>"Improved printing, font too small to read"  "More time for group discussion"</i>	<i>"The description of the triangle task was difficult to understand, great day though outstanding"  "Needs to be a day session and more discussion on tools to assist when confronted"</i>	<i>"More scenarios – maybe in small groups where we get up and act out" "Nothing – awesome presentation! Thank you"</i>
<b>Question 5: What additional information or training would you like?</b>	<i>"Men specific training &gt; We know sexism hurts women, how do we get men to see the damage to them and buy in?" "Follow up training. Could the training also address cultural considerations of what violence against women and children is" "Train the trainer so we can deliver this training within our own workplaces" "Further training in this area to be provided – keep at it – repetition promotes learning"</i>	<i>"Identifying signs of VAW, strategies to respond to VAW" "More theory of Bystander Action – has there been other campaigns in other countries"</i>	<i>"I would like to see more men participating"  "Advice on practical ways to assist victims to escape violence"</i>
<b>Question 6: Other comments?</b>	<i>"Resources seem valuable" "I enjoyed the workshop and took a lot of knowledge away with me"</i>	<i>"A great training session – I hope you hold MANY more like this – at footy clubs and schools too!" "Thank goodness no role play for participants"</i>	<i>"Thank you, a very thought provoking and well-presented session" "Thank you – great resource/information"</i>

## Alpine Courageous Conversations Bystander workshop evaluations, October 2015

Participants were asked to complete the same feedback sheet as utilised in the Bystander Roadshow immediately after completing the workshop. The graphs and table below summarise the results from the Bright and Mount Beauty workshops.

### Question 1: How valuable was today's training for your work?



<b>Location</b>	<b>Bright</b>	<b>Mt Beauty</b>
<b>Question 2: What did you find most valuable from today's training?</b>	<p><i>"The triangle/pyramid showing layers leading to murder"</i></p> <p><i>"Drawing the connection between everyday sexism and gender stereotypes -&gt; family violence"</i></p>	<p><i>"Being made more aware of the pyramid of events – small things we let slide 'normalising' unacceptable behaviour"</i></p> <p><i>"Better understanding of the bystander effect and strategies available to us all"</i></p>
<b>Question 3: What actions will you take following today's training?</b>	<p><i>"Advocate for equality and removal of stereotypes"</i></p> <p><i>"Challenge workplace sexism/gender stereotypes and advocate for women in workplaces"</i></p>	<p><i>"Develop a collection of minimum of 6 easy to remember conversation starters"</i></p> <p><i>"Not letting things slide. Being proactive in speaking up but not in a radical confronting way (hopefully!)"</i></p>
<b>Question 4: What could be improved?</b>	<p><i>"Maybe a little more graphics – pictures say 1000 words"</i></p> <p><i>"More time"</i></p>	<p><i>"Nothing comes to mind"</i></p> <p><i>"More sessions"</i></p>
<b>Question 5: What additional information or training would you like?</b>	<p><i>"Training in all schools and workplaces"</i></p> <p><i>"Family violence awareness training"</i></p>	<p><i>"Further bystander scenarios"</i></p>
<b>Question 6: Other comments?</b>	<p><i>"Thank you"</i></p> <p><i>"Great training. Great facilitators – important messages"</i></p>	<p><i>"Very enlightening and inclusive of information to encourage conversations"</i></p> <p><i>"Great facilitators and lots of good take-home information"</i></p>

## RE-AIM framework workshop outcomes

The RE-AIM workshop was held on February 20, 2014, with 13 participants attending. The tables below outline the proposed data collection methods identified by workshop participants, as well as further comments and suggestions from the external evaluator.

Local Government/Community	
Workshop recommended Data collection	Evaluators comments/suggestions
-Number and % of councils adopting policies -Number of community groups adopting policies	Would be helpful to look at % of groups adopting, out of those approached during the work
Sporting Clubs	
Workshop – recommended data collection	Evaluators comments/suggestions
Adoption – number of clubs adopting the charter and PVAW actions	Would be helpful to look at % of clubs adopting, out of those approached during the work
Adoption – number of training sessions and media releases	
Reach – club member awareness of charter/training/education sessions Adoption – interviews/surveys with club members/families/players Implementation – measurement pre and post training in knowledge/awareness (and changes from year 1 to year 2)	Resource intensive to carry out Ethics approval ideally required Can draw on instruments listed within worksheets Possibility of setting up part of work as student project, but would require preparation beforehand
Charter	
Workshop recommended data collection	Evaluators comments/suggestions
Adoption: Number and percentage of organisations who have adopted charter (very high priority) Reach: People employed within/members of organisations adopting charter (medium priority) Implementation: employment positions of males versus females in organisations that have adopted charter Audit of organisations to examine gender equity policies and practices and organisational integration (very high priority)	Use of Interaction gender audit?
Implementation: surveys of individuals in adopting organisations about knowledge of charter and gender equity	Resource intensive to carry out Ethics approval ideally required Can draw on instruments listed within e and j in list on worksheets Possibility of setting up part of work as student project, but would require preparation beforehand
Maintenance: pre and post surveys (annual) to assess change in knowledge and wellbeing assessment	Difficulty of attributing any change found to the charter itself

