The Respect, Responsibility and Equality program

A summary report on five projects that build new knowledge to prevent violence against women

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To better promote respectful relationships between men and women there must be understanding of the causes of violence against women, particularly gender inequality and the unequal distribution of power and resources between men and women.
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Violence against women: A public health priority

VicHealth has a longstanding commitment to research, policy and programming in preventing violence against women before it occurs.

In the research arena, VicHealth and its partners have undertaken major studies that:

- reveal the health costs of intimate partner violence (VicHealth 2004)
- explore community understandings of violence against women and the extent of violence-supportive attitudes in our communities (VicHealth 2006; VicHealth 2010).

The most important theme for action is promoting equal and respectful relationships between men and women.

VicHealth has developed a framework to guide primary prevention initiatives.

- The framework uses a public health approach to address violence against women. Preventing violence before it occurs: A framework and background paper to guide the primary prevention of violence against women in Victoria draws on an international evidence review and experience in the field tackling other health problems (VicHealth 2007a).
- The framework presents a theoretical and evidence base for preventing violence before it occurs by identifying key themes for action, settings* for primary prevention, and strategies that can be implemented in mutually reinforcing ways.
- The framework is used today by a range of partners – government and non-government agencies alike – in developing primary prevention policy and initiatives.

VicHealth has overseen a substantial program of partnership activity to prevent violence against women through the Respect, Responsibility and Equality funding stream.

- Phase I (2007–2008) provided 12-month grants to non-government and community organisations to develop settings-based primary prevention activities. A total of 29 projects were initially funded (VicHealth 2007b).
- Phase II (2008–2011) provided grants to ‘scale up’ five of the original 29 projects for an additional three years to consolidate prevention activities in their settings.
- Phase III (2011–2012) provided additional purpose-specific funding to the scaled-up projects to develop transferable tools, resources and ‘how-to’ guides. This funding also supported the project partners to develop strategies for program sustainability.

The tools, resources and evaluation reports from the Respect, Responsibility and Equality program are available at www.vichealth.vic.gov.au/guidetoequality

This report provides a summary of the activities, findings and learnings of the five scale-up projects funded through Respect, Responsibility and Equality Phase II, and highlights their contribution to the broader field of policy and practice in preventing violence against women.

One in three Australian women (34%) who has ever had a male intimate partner has experienced at least one form of violence from their partner in their lifetime.

Intimate partner violence is found to be the leading contributor to death, disability and illness for Victorian women aged 15–44 years.

* Settings are places in which people live, work, learn and socialise.
The Respect, Responsibility and Equality project partners utilised the VicHealth framework for primary prevention to design their programs, in particular to:

1. understand the causes of violence against women, particularly gender inequality and the unequal distribution of power and resources between men and women
2. conceptualise the influence of these causes across three levels of the ecological model: individual/relationship, organisation/community and society (see model on page 4)
3. guide primary prevention activity towards key themes for action
4. select strategies for settings and population groups
5. ensure strategies work across the levels of the ecological model and are mutually reinforcing [VicHealth 2007a].

Respect, Responsibility and Equality Phase II aimed to:

- consolidate practice in the area of primary prevention
- enable research activity to assess the impacts of funded primary prevention activity
- identify models of settings-based practice that could be replicated by others.

The projects at a glance

In the Respect, Responsibility and Equality program, the five scale-up projects and lead partners were:

- **Working Together Against Violence**, led by Women’s Health Victoria, in partnership with Linfox
  
  **Setting: Corporate workplace**
  
  This project built the capacity of a male-dominated Australian corporation, with sites and a head office in Victoria, to promote respectful relationships between men and women. The project used a whole-of-company approach to achieve its objectives.

- **Baby Makes 3**, led by Whitehorse Community Health Service
  
  **Setting: Maternal and child health service**
  
  This project engaged clients of the City of Whitehorse maternal and child health service in programs to maintain equal and respectful relationships in the transition to parenthood. The programs provided a safe environment for first-time parents to explore gender norms and expectations, and understand the different impacts of these on their roles as mums and dads.

- **Northern Interfaith Respectful Relationships**, led by Darebin City Council
  
  **Setting: Faith organisations**
  
  This project built the capacity of faith leaders in Melbourne’s north to foster respectful and violence-free relationships between men and women. The project centred on a peer mentoring program and other resources for faith leaders.