## Formative evaluation findings – May 2014

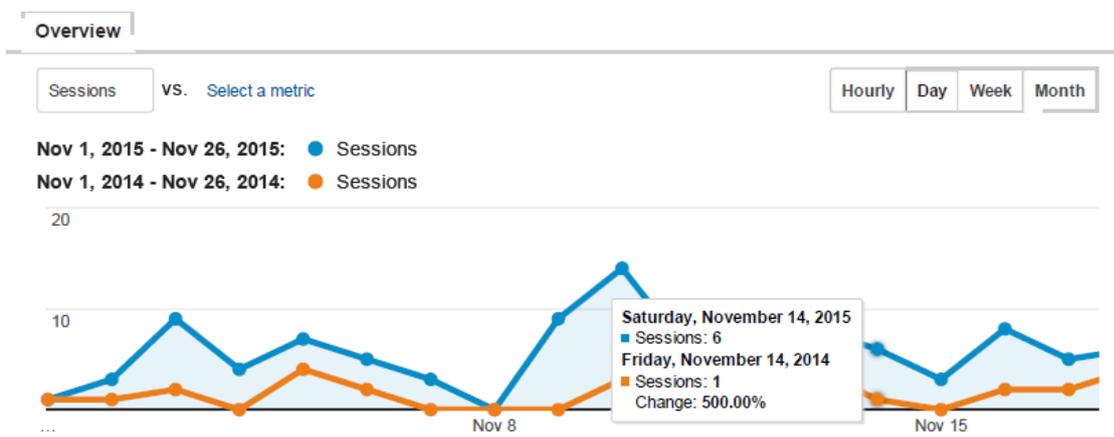
Theme	Summary of Finding
Commitment	Strong commitment expressed by all stakeholders.
Breadth of work	<p>Tension between the short-term project funding and the desire to see societal change in this timeframe, yet in reality this social change requires a generational change, with outcomes not evident for about 20 years.</p> <p>High diversity of organisations involved in the project.</p> <p>Complexity in project processes, in particular implementing all the different components of the strategy.</p>
Ownership	Project was seen most often as being the lead agency’s project, rather than a joint venture.
Participation	<p>Benefits of participation in the steering committee and strategy (such as knowledge transfer).</p> <p>Not all councils across the Hume region participating in the strategy was identified as an issue.</p> <p>Staff turnover affecting the participation in the steering committee.</p>
Communication	<p>Challenges involved in multiagency work; a consistent language was not shared across the multiple disciplines involved.</p> <p>Effective communication with all stakeholders.</p>
Sustainability	<p>Local Government network continuing to meet beyond the project funding identified as an important element towards sustainability.</p> <p>Evaluation of the project to contribute to the evidence base.</p>

## Website evaluation data

The table below summarises the engagement with the website and average usage for periods throughout 2014 and 2015. The figures indicate an increase in engagement over the course of the project.

Courageous Conversations website statistics Month	Page views	Sessions	Average session duration	Users	Returning visitor (%)	New visitor (%)	Bounce rate
October 2014	265	102	2:28	77	34.3%	65.7%	57%
November 2014	114	60	1:34	54	18.3%	81.7%	73%
July 2015	871	137	9:55	85	43.1%	56.9%	44%
September 2015	463	192	2:49	144	32.3%	67.7%	60%
November 2015	865	244	5:11	166	30.3%	60.7%	54%

The Google analytics image below further demonstrates the increased engagement, highlighting an increase in the user sessions between 2014 and 2015. Google analytics was the prime source to track website use and engagement.



## Hume Region PVAWC Strategy sustainability plan key actions and rationale December 2014

Program element to be sustained	Explanation
Courageous Conversations website	The website is the key communication tool to share project learnings and resources, in which users can readily access this information at their convenience and share with peers, and colleagues. It is imperative the website is sustained to communicate this information to stakeholders beyond the life of the project funding.
LG PVAW 12 (Local government committee)	The group continuing would ensure there are passionate individuals within councils that would advocate for PVAWC to remain on their council's agenda and there would be collective PVAWC action undertaken by Local Government across the Hume region.
Bystander Training	Continuing the delivery of this Bystander training will ensure members across the community have the understanding and skills to have their own Courageous Conversation and can effectively communicate PVAWC messages to their peers.
Courageous Conversations resources	Having the Courageous Conversations resources available on the website provides opportunity for stakeholders to have complete access to the campaign materials.
Courageous Conversations Facebook and Twitter page	Facebook and Twitter have proved effective mediums in sharing media and resources relating to gender equality and engaging the community in PVAWC. It has assisted in raising awareness of the inequalities, and reinforcement of gender stereotypes, as well as promoting the positive actions undertaken within the sector.
Partnership with Sporting Assemblies (CARN and Valley Sports)	Sporting clubs are key influences in rural communities in shaping social norms and attitudes. There is strong potential in this area and opportunity to continue to build upon the work completed.
Gender Equity Plans for Organisations	Organisations undertaking gender audits and developing gender action plans is innovative work, therefore providing support and valuable resources to assist organisations is imperative, as well as sharing the knowledge base of those who have undertaken the pioneering gender audit pilots.