- **Partners in Prevention**, led by Domestic Violence Resource Centre Victoria
  
  **Setting: Youth-focused practitioner sector**
  
  This project built the capacity of Victorian youth-focused practitioners to promote respectful relationships to young people. The project created an accessible community of practice for youth-focused practitioners, with opportunities to network, share information and participate in professional development activities.

- **Respect and Equity**, led by Maribyrnong City Council
  
  **Setting: Local government**
  
  This project strengthened the capacity of a local government in Melbourne’s west to address the underlying causes of violence against women. The project implemented a comprehensive ‘culture shift’ agenda focusing on core organisational activities – from planning and policy development to service provision, partnerships and leadership.
**An ecological approach to understanding violence against women**

- **Societal**
  The culture, values and beliefs that shape the other three levels of the societal ecology.

- **Community/organisational**
  The formal and informal social structures that impact on a person.

- **Individual**
  The developmental experiences and personality factors that shape a person’s response to stressors in their environment.

- **Relationship**
  The intimate interactions a person has with others.

[VicHealth 2007a]

All of the five lead project partners worked closely with VicHealth for the duration of the program. This unique and successful partnership model saw VicHealth resourcing the projects, and the projects maintaining regular contact with VicHealth. The high level of collaboration was fostered through:

- support and guidance on project implementation from VicHealth’s program staff
- quarterly learning circles (convened by VicHealth) that brought Project Coordinators together to provide project updates and share highlights, challenges and learnings in an open and safe environment
- a VicHealth Research Practice Leader who supported Project Coordinators in all aspects of their evaluation research activities
- a number of VicHealth-convened forums and opportunities to assist with transferring knowledge about effective practice to the primary prevention field.


Nationally, the economic cost of violence against women was estimated to be $13.6 billion for 2008–09. Without any efforts to reduce current rates of violence against women, the per annum cost to the economy is predicted to increase. The cost of violence against women will be around $15.6 billion for 2021–22.
Prevention in action: The five projects in detail

Working Together Against Violence
Setting: Corporate workplace  |  Led by: Women’s Health Victoria, in partnership with Linfox

What happens when a statewide women’s health promotion service engages an international male-dominated transport and logistics company to do something about violence against women? The answer is Australia’s first whole-of-company program to promote gender equality and non-violent norms in a corporate workplace setting.

Working Together Against Violence* was a partnership between Women’s Health Victoria and Linfox. It took place in Linfox’s operations in Victoria, including the Melbourne-based office. In 2010, Linfox had 40 different worksites across the state with nearly 2,000 employees, of whom 85 per cent were men. Meanwhile, Women’s Health Victoria had a staff team of around 20, all women.

This project is a story of relationship building, engagement, listening, respect and discovery. Along the way, it conceptualised and tested a program that sought to shift organisational culture and develop individual skills. The program became central to the project’s main objective: to strengthen the organisational capacity of a male-dominated workplace to promote equal and respectful relationships between men and women. The program was initially named Harm in the Home and is now better known as Take a Stand Against Domestic Violence: It’s Everyone’s Business.*

Take a Stand comprised three elements: lead, train and promote.
• ‘Lead’ encompassed cultural change activities including executive-level commitment and the development of policy to prevent domestic violence.
• ‘Train’ involved employees in direct participation activities to equip them to take a stand against sexist behaviour, gender norms and violence-supportive attitudes. This element was strongly influenced by bystander methods of challenging harmful social norms.
• ‘Promote’ reinforced the other elements of Take a Stand through the communication of consistent messages in the workplace.

Take a Stand worked explicitly at the individual and organisational levels of the ecological model of understanding violence against women (see page 4), and through this it aspired to community and societal change.

Project successes and impacts
The project successfully engaged the Chair of the Linfox Board, the Chief Executive Officer, and other senior management at various stages. Executive-level commitment was most evident through Linfox’s nomination of a staff member who was given responsibility to work with Women’s Health Victoria. Although by the end of the project, the policy was yet to be endorsed by the company, Linfox also allowed employees to be involved in Take a Stand during paid time.

“Through adapting practices, policies and norms, ‘organisations can equip men to undo gender by giving them the motivation, a model, and a margin of safety to deviate from conventional masculine scripts.’ In order to be effective, men as well as women must be meaningfully engaged in interventions to promote gender equality and prevent violence against women. This is what Women’s Health Victoria hoped to achieve.” [Women’s Health Victoria]

Women’s Health Victoria worked in partnership with Linfox worksites across Victoria.

* ‘Working Together Against Violence’ is the name of the project, under which the program ‘Take a Stand’ was delivered.
Over 500 employees from 11 worksites took part in the project’s training activities. Take a Stand training was found to be helpful to the majority of participants in understanding how violence-supportive attitudes and behaviours contribute to a community in which domestic violence is prevalent. After the training, participants indicated that they were more likely to challenge violence-supportive attitudes and behaviours, and had newly acquired understandings of how sexism and violence against women exist on a continuum of gender inequality.

Take a Stand posters, magnets and brochures were developed to reinforce messages from the training component. These were widely distributed throughout Linfox worksites.

Learnings
The engagement of a corporate organisation in any primary prevention project must be recognised as an ongoing process. Engagement happens over and over, as the project moves through different parts of the organisation and its sites and intersects with different managers and employees.

Community-based organisations and international companies have very different priorities, core business and ways of working. Finding a way to work together can take time. For Women’s Health Victoria, this meant learning to be the expert consultant. Such a role was in keeping with Linfox’s expectations of its partners, but somewhat different to the usual consultative approach of a women’s health service. Taking on this role was critical to moving the project along.

Using language that companies are comfortable with is critical to success. Over time, the company developed a readiness for more direct language, and Take a Stand was adopted. But by being flexible in the first instance, Women’s Health Victoria was able to progress the project to this point.

Cultural change in any organisation is a complex task that requires time and leadership. When the organisation is male-dominated and the desired change is along the lines of gender equality, this becomes almost impossible to achieve – especially within project-funded timelines. Projects can, however, set their sights on ‘wins’ that show the organisation is heading in the right direction. Markers of success include the nomination of a Linfox staff member as a program contact point or the development of policy to ensure the continuation of ‘lead, train and promote’ activities (and a whole-of-company approach) without the community partner.

For more information:
www.takeastand.org.au

“We are now implementing Take a Stand. The words are not being questioned. In the journey from Harm in the Home to Take a Stand we have learnt a lot.... The words we use have moved forward and show us how far we have come.”
(Women’s Health Victoria)

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(Women’s Health Victoria)

“Lunch-time training sessions were provided for Linfox staff with a focus on ‘bystander’ action.”

“The blokes get a new view on things and start thinking more about their actions.”
(Linfox manager)

“I’ve said to a friend, ‘Why are you talking to your wife like that?’”
(Linfox employee)

“It made me realise that seemingly inconsequential comments can have an impact.”
(Linfox employee)
The premise of Baby Makes 3 is simple: when couples are transitioning into parenthood, there is a unique window of opportunity to influence attitudes and behaviours in the direction of greater gender equality – now and for the future.

The birth of a first child is often a major turning point in the lives of heterosexual couples as they take on new roles as mothers and fathers. Despite changes to notions of the family over recent years, such roles continue to be shaped by traditional gender norms and expectations about men and women in society, and the role of women in the home. While the transition to parenthood can be a time of great joy for many, it can also be marked by a diminishing of equality within couples accompanied by an assertion of rigid gender roles and identities. Programs that focus on lifestyle and relationship changes occurring at this time – from a gender equality perspective – can do much to build equal and respectful relationships and, by extension, protect couples from the risk of intimate partner violence occurring in their lives.

“Attitudes to gender roles have been shown to become more traditional during the 12 months following the birth of a child.... The transition to parenthood, therefore, presents a major opportunity to engage and work with both men and women. To challenge traditional attitudes to gender roles, and to promote gender equality during this key life-stage in which gender roles are shaping the level of equality in relationships.” [Whitehorse Community Health Service]

This was the focus of Baby Makes 3, a community-development project led by Whitehorse Community Health Service in partnership with the maternal and child health service in the City of Whitehorse. The project took place in maternal and child health service sites across the municipality, where hundreds of first-time parents are engaged in universal services in any given year.

The project developed and tested a three-week discussion-based program for first-time parents that explored their lifestyle and relationship changes from a gender equality perspective. The program was the first of its kind anywhere in the world. The project also provided professional development opportunities to local agencies to build their organisational capacity for promoting equal and respectful relationships to those accessing their services. Fathers’ nights were another important component of the project’s interlinked strategies. The project thus operated across the individual, organisational and community levels, working with first-time parents, the agencies that support them, and broader norms and expectations that shape lived experience.