## Appendix 4: 16 Days of Activism – Local Government Activities in Hume Region

Organisation	Date	Spokes-person	Key Message
	Nov 25		-Introduction to the 16 Days of Activism campaign -Celebration of White Ribbon Day and International Day for the Elimination of Violence against Women -Informing audience Courageous Conversation will be showcasing the Courageous Conversations and actions regional leaders have had to PVAW
Mitchell Shire Council	Nov 27	Health and Wellbeing Officer	Discussed the “Elly the Elephant” campaign, developed and coordinated in partnership with Nexus primary Health. The aim of the campaign is to engage to community in a conversation on VAW and raise awareness.
Strathbogie Shire Council	Nov 29	Mayor Council CEO	Discussed the activities and achievements of Strathbogie Shire in relation to PVAW <ul style="list-style-type: none"> <li>- “A Right to Respect” written into CEO’s KPI’s – one of the first councillors in Victoria to do so</li> <li>- Both CEO and Councillor White Ribbon Ambassadors</li> <li>- Partnership with councils in NE Victoria engaged in PVAW</li> </ul> Discussed the Bystander action and the leader in the community having <u>Courageous Conversations</u>
Mansfield Shire Council	Nov 30	Community Wellbeing Leader	Highlighted the Mansfield communities RRR campaign; <i>Respect for self, Respect for Others and Respect for our World</i> , demonstrating how the whole community is engaged in the campaign <ul style="list-style-type: none"> <li>- Mansfield Courier publishes an article each week examining the key messages of the RRR campaign</li> <li>- Partnerships with local sporting clubs</li> <li>- Partnerships with schools</li> <li>- RRR merchandise</li> </ul>
Rural City of Wangaratta	Nov 30	CEO	Discussed the actions Council is undertaking to promote respect and equity <ul style="list-style-type: none"> <li>- Diversity and gender balance amongst senior management structures</li> <li>- Equal Employment Opportunity Committee</li> <li>- Flexible work practices for Mothers and Fathers</li> <li>- Organisational survey; seeking feedback on diversity at council</li> </ul>
Alpine Health	Dec 1	CEO	Summarises the whole of organisation approach to gender equity taken at Alpine Health, highlighting Courageous Conversations are encouraged within the organisation and community

Wodonga City Council	Dec 2	CEO	Summarised actions the council has undertaken in regards to VAW: <ul style="list-style-type: none"> <li>- The council has worked with a diverse range of organisations in the community to support women and victims</li> <li>- Lobbied for funding</li> <li>- Leave in EBA (for victims of intimate partner violence)</li> <li>- Community awareness raising events</li> <li>- White Ribbon Ball</li> </ul>
Towong Shire Council	Dec 3	Deputy Mayor	Discussed healthy and respectful relationships between men and women, and challenging rigid gender stereotypes Encourages Courageous Conversations
Murrindindi Shire Council	Dec 4	Mayor and CEO	Discussed the importance of the Gender Audit undertaken by the council: <ul style="list-style-type: none"> <li>- Provided opportunity to begin conversations and assess gender equity within the organisation</li> <li>- Gender equity improves decision making in council and good governance</li> </ul>
Murrindindi Shire Council	Dec 5	Mayor	Highlighted the benefits of the gender audits to the council and community Development of the council charter
Benalla Rural City Council	Dec 7	Councillor	Summarised the activities the Benalla community has undertaken in relation to PVAW: <ul style="list-style-type: none"> <li>-Benalla Health and Wellbeing committee prioritising PVAW</li> <li>-Six White Ribbon Community marches (increased engagement in the community)</li> <li>-White Ribbon Ambassadors sign the White Ribbon Oath</li> </ul>
Greater Shepparton City Council	Dec 8	Community Strengthening Team Leader and Manager of Neighbourhoods	Highlighted the numerous activities the council participated in in 2015: <ul style="list-style-type: none"> <li>- Sponsored tickets to the White Ribbon Conference</li> <li>- The council hosted a White Ribbon march on November 25</li> <li>- The council's Community Safety committee continue to work with service providers in regards to PVAW</li> <li>- Partner in the Hume Region PVAWC strategy</li> <li>- Promoted the local media campaign "Safe Homes, Safe Families"</li> </ul>
Indigo Shire Council	Dec 9	Mayor and Councillor	Discussed the PVAW through healthy and respectful relationships between men and women. Highlighted the importance of role models demonstrating respectful behaviour
Wangaratta Magpies Football and Netball Club	Dec 10	Club president	Promoted the importance of: <ul style="list-style-type: none"> <li>- Men having conversations on gender equity; and</li> <li>- Members of the club receiving messages of respect and equality.</li> </ul>

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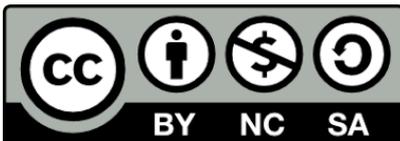
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