The three-week program offered couples a safe environment to explore topics such as lifestyle and relationship changes, gendered expectations of new mums and dads, the gendered division of household labour and childcare, equality as the basis of a healthy relationship, intimacy after the birth of a child, dealing with conflict, and communication. Program sessions were delivered by male and female facilitators so that equal and respectful gender relations could be modelled. This pairing allowed for separate break-out discussion activities for mums and dads.

“Many of the group activities involve small group discussions that are undertaken in single-sex groups of mums and dads, with each group reporting back. This process allows the dads in the group to hear the mums’ perspective, and vice versa. It presents a social perspective... [showing] that issues related to gender roles and expectations are common concerns for all couples and as such, deserve a considered response.” [Whitehorse Community Health Service]
Project successes and impacts
The project delivered 17 group programs and reached over 120 couples. An overwhelming majority of participants found the program to be enjoyable, relevant and helpful, with couples indicating that they valued the opportunity to talk with others who were going through the same experiences.

“I kept telling the guys at work, ‘Guys, you should be doing this course.’ And they said, ‘Why?’ And I said, ‘Just flipping do it because it will open your eyes.’” [Dad]

“I didn’t understand the expectations on women and particularly society’s expectations. Once I saw it, I thought, ‘Well, it’s not only a battle, it’s a battle that [my partner] needs me to be a part of… I’ll put my hand up and say that was pretty good for me.’” [Dad]

“It got my husband and I talking about things that we hadn’t thought or previously talked about.” [Mum]

“I think I was hands on to start with, but now I have an understanding of why it’s important to be hands on for a balanced and well-rounded household.” [Dad]

As a result of the program, couples were more likely to ‘strongly agree’ that gender equality is an important component of a healthy relationship. And while both mums and dads demonstrated an increased awareness of the influence of gendered norms and expectations on their roles as parents, for some dads this insight was a revelation.

Couples acquired a language for discussing their experiences of parenthood, with some even putting in place actual changes in their day-to-day lives to ensure greater gender equality.

“Given its ability to constructively engage large numbers of first-time parents, particularly men, Baby Makes 3 has the potential to form an integral part of a population-wide approach to the primary prevention of violence against women.” [Whitehorse Community Health Service]

Learnings
Without doubt, couples completing the program showed an increased awareness of the influence of gendered social norms on their roles as parents, particularly on the role of mothers. One of the most surprising results from the project’s evaluation was the extent to which couples perceived their lives as having less (not more) equality by the end of the program. This was due to a greater awareness by all participants of the enormous amount of work done by mums. At present, such work is simply expected of women, even though it is undervalued by individuals and society and not valued equally to paid work. This work is largely invisible to many people, including the couples themselves before the program commenced – but not after.

One of the most significant learnings of the project is that while the program improves couples’ support for gender equality, it will take much more than Baby Makes 3 to produce the societal change necessary for an equal valuing of the work of women in households and families. Only then will the structural conditions be in place for gender equality to flourish in the home.

In the meantime, the project shows that gender equality is something that is strongly desired by first-time parents in contemporary Australia. If it is integrated as part of maternal and child health service delivery, Baby Makes 3 could potentially influence the transition to parenthood in the direction of greater gender equality for many more couples.

For more information: www.wchs.org.au
The influence of factors that contribute to violence against women reaches deep into many facets of life. The influence of gender inequality and gender norms is visible in personal relationships and social settings. This means primary prevention can occur in the many places people go to live, work, learn and socialise – and this includes faith communities and organisations.

The main aim of the Northern Interfaith Respectful Relationships project was to increase the capacity of faith leaders, organisations and communities to take on primary prevention work. Progress towards this aim remained a challenge throughout implementation. The project took place in one of the most male-dominated and inherently patriarchal of all settings. In addition, faith organisations are built on the basis of paradigms and understandings that do not shift easily – especially when the changes sought are based in knowledge other than sacred scripture.

The project worked directly with faith leaders on strategies at the individual and organisational levels of the ecological model of understanding violence against women [see page 4], with a view to community and societal level change.

“The idea of even attempting to do this work in the faith setting was often met with a great deal of surprise.” [Project Coordinator]

When faced with major obstacles, the project found a way through. Most significantly, the project introduced and tested a primary prevention peer mentoring program for faith leaders. It produced a tool kit for faith leaders to bring primary prevention to their communities. The project also resulted in a primary prevention strategic policy for the upper level of a faith organisation, the Anglican Diocese of Melbourne.

The peer mentoring program – the project’s centrepiece – was introduced to offset difficulties associated with conventional forms of professional development, such as training. Leaders of different faiths, and indeed leaders within faith denominations, can have divergent views about gender roles and gender equality, and the peer mentoring approach allowed for sustained levels of discussion and reflection in ways that training did not.

Another advantage of the peer mentoring approach was that it ensured the focus of the project stayed unequivocally on primary prevention, as this had been more difficult in earlier stages of the project. The content of the peer mentoring program was broken down into six topics: ‘Why promote respectful relationships’, ‘Gender roles and definitions’, ‘Gender equality, equity and power’, ‘Gender and violence’, ‘Promoting respectful relationships’, and ‘Where to from here’. Mentor and mentee pairs discussed one topic each time they met so that shared learning was built over time. Each session was structured so that topics could be discussed in relation to personal life, faith community, and society – exactly along the lines of the ecological model. Resources accompanied every session, and included examples of primary prevention actions that are appropriate for the faith setting.

“Peer mentoring is a process in which colleagues can share knowledge, experiences and learnings... in a context of mutual support and encouragement. Peer mentoring assumes that one colleague in a pair will have more experience [the mentor] than the other [the mentee] but that the process is one of growth in learning for both. The more intimate and personal nature of a mentoring relationship also allows for a greater depth of sharing than can be achieved in other types of professional development contexts, such as training workshops.” [Darebin City Council]
Project successes and impacts

Four pairs of mentors and mentees completed the program: three pairs of women and one pair of men. All were from the Christian tradition, although three pairs were of different denominational backgrounds. This was despite widely promoting the program through various interfaith networks. Most participants had prior awareness of the problem of violence against women and/or a primary prevention response.

By the end of the program, participants reported an improved understanding of the determinants of violence against women, and more confidence in responding to unacceptable comments or behaviour towards women. They expressed greater confidence in putting primary prevention into practice; for example, by including respectful relationships in pre-marriage groups and counselling.

One other tangible impact of the project is that a major faith organisation now has a strategic policy in place that is firmly based in primary prevention principles. Implementation of the strategic policy will ensure that agencies and parishes of the Anglican Diocese of Melbourne have an authorising and supportive environment to undertake future primary prevention activities.

Learnings

Much can be learned from the Northern Interfaith Respectful Relationships project. The project started out with an interfaith approach, as suggested by its name. An important learning is that an intrafaith approach to primary prevention is more feasible. Local interfaith networks have unstable memberships, are not necessarily representative of faith leaders, and lack the capacity to drive change in individual faiths. Furthermore, members often bring different views on gender roles and gender equality based on their faith. This explains why the project struggled to achieve any coherent interfaith activity. It was far more successful when it worked within a single faith; that is, Christianity.

The project showed that faith leaders who are willing to be effective change agents exist and are active within Christianity. It is not possible to know whether the peer mentoring program or strategic policy development could work in other faiths; however, evaluation findings demonstrate strong potential for these strategies to be expanded to larger pool of Christian faith leaders and leadership structures.

When working in the faith setting, the background of Project Coordinators can make a difference. The Project Coordinator who developed the peer mentoring program and toolkit was an ordained Anglican priest. He came with understandings of the faith setting and the interfaith movement, which helped to progress the project towards its aim. This was certainly an enabler for the development of policy, although it might have impacted on the eventual faith composition of participants in the peer mentoring program.

Of those participating in the mentoring program, men were in the minority – despite male leaders vastly outnumbering female leaders in Christianity and other faiths. Engaging male leaders is a challenge of faith-based primary prevention.

One of the most significant learnings is the importance of maintaining a primary prevention focus in the faith setting. Primary prevention is not easily understood by many people, faith leaders included. Tensions can arise between the objectives of a primary prevention project and the needs of faith leaders who are seeking to focus on responding to women disclosing violence. The project’s resolute commitment to primary prevention, however, resulted in its most innovative feature: the world’s first peer mentoring program for faith leaders to address the underlying causes of violence against women.

For more information: www.darebin.vic.gov.au
The Respect, Responsibility and Equality program

Of all the stages in the life cycle, the adolescence and youth phase remains one of the most important for preventing violence against women before it occurs. Our interpersonal relationships as adults are often shaped by the norms we take on board and practices we adopt as adolescents and young people. Consequently, intervening at this stage to promote equality and respect can have a profound positive influence on our future personal relationships.

In Victoria, and indeed internationally, youth-focused primary prevention initiatives are not new, and there are many promising practice examples to be found – particularly in the school setting (also known as respectful relationships education in schools). Far less common, however, is a network that brings together primary prevention youth-focused practitioners, who are often isolated from one another despite working towards common goals.

Partners in Prevention filled this gap by establishing a statewide community of practice for youth-focused practitioners involved in preventing gender-based violence. Led by Domestic Violence Resource Centre Victoria, the Partners in Prevention network was the first of its kind in Australia, and perhaps the world; and it was accessible to members in a number of ways.

Throughout implementation, the project maintained a website and issued regular e-bulletins. Partners in Prevention hosted quarterly network meetings and held annual forums. The Project Coordinator also supported individual members in their work through consultations and referrals and oversaw the development of a number of important resources for primary prevention and young people, including a booklet on respectful relationships for young women and another for young men.

Together, these activities comprised the main objective of Partners in Prevention: to build the capacity of primary prevention youth-focused practitioners to promote respectful relationships to the young men and women they work with.

Project successes and impacts

Partners in Prevention had a network base of 350 members from across metropolitan and regional Victoria, as well as attracting interest nationally and internationally. Members were from a broad range of sectors including family violence, women’s health, sexual assault, local government, community health, education, and police. The project was particularly successful in reaching practitioners in rural Victoria, with 20 per cent of its members located outside of metropolitan Melbourne.

An overwhelming majority of members reported an increased sense of connection to a broader community of practice through their involvement in the project. In taking up opportunities for networking, knowledge sharing and professional development, members reported an improved capacity to apply elements of promising practice to their respectful relationships education initiatives. Several partnerships were formed as a result of attending network events and activities, with the Project Coordinator directly putting practitioners in touch with each other in several instances.
Learnings

The project has been instrumental in fostering a community of practice that was needed by youth-focused primary prevention practitioners yet did not exist for them. Membership was drawn from a wide range of sectors; however, representation from the education sector – teaching and non-teaching staff – was disappointingly low given that schools are identified as a key setting for respectful relationships education.

From another perspective, individuals from the education sector tended to engage with the project as non-network members, through one-off contacts with the Project Coordinator. Teachers, wellbeing officers and the occasional school principal made contact throughout the project in search of information and advice in relation to specific incidences of violence or sexual assault in their schools.

An important learning from the project is that the engagement of the education sector must be a dedicated strategy for any youth-focused primary prevention practitioner network. Indeed, such a strategy could help to bridge the gap, often identified by community-based youth-focused practitioners, between their sectors and the schools they seek to work with on respectful relationships education.

For more information: www.dvrcv.org.au/pip

“The project created legitimacy for the involvement of the community sector. Now I wonder if we could have worked better to say, ‘Well this is our moment to bring schools into Partners in Prevention; this is our moment to make it a resource for teachers as well as the community sector that’s already doing this work’.” (Network member)

“In general, the focus of Partners in Prevention is on respectful relationships education programs and initiatives. Some of these initiatives are specifically designed to engage non-school attending youth, but by and large respectful relationships programs are run through schools... Yet, in 2010, only 13 per cent of [network] members report working in the education sector.” (Domestic Violence Resource Centre Victoria)
Respect and Equity
Setting: Local government | Led by: Maribyrnong City Council

Around the world, local governments play an important role in coordinating activities for the safety and wellbeing of their communities. Traditionally, local governments have focused on public safety. More recently, however, local governments have started to apply a ‘gender lens’ to better understand the specific safety issues for women in their communities. Today, in Victoria, we find many examples of local governments responding to women’s safety issues, and a greater recognition on the part of local governments that the most common form of violence in women’s lives occurs in the home.

Respect and Equity, undertaken by Maribyrnong City Council, was the first initiative of its kind for the local government setting. The project sought to drive a comprehensive ‘culture shift’ agenda right across the functions and areas of Council so that gender equity, equal and respectful relationships, and non-violent norms become part of thinking, discussing and working in the organisation. To this end, the project targeted Council’s core policy, planning, strategy, services, leadership and partnerships activity. This internal organisational work formed the essential foundation for the project to develop a consistent and sustained influence in the wider community regarding equal and respectful relationships.

“Respect and Equity demonstrates the vital role local government has in coordinating, facilitating and actualising primary prevention of violence against women. Local government infrastructure, services, partnerships, governance, practice and direct connection to the community make it the ideal setting through which to drive gender equity, promote respectful relationships between men and women, and create communities which are safe, inclusive and gender equitable.” [Maribyrnong City Council]

The project put in place a number of interlinked strategies. These included awareness raising activities, skills development opportunities, gaining an authorising environment through executive-level support, finding champions and political leaders, engaging men (the White Ribbon Working Group), conducting facilities audits, developing policy, exploring gender-inclusive planning, and driving a shift toward normalising discussions about gender equity in the workplace. In carrying out its activities, the project located itself at the organisational/community level of the ecological model, although its culture shift work was done directly with individuals and teams at Council.

Project successes and impacts
An important success of the project was the White Ribbon Working Group, comprising male staff from across all management levels, branches and sites at Council. Established in 2008, the group quickly became a platform to engage other men from across the organisation to primary prevention. The group contributed towards mainstreaming primary prevention in Council by promoting the view that preventing violence against women can be everyone’s business. Activities included posting primary prevention messages on the intranet message board and wearing t-shirts with primary prevention slogans developed by the group. The group’s White Ribbon Day activities were institutionalised across Council, with individuals and teams offering unsolicited support on several occasions.
Broader culture shift across the organisation was achieved, although this happened unevenly. Significant impacts occurred in specific areas, most notably the Phoenix Youth Services team. Through the initiative and drive of a particular youth counsellor, who was also the White Ribbon Working Group chair, this team began by incorporating gender-inclusive planning into its core programs, projects and activities. The team then went on to implement a number of successful respectful relationships initiatives with young people in the municipality, such as the ‘Text against violence’ and ‘Respect, courage and integrity hip-hop’ projects. Primary prevention is now embedded in Council’s youth services delivery, which demonstrates that the Respect and Equity approach can work to embed prevention in the core business of local government.

Other important impacts resulting from the project were the inclusion of preventing violence against women actions in the Council Plan, the support gained from a majority of Councillors to primary prevention activity, and intangible wins such as the flourishing of conversations about gender equity in hallways and over desks, or the unexpected budget support for a primary prevention initiative.

Learnings
The project’s evaluation findings show that culture shift is achievable in the local government setting, but this requires ongoing resources, commitment and leadership for sustainable results.

“The White Ribbon Working Group men are able to connect the outcome (violence against women) with the cause (gender inequality) and articulate areas of action, e.g. increase women’s representation and status in society. The men act as public White Ribbon Day Ambassadors, primary prevention champions and advocates across the organisation and the community. They raise awareness through activities, generate interest through commitment and inspire others with their passion.” (Maribyrnong City Council)

“Members of the White Ribbon Working Group will be wearing their t-shirts today to re-affirm their respect for mothers and all women, to highlight their commitment to eliminate violence against women, and to generate further reflection, discussion and awareness.” [Intranet message 2010]

“There has been no specific funding for our primary prevention work, it’s just something that has been, over time, incorporated into the delivery of existing programs, projects, events and activities.” (Youth counsellor)

“While there is evidence of a culture shift in aspects of Council, there is still a long way to go before preventing violence against women is normalised. To sustain this culture, the predominant messages, infrastructure and activities need to continue to uphold an promote gender respect and equity…. We must continue to invest in this culture.” [Maribyrnong City Council]

This was certainly the case for Maribyrnong City Council, which already had a strong base of primary prevention practice for Respect and Equity to build upon and an organisational culture that was open to learning and development.

A second learning relates to how culture shift is achieved. The project was located at the organisational/community level of the ecological model of understanding violence against women (see page 4); however, it interacted primarily with individuals and teams to do its culture shift work. This approach was fraught with risk when leaders and champions across the organisation moved on to other employment and momentum for the work eroded. Through this experience, the project learned a valuable lesson of any culture change agenda. Culture shift must be embedded structurally – in organisational policy, plans and processes – to offset the risks associated with driving change through individuals.

For more information:
www.maribyrnong.vic.gov.au
Good practice in prevention: What have we learned?

Prevention is possible

The five projects of VicHealth’s Respect, Responsibility and Equality program have made a significant contribution to the evidence and knowledge base for preventing violence against women before it occurs. They have demonstrated that the causes of violence against women can be addressed by promoting equal and respectful relationships between men and women as a theme for action. They have also shown that prevention can be achieved by implementing strategies in everyday settings: a corporate workplace, a maternal and child health service, faith organisations, a youth-focused practitioner sector, and a local government.

As a collective, the five projects are examples of promising practice for a diverse range of settings. They show the programs, activities and partners needed for these settings, and the challenges and lessons learned for good practice in prevention.

Prevention creates real change

The five projects achieved positive change among the people they engaged, including:

- improved understandings of the underlying causes of violence against women
- increased support for gender equality and gender equity
- increased capacity to respond to violence-supportive attitudes and behaviours
- improved confidence in putting primary prevention actions into practice.

They also achieved significant impacts at the organisational/community level, such as:

- organisations that promote gender equity and normalise discussions about it
- organisations that are more gender inclusive in the way they do their business
- organisational policies that provide an authorising and supportive environment for primary prevention actions to occur
- services that are better equipped to include primary prevention programs to consumers as part of core delivery
- communities of practice that support action on violence against women
- communities that promote equal and respectful relationships between women and men.

The five projects demonstrate that real change in individuals, organisations and communities can be observed when primary prevention actions are taken in their settings.

Prevention must work on multiple levels

The five projects worked directly with individuals through training for corporate employees, a group program for first-time parents, a peer mentoring program for faith leaders, professional development for youth-focused professionals, and skills development and awareness raising for organisational teams and leadership.

The five projects also worked at the organisational/community and societal levels through developing policies and communicating messages across organisations, building organisational and workforce capacity for community-based initiatives, and supporting advocacy for cultural change and statewide policy reform.

The five projects show that primary prevention practice includes mutually reinforcing strategies coordinated across the different levels of influence as described by the ecological model of understanding violence against women (see page 4). Indeed, this is a critical feature of effective practice and one that policy makers, funders and partners should consider in planning primary prevention initiatives.

In locating the factors underlying or contributing to violence against women at a range of levels of influence, the ecological approach (page 4) requires a correspondingly complex approach to prevention. Specifically, it:

- emphasises the need for many different forms of action
- recognises the value of working at different levels and in different settings.
Prevention requires readiness

The five projects were scaled up from smaller projects that were previously implemented in their settings. As a result, their settings and partners came with a degree of readiness for the three-year project and they were more able to achieve their objectives.

The phased approach in Respect, Responsibility and Equality was effective for prevention. It demonstrates the importance of having realistic expectations about the length of time required for effective project implementation, especially if settings and partners need ‘warming up’ for primary prevention actions.

Prevention needs intensive resourcing to show results

In addition to funding the projects, VicHealth supported the five projects through guidance for implementation, planned learning activities, evaluation capacity building and ongoing opportunities for knowledge transfer.

This significant level of support was critical to the success of the five projects and is an important learning for the development of new primary prevention initiatives.

Prevention needs long-term and sustained strategies

While the positive changes achieved by the five projects were impressive, sustained impacts at the organisational/community level were more difficult to observe. This has important policy, funding and planning implications for future work in these and other settings. It suggests that longer and deeper work is needed in settings for primary prevention, and that sustainability must be an explicit focus of programs and the partners who undertake them.

Planning for long-term and sustained strategies will help to ensure that the positive impacts of primary prevention actions will be maintained – especially after projects come to an end.

Societal change is within our grasp

According to the ecological model, the societal level links closely with the other levels: it shapes the individual, community and organisational contexts and is reinforced by them. Achieving change at the societal level is necessarily a significant undertaking and will require further investment and commitment.

The Respect, Responsibility and Equality program has demonstrated that achievable steps can be taken towards societal change. It has shown that a gender-equitable society in which all women live free from violence is within the grasp of organisations and communities that are ready to take these steps.
Conclusion

Violence against women is prevalent, serious and eminently preventable. Our understanding of what is needed to stop the problem from occurring in the first place is now well developed and was articulated in VicHealth’s framework to guide primary prevention action. Through the five projects of Respect, Responsibility and Equality program, we now have strong indications that the framework can be successfully applied to practice with positive impacts on the underlying causes of violence against women.

There is now a significant opportunity to continue this work. From the five projects of Respect, Responsibility and Equality program we have gained the strategies, models, programs, resources and learnings to move prevention forward. We are now equipped to achieve the goal of coordinated primary prevention efforts in multiple settings, with mutually reinforcing actions interlinked across multiple levels of influence, to make the vision of equal and respectful relationships between men and women a reality.

The achievement of this vision requires the commitment and political will of governments, organisations and communities together. It is an undertaking that we have already started – and there is no turning back.

References


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Respect, Responsibility and Equality projects were undertaken by VicHealth in partnership with: