Putting the prevention of violence against women into practice:

How to Change the story
Our Watch 2017

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Acknowledgement of Country: Our Watch acknowledges the traditional owners of the land across Australia on which we work and live. We pay our respects to Aboriginal and Torres Strait Islander people past and present, and we value Aboriginal and Torres Strait Islander histories, cultures, and knowledges.
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Building on a history of Australian women’s leadership in primary prevention

Good prevention strategies already exist across Australia and signs of progress are emerging. This Handbook builds on the valuable work by individuals and organisations in many sectors. Our Watch would like to acknowledge the numerous women and women’s organisations across Australia that pioneered the work in the prevention of violence against women, in particular our colleagues in the women’s health, gender equality, family violence and sexual assault sectors. We would also like to acknowledge the important leadership and work of women in Aboriginal and Torres Strait Islander and culturally and linguistically diverse communities in working to end violence against women across Australia. Their collective leadership, commitment, efforts and advocacy – which are underpinned by a feminist, social justice and human rights approach – have put the primary prevention of violence against women at the forefront of the national agenda in ending violence against women. This has provided an important basis upon which this work can continue.
Section 7: Project planning and implementation
In this section you will find:

The planning cycle which includes the following steps:

- understand
- explore
- plan
- implement
- evaluate
- learn

There are a lot of ways that prevention work can be planned and implemented and many people and organisations will have their own preferred way of planning. The planning required will be influenced by the context in which the work is undertaken, such as whether:

- it is part of an established prevention, health or community plan
- it forms part of an organisation’s work and utilises existing organisational project planning procedures and practices
- there is discreet funding for the project and whether the funding guidelines impact the type of work that can be done
- the work and/or the partnership is new, or whether it forms part of an existing project or partnership.

All of this will influence the level of planning required and the process that may be undertaken.

Our Watch has produced a Toolkit for Practitioners working in their community. This toolkit covers the basic steps in program planning and implementation and has been developed for those who are relatively new to project based work.
The planning cycle

This guide provides a suggested planning cycle and key points to consider at each stage of the cycle. This planning cycle is based on other well-established guidelines on prevention work and draws on valuable knowledge and experience from practitioners across Australia and around the world, in particular from the Women’s Health Association of Victoria, *Action to Prevent Violence Against Women*[^84] and UN Women Pacific, *How to design projects to end violence against women and girls: A step-by-step guide to taking action.*[^85]

Regardless of the planning cycle or tools you use, good planning is important to ensure good outcomes. It prepares you for what is needed and enables you to think through what you want to achieve and how this can be done.

Figure 4 shows key stages of a planning cycle: understand, explore, plan, implement, evaluate and learn. This section of the Handbook details each stage as well as links to suggested tools, templates and further information. This can help you think about what you want to achieve with your prevention work, how you are going to make change happen and how you are going to measure and learn from that change.

Planning for prevention is a continuous cycle that doesn’t have a clear start and finish point. You need to keep checking back and forward that the work you set out to do is happening, that the people and organisations that need to be involved are involved, and that there are no harmful consequences of the work. At different times you will need to revisit or jump ahead to stages of the planning cycle. For example, during implementation you may need to revisit the ‘understand and explore’ stages, in the ‘plan’ stage you will need to be thinking about evaluation, and throughout all stages of the planning cycle, learning and reflecting on your work is important.

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[^84]: Women’s Health Association of Victoria
[^85]: UN Women Pacific
Resources on planning prevention work


Women’s Health Association of Victoria, *Action to Prevent Violence Against Women*, http://www.actionpvaw.org.au


Regardless of the planning cycle or tools you use, good planning is important to ensure good outcomes.
Stage 1. Understand

The first stage is to understand violence against women and the actions that are required to prevent it. By reading this Handbook and *Change the story*, you should begin to have a good understanding of the gendered nature of violence against women and what drives it.

To check that you are ready to undertake prevention work you should also be familiar with the following.

**Statistics and data**
Understanding the gendered nature of violence against women and how the statistics and data support this is integral to communicating why we need to do this work. Know the origin of the statistics and data and be prepared to face resistance and be questioned about it. Ensure that the statistics and data that you rely on are reputable. Section 3 of the Handbook provides an overview of the key statistics on violence against women.

**Intersectionality**
Understanding that women have different experiences of violence based on their experiences and identities is important to ensure that this work is inclusive and reaches all communities. There is information about intersectionality throughout this handbook, particularly in Section 5.

**National and local policies and plans**
The policy context of prevention work is important to understand as there are many international, national, state and local plans and policies that support and provide a strong foundation and commitment for prevention work. See Section 1 for details of these across Australia.

**Identifying effective and promising practice initiatives to support your work.**
There are many different types of prevention strategies that have been or are currently being undertaken which can help you plan your work. Understanding the evidence for what has been effective and where there is growing and emerging evidence is useful. Contacting networks and services that support prevention work in your local area or in other states or territories can support this. This might include women’s health services, domestic and family violence services or other organisations which have a focus on gender equality and violence prevention. By exploring what else is happening in your area or setting you can avoid duplication and strengthen your work with regional actions and increase the reach of your activities.

The prevention of violence against women is an emerging area of work and knowledge and evidence continues to build. It is advisable to keep up to date with new information as you plan and implement your strategy, such as by subscribing to mailing lists from Our Watch and ANROWS as well as other reputable sources.
Stage 2. Explore

Using your knowledge and understanding of violence against women and ways to prevent it, you can begin to explore what your prevention activity will do and who you will be working with.

This stage involves three key elements:

- decide on your setting/s
- know your setting/s
- identify your stakeholders.

Decide on your setting/s

This may be an easy step as you may already know the setting or settings you will be working in. If not, you will need to explore the potential settings you want to work in. Thinking about where people live, work, learn, socialise and play will assist you to tailor the work to the population group and the environment. Section 6 of the Handbook details the key settings for prevention and the key techniques and activities that have been used in different settings.

When exploring potential settings, think about the level of need and readiness in each. Ask yourself and others key questions including:

- are there key stakeholders and/or partners in the setting who will champion the work?
- what is the level of potential backlash and resistance you may encounter? Is it manageable?
- would there be leadership support for an initiative? The level of leadership support you have will influence the impact of your work.
- has work occurred in this setting before? What techniques have been used? What resources and evidence can we draw from?

Know your setting

Once you have decided on a setting/s, it is useful to spend some time familiarising yourself with the setting, and getting to know key people within the setting. This can occur through a formal or informal processes. A key component of getting to know your setting is understanding what resistance there might be to the work and what ‘enablers’ exist. Enablers might be people, such as well-connected or trusted people, or the enablers might be structures and systems that you can tap into. Examples of these include a local prevention networks or health networks. Local councils are connected with many organisations and people in the community and are often a good place to start.

Some key steps to exploring your setting and how you might successfully implement a prevention program in that setting include:

- accessing any relevant data about violence against women and gender inequality in your setting. Is the data you are using sex disaggregated (statistics and information that is collected and analysed separately for women/girls and men/boys)? If the data is not sex disaggregated, what further data can you collect to give you a better picture of gender differences?
- consulting widely within your setting. This should include, but not be limited to, services and organisations that work to prevent violence against women in your area, with organisations relevant to your setting, with community and setting leaders, with community-based organisations and with individual community members. Ensure you have consulted in a meaningful way with women and men who may face additional discrimination.
• understanding the existing strengths within the setting and consider how these strengths can be drawn upon in your prevention work. Taking an inclusive strengths-based approach in your setting/s that focuses on a community or settings strengths, capacities and assets and facilitates community engagement and is likely to increase community engagement and ownership in your work

• considering the prevention initiatives that have been implemented in your setting/s in the past. What were the outcomes and lessons learnt? Are there any established networks, partnerships, or collectives that your strategy could draw on to enhance accessibility and reach?

• identifying potential partner organisations working on violence against women, gender equality, women’s empowerment and community wellbeing in your setting/s. Consider partnering with organisations who represent diverse groups in your setting/s and in particular consider marginalised groups who are often excluded from initiatives

• Undertake a gender analysis.

What is a gender analysis?
A gender analysis is a process of considering gender and gender inequalities. A gender analysis is a vital step in understanding how gender norms, practices and structures work in your setting. It assists in identifying key groups or individuals to include in the work, identifying priority areas for actions and identifying barriers to achieving your goals. For example, if prevention work does not adequately consider gendered experiences and impacts or is not inclusive and accessible, then your work is unlikely to achieve its objectives.

The toolkit at the end of this “Explore” section provides links to organisation that have developed gender analysis tools. These tools are a useful resource to begin gender analysis work and can be adapted as needed. For example, if you are using the Women’s Health In the North Gender Analysis Planning Tool with a group of stakeholders, you could reframe the questions to address the particular issue you were looking at. For example, instead of asking, ‘what are the underlying factors as to why women and men might be affected differently?’, you could ask, ‘what are the underlying reasons that only there are two women and seven men on school council?’.

Tip

Reminder about diversity, inclusivity and accessibility across and within settings
As noted in other sections of this Handbook, it is important that prevention work reflects the diversity of the community to be as inclusive and accessible as possible. Understanding your setting/s includes understanding the diverse population groups that are represented.

Inclusivity is central to a whole-of-population approach to prevention. For example, in school settings, some students will not have full access to mainstream education programs and plans should be made for the specific engagement of those groups. Tailoring prevention programs in tertiary institutions requires specific efforts to engage domestic and international students, Aboriginal and Torres Strait Islander students, and students with disabilities. In workplace settings, certain sectors are characterised by higher rates of employment of migrant women or men and efforts must be tailored to ensure prevention work is inclusive of those groups who may otherwise be overlooked.

Accessibility means considering who is not present or who might be excluded due to structural or other inequalities in every setting. For example, Respectful Relationships Education programs and other school-based initiatives need to take an approach that highlights and addresses multiple and intersecting forms of discrimination and disadvantage in educational contexts. Specialist educational institutions such as special schools, vocational training, disability employment services and social enterprises should also be considered as important sites for prevention work.
Identifying stakeholders

Every prevention strategy will have different stakeholders that need to be engaged in different ways. You need to identify the key stakeholders who will influence or be impacted by your prevention strategy, remembering that every sector, institution, organisation, community and individual can play a role in preventing violence against women.

Key stakeholders can include:
- those impacted directly by your work
- your staff
- your clients, customers or members
- relevant referral and support services
- other organisations or settings that are undertaking prevention work in your community
- members of groups who are often marginalised or excluded from whole of population approaches
- community leaders
- local, state and federal government
- funding bodies.

Tip

Stakeholder or partner?

The terms stakeholder and partner are often used interchangeably, but there are differences in the roles and responsibilities of each. While all partners are stakeholders and stakeholders can become partners, not all stakeholders will be or should be partners.

Stakeholders have an interest in the work and it will have an impact on them. Stakeholders can contribute ideas and opinions to the planning and implementation of the project. However, unlike partners, they do not need to be actively involved in the planning and implementation of the initiative, and their role is of less influence and is less active than partners. Partnerships are more formal, for example they often have a Terms of Reference, which clearly outlines the roles and responsibilities of each partner organisation.

Undertaking stakeholder mapping is a good opportunity to identify those stakeholders who could or should become a more formal partner in the work.

Communicating with key stakeholders is one of the most important factors to the success of your work. Effective communication will ensure your stakeholders have a strong understanding of the community context and needs, greater community support and buy-in, and mutual understanding of shared objectives. When consulting and communicating with stakeholders, give as much accurate information on your prevention work as possible to ensure there is understanding and transparency between you and your stakeholders.

Appendix 1 shows a Stakeholder mapping matrix. You can use this tool to help identify potential stakeholders that your strategy may need to engage with and consider the differing levels of power, engagement and interest of various stakeholders. This process is also important to identify any gatekeepers in your setting who can influence your access to participants and resources. It will also help you think about the level of participation of different stakeholders and identify those you need to involve closely in decision-making and who you may therefore want to establish a formal partnership with. This process should encourage reflective practice as you consider the relationships with and between your stakeholders. Identifying the power and gender dynamics of the relationships between your various stakeholders and in your own relationships as a practitioner will help identify the strengths, weaknesses, opportunities and threats that will influence the success of your strategy.
Resources to support the EXPLORE stage

**Templates:**
Stakeholder mapping matrix (Appendix 1)

**Resources:**
Women's Health In the North, [Gender Analysis Tool](http://www.whin.org.au/resources/gender-equity-and-analysis-1.html)


InterAction, [The gender audit handbook](https://www.interaction.org/sites/default/files/GenderAuditHandbook2010Copy.pdf)

METRAC Action on Violence, [Safety audits and assessments](http://www.metrac.org/what-we-do/safety/)


The [Action to Prevent Violence Against Women](http://www.actionpvaw.org.au) resource provides evidence, practice examples, a resource library, key contacts and other information on preventing violence against women in Victoria. It has been developed to support communities and organisations to understand and get involved in the prevention of violence against women, and to support practitioners in the field to connect with each other, access resources and deliver best practice initiatives, [http://www.actionpvaw.org.au](http://www.actionpvaw.org.au)

Australian Government’s [Violence against women: stop it at the start campaign](http://www.respect.gov.au/services/) campaign has a [list of national services and support organisations](http://www.respect.gov.au/services/) you may want to partner with.
Stage 3. Plan

When you have a comprehensive understanding of the prevention of violence against women, have decided what setting you will be working in and have identified your key stakeholders, it is time to begin to plan your activities in detail. The planning stage includes the following key elements:

- establish partnership and governance structures
- choose your prevention techniques
- develop a program logic model
- develop an implementation plan
- plan for disclosures
- plan for evaluation
- plan for sustainability.

Tip

Be realistic. No single prevention initiative is going to stop violence against women by itself. When setting out your logic model and implementation plan, be realistic and strategic about what you can change, how you can change it and the time needed to make that change happen.

Establish partnerships and governance structures

Through the stakeholder mapping tool (see also Appendix 1) you will have identified partners to collaborate with. Stakeholder mapping also assists to determine the accountability and responsibility of partners. Setting up clear governance and partnership structures for your prevention initiative is important to the effectiveness of the partnership and to your overall initiative. Effective and successful partnerships:

- have a clear purpose and structure
- are mutually beneficial to the partners
- are carefully planned and monitored under a governance structure agreed to by all partners
- build flexibility, adaptability and accountability into the relationship from the beginning.

A good way to formalise these structures is through a Terms of Reference or Memorandum of Understanding that is agreed to by all the partners. The governance arrangement should clearly set out the basic rules, expectations, and roles and responsibilities of the partnership, including processes for communication and decision-making.

This is also the time to start thinking about your evaluation. What are your partners’ interests in the evaluation and what will their roles be in the evaluation? Will you need to establish a specific partnership and governance structure for your evaluation?
Case study: Strong partnerships and governance for prevention, Gender and Disability Workforce Development Program, Women with Disabilities Victoria

The program run by Women with Disabilities Victoria, is designed to change culture across whole organisations. The program works with clients, staff and management to increase awareness of how to deliver gender equitable and sensitive services.

One of the main strengths of the program was the partnership and governance model that supported implementation of the program. Women with Disabilities Victoria established a number of partnerships with relevant stakeholders with a strong interest in the program’s outcomes. Governance structures included a Project Advisory Group with representatives from the pilot organisations, disability peak bodies and prevention experts, which had a central role in decision making and problem-solving throughout the program. There was also a Project Implementation Group to guide on-the-ground implementation.

These partnerships and governance structures promoted the ongoing commitment and engagement of key stakeholders in the program. They also allowed partners to share resources, skills and knowledge to increase the impact of the program by supporting the delivery of the training workshops.


Choose your prevention techniques

Section 6 of this Handbook outlines five proven techniques that prevention strategies can use and includes examples and case studies that use these techniques. These are:

- direct participation programs
- community mobilisation and strengthening
- organisational development
- communications and social marketing
- civil society advocacy.

It is important to select the techniques that are most suitable for your setting/s and target audience to address the essential prevention actions you’ve identified. You also need to ensure the techniques you select are achievable with the time and resources you have available. For example, direct participation programs such as training sessions are a great tool, but they also require skilled facilitators, development of training content, time to plan and venues and locations to hold them in. Section 6 details some key considerations for each technique to support you when choosing which techniques to use in your work.
**Develop a program logic model**

A program logic approach describes how your prevention strategy works: what your **inputs, activities and outputs** will be and how these will help you achieve the desired **impacts** and **outcomes** (see Figure 5 for a program logic model template).

The program logic model is a road map that identifies key steps required to achieve your intended outcomes and sets out how you will work to promote the key prevention actions in your setting/s. It is not as detailed as a project plan and should not replace it, however the logic model should inform the project plan and be reflected in the plan’s more detailed steps and tasks.

Developing a logic model requires asking yourself a series of ‘if, then’ statements: ‘if I take this action, then this outcome will happen’. Setting out your strategy’s logic in this way will make it easier to evaluate. Go to Section 9 for more detail on evaluation.
Different organisations or sectors use different terminology in logic models and evaluation plans. This Handbook uses the following definitions.

**Inputs** are your strategy’s resources such as funding, staffing, policies, evidence-based practice, partnerships’ readiness and leadership for the work.

**Activities or strategies** are what your strategy does, such as individual skills development, organisational development, and community action and advocacy.

**Outputs** are tangible products arising from your strategy’s activities such as events, training sessions, organisational policies and practices.

**Impacts** are changes sought through your strategy’s activities and outputs such as an increase in the skills of training participants to stand up against sexist comments in the workplace (practice change), improvements in workplace leadership for gender equality (structural change) or an increase in public discourse questioning traditional or rigid gender roles (norm change).

**Short-term impacts**

Short-term impacts are the things that the subjects of the project are expected to do immediately after their experience of the project as a direct result of their involvement. They are the immediate changes that the project is trying to make for its subjects. Short-term impacts are therefore subject focused rather than focused on the program or project. Examples include:

- practitioners developing new relationships
- students obtaining knowledge
- participants developing skills
- workplaces developing and implementing protocols and policies.

These short-term impacts are usually what get measured within the project cycle.

**Medium-term impacts**

These are the changes that are assumed to take place after the achievement of the short-term impacts. They are subject-focused but may include a broader range of subjects than just those who participated in the project activities (if the project is assumed to make changes that will apply to the broader population). Medium-term outcomes expose what the project designers want to happen as a result of the project (not necessarily what will happen). Examples include:

- clients changing their behaviour (remember this will be influenced by, but not wholly attributable to, your intervention)
- staff reporting that their workplace is actively addressing gender-based discrimination
- students reporting that they experience more equal and respectful peer relationships.

The timeframe of the evaluation may determine the degree to which medium-term outcomes are measured in the evaluation as they typically require longitudinal follow-up (beyond the life of the program).

**Outcomes** are the long-term, ultimate goals of the project. They are the changes the project designers want to see in the world as a result of their project. Generally there should be no more than one or two long-term outcomes. An example is:

- the reduction in the number of incidents of violence against women and their children.

Outcomes are not solely within the control of the project; they are linked to the project by hypothesis and logic. Due to the complexity and long-term nature of societal chance, outcomes are the result of the collective impact of many prevention projects. Outcome measures are included in the project logic as a way of demonstrating the link between the outputs and short-term outcomes, and the issue the project designers wanted to influence.
LOGIC MODEL: means that your strategy has a clear idea of how your inputs and activities are going to lead your outputs, impacts, and outcomes.

<table>
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<tr>
<th>INPUTS</th>
<th>ACTIVITIES</th>
<th>OUTPUTS</th>
<th>IMPACTS</th>
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<tr>
<td>GENDER TRANSFORMATIVE LOGIC</td>
<td>The practical steps taken by a strategy to turn the inputs into outputs. For example, research on the gendered drivers, stakeholder engagement and consultation, or training facilitators to deliver workshops.</td>
<td>The concrete products of a strategy that aim to achieve the impacts and outcomes. For example, training workshops, organisational policies and practices, communications materials, and awareness raising events.</td>
<td>Immediate &amp; medium-term The short- and medium-term objectives of a strategy that are attributable to the strategy’s activities and outputs. For example, changing the sexist culture of your workplace so that women have greater decision-making power.</td>
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**INPUTS**
The time, money, staffing and other resources that a strategy requires to carry out its activities, and to achieve its impact and outcomes.

**ACTIVITIES**
The practical steps taken by a strategy to turn the inputs into outputs. For example, research on the gendered drivers, stakeholder engagement and consultation, or training facilitators to deliver workshops.

**OUTPUTS**
The concrete products of a strategy that aim to achieve the impacts and outcomes. For example, training workshops, organisational policies and practices, communications materials, and awareness raising events.

**IMPACTS**
The short- and medium-term objectives of a strategy that are attributable to the strategy’s activities and outputs. For example, changing the sexist culture of your workplace so that women have greater decision-making power.

**OUTCOMES**
Longer Term
The long-term objectives of a strategy. This is likely to be your chosen action against the drivers of violence. For example, contributing to whole-of-community change to promote equality and respect between women and men.

**GOAL**
Contributing to the shared goal of primary prevention in Australia: ending violence against women.

**BROAD CONTEXTUAL FACTORS**
that could have an influence on your project, e.g. socio-political change.

Figure 5: Developing your logic model

The tasks you conducted during the UNDERSTAND and EXPLORE stages will be useful in developing your logic model. Consider the context, community needs and readiness, and existing strengths and skills that you can draw on. The impacts you want to achieve should address the essential prevention actions that you have identified and also need to be achievable in the timeframe of your strategy.

Identify the broader contextual factors that will influence the success of your prevention strategy. These may be the assumptions or beliefs you have about the way you think an intervention will happen, or they may be external risks or influences that you cannot control. Examples include relevant government policies or legislation, increased national media coverage of violence against women or barriers to participation that are beyond your control or influence. Assess how significant these risks and influences are, how likely they are to happen and whether you can take any steps to mitigate the risks as part of your implementation plan. If there aren’t any strategies you can identify to minimise or mitigate the risk, you may need to reconsider your approach.
Develop an implementation plan

The implementation plan will be based on your logic model and translates it into an actionable plan. It sets out the inputs, activities and expected outputs in a timeframe as well as identifying resources required and who is responsible for different activities. The Implementation Plan template (see Appendix 2) is a tool you can use to develop your plan.

Tip

Effectively engaging your stakeholders can take time. Make sure you allow enough time in your implementation plan to involve all key stakeholders at the relevant points of your prevention strategy, including evaluation.

Your implementation plan should answer, but not be limited to, the following questions:

- in what order will you need to implement your activities? Do you need to consider different stages of implementation for your setting/s? Ensure you allow adequate time for planning, implementing and evaluating the different components of your work (including if external facilitators are required, sufficient time to contract and brief them).

- how will you tailor your selected techniques to your target community and ensure your activities and outputs are inclusive and accessible?

- what activities will you use to support your key stakeholders remaining interested, supportive and directly involved in planning and decision making?

- do you have enough staff and have you identified who is responsible or accountable for the different activities?

- will you need to engage facilitators or trainers for your own staff to be able to implement the strategy effectively? If you need to bring in external people, ensure there is sufficient time to brief them.

- have you built in resources to ensure participation for women from diverse communities, including Aboriginal and Torres Strait Islander women, women with disabilities and women from culturally and linguistically diverse communities? This may include language interpreters including Auslan, attendant carers, transport and other adjustments.

- what requirements do you need to meet for the governance agreements of your partnerships? Have you identified what processes you will use, and when, to review these partnerships?

- who is responsible for evaluating the work? Do you have the right people with the right skills as well as the necessary time, money and other resources to do an effective evaluation? Identify the key evaluation timeframes and deliverables such as monitoring reports to funding bodies, when does data collection and data analysis need to occur, when is the final evaluation report due?

- what activities will be undertaken to support the sustainability of your work beyond its funded period and when will they occur?
Plan for disclosures

Prevention work often involves open discussions about the nature, prevalence and impacts of violence against women. Violence against women is a daily reality and lived experience for many people. From the outset, all prevention work needs to have processes in place to respond to disclosures from victims/survivors and perpetrators who may be identified in the course of the work.

Talking about violence will have an impact on many of the people you are working or engaging with, as many, if not most, people will have friends or family who have experienced or are experiencing violence and some may be victim/survivors of violence themselves.

It is important to let an audience or participants know that potentially triggering information will be discussed and that people are welcome to leave the session at any time if they feel that they need to and that they do not need to give a reason or ask permission. Let people know in advance that you have resources at hand that you can share with after the session if someone needs it. It is also important to note that as prevention practitioners, you are not response workers and that the assistance you can provide is referral information.

Checking the content of presentations, training or other communication material with specialist response agencies is one way to ensure that it is not unnecessarily triggering. Care should also be given to consider population groups where the prevalence of violence is even higher than the population average, such as women with disabilities and Aboriginal and Torres Strait Islander women.

At any time during a prevention of violence against women program a participant or advisory group member may disclose that they are, or have been, a victim of violence. They may disclose directly or talk more generally about being afraid in their relationship or feeling trapped. They may recount experiences of being hurt in the past or express current fear and distress for themselves and concern for their children’s safety. The person may or may not request assistance as part of their disclosure.

While prevention practitioners are not expected to be experts in responding to disclosures of violence and do not generally have counselling skills, they do have a role to ensure a participant’s safety and to refer them to an appropriate service.

Disclosing violence is difficult for many victim/survivors, not only because it is potentially dangerous, but also because of the stigma and shame that is often reflected in community and personal responses. Personal histories, cultural and religious beliefs shape individual attitudes about family and sexual violence and about the disclosure of experiences with a violent partner or other family member. A person who discloses violence needs to feel believed, be supported compassionately and not judged. It is important to reassure them that their feelings are valid, whatever they are.

Convey these messages:
- They are in no way responsible for the abuse or violence against them.
- They can be supported in any choices they make about what to do and they have strengths they bring to this decision-making process.
- The abuser is responsible for the abusive behaviour.

Provide this information:
“If you or someone you know is impacted by sexual assault, domestic or family violence, call 1800RESPECT on 1800 737 732 or visit 1800RESPECT.org.au. In an emergency, call 000. For more information about a service in your state or local area download the DAISY App in the App Store or Google Play.”
Disclose or disclosure means that someone tells you they have experienced or perpetrated violence. This may be a woman, man or child you are working with either directly or indirectly.

You should never directly ask someone about their experience or use of violence. However, people may disclose their experience of violence to you, regardless of whether you directly ask them about it or not. All disclosures must be handled with great care and confidentiality, and anyone who discloses their experience of violence must have access to adequate support services. This is particularly important where women or children may be placed at greater risk if the perpetrator discovers that they have told someone.

All prevention work should have a clear process on how to respond to disclosures, particularly when working with children and young people. Make sure you are aware of locally available response and support services and consider including training on counselling and recognising distress for facilitators working directly with participants. Practitioners working in some settings may have a duty to report disclosures and you should check relevant regulatory or statutory requirements for your sector (which differ across Australian states and territories).

Our Watch will be producing resources to support planning for and dealing with disclosures, check www.ourwatch.org.au to see if they have been released.

Some people choose to disclose during a group discussion or session which can be distressing for other people in the room, as well as for the practitioner and the victim. It is advisable to try to contain these disclosures to minimise distress by saying something like, 'I can hear that you have had experiences that you would like to talk about. It would be best if we caught up after the session, but feel free to take some time out now if you would like'.

Some people might be disclosing for the first time and for them this can be a very distressing experience and some may have been through a long process of recovery and may not appear to be upset by their experience. Regardless of how people present, it is not advisable to engage in discussions about people’s experiences of violence. Often people will approach the practitioner at the conclusion of a session, so it is advisable to always have referral information handy and, if possible, have enough time to respond appropriately and respectfully.

It is also important to have a comprehensive list of the violence response services and resources in the local community readily available. Many communities have existing support service directories and it is good to have these available during and after the program. There may be services that have experience in working with the specific community group attending the program, however some women prefer not to be involved with a specialist service, particularly women from very small communities who fear that their information may not be kept confidential. Remember, the safety of women and children is paramount.

Not all disclosures will be immediate (i.e. made during the session) or made to the practitioner directly, so making sure that the workplace or setting you are working in is equipped to respond appropriately is also good practice. This involves checking with the workplace to make sure they have policies, procedures and adequate training to provide an appropriate response. Make sure that key staff members, including reception staff, know the contact details of the workplace Employee Assistance Program as well as local family violence and sexual assault services.
Robust response systems are the foundation for prevention work.

Systems and services for responding to violence provide the foundation for primary prevention by establishing perpetrator accountability, protecting women and their children from further violence, and sending a message that violence is unacceptable.

While primary prevention does not focus on current occurrences of violence, it can still lead to increased demand on response services. By increasing awareness and understanding about violence against women, more people are able to identify violence and abuse, including women seeking support for violence in their own lives. This can result in increased levels of violence being reported to police and response services. In the long term this should decrease as violent behaviours and attitudes are transformed.

It is also possible that a participant discloses his current or prior perpetration of violence. This can also be distressing and possibly confronting for others who are present and should be managed in a firm but respectful manner. Again, suggesting that discussion topic be parked until after the session is advisable and, again, it is important to have appropriate number for men to call to discuss their use of violence. The men’s referral service has a national telephone counselling line that can be accessed via their website.91

Resources to support responding to disclosures

The Australian Department of Social Services maintains a list of related agencies and sites for women’s safety, https://www.dss.gov.au/our-responsibilities/women/related-agencies-sites


A list of national services can be found on the 1800 RESPECT website, https://www.1800respect.org.au/service-support/. 1800 RESPECT is the national sexual assault and family violence counselling service. They also have a large amount of information on how to talk to family and friends who have experienced violence. This may also be useful for practitioners to read.

No to Violence is a peak body for Men’s Behaviour change practitioners and has many articles on working with men who may be using controlling or violent behaviours with family members, http://www.ntvmrs.org.au/
Plan for evaluation

You should plan for evaluation from the beginning of your strategy. Your evaluation plan should set out what you are measuring, the methods you will use, when you will do your evaluation, who is responsible and what resources will be needed. Section 9 provides step-by-step detail about evaluation planning and principles.

An evaluation plan needs to be developed before any implementation begins, including processes for the collection of baseline data, so that throughout your prevention strategy you have a clear idea of your goals. You should also include a communication or dissemination plan within your evaluation plan, so that you can share the findings of your evaluation with your key stakeholders and with other practitioners. This will support the transparency and accountability of your work, and contribute to the growing evidence base on prevention in Australia.

Plan for sustainability

For prevention work to have an impact it must be part of a sustained effort over a long period of time. The size, reach, scope and level of influence of your initiative will affect to what extent you can plan for sustainability and the level of impact you can have. For example, a government department funding a suite of three-year prevention activities across the country will have different sustainability options to consider in comparison to a 12-month leadership program for young women in a small rural town. However, both of these still need to consider how their work contributes to the larger sustainability of prevention work within its sphere of influence.

All prevention work can contribute to building the knowledge, skill and commitment of the organisations, communities, individuals and systems that are needed to prevent violence against women over a sustained period of time.

When planning for sustainability of prevention work it is good to consider the following strategies:

• work with leaders/decision makers to ensure that prevention work is valued, understood and prioritised by your community or workplace leaders who make decisions about resourcing and planning.

• embed the initiative into existing systems and structures rather than have the program sit outside of existing work. This helps to ensure that prevention work continues after the particular project is finished.

• allocate sufficient funds to evaluate the program and share knowledge and outcomes of your prevention work. This will give you the evidence needed to advocate for future prevention programs. Often the outcomes of prevention work are not clearly measurable in terms of numbers. It is then important to keep records of quotes/emails or other qualitative data that supports your work. It is good to have these statements from those directly impacted, such as girls in a leadership program as well as leaders who have seen the difference your work makes, such as their teachers or sports club committee members.

• look for opportunities to apply for additional funding beyond the program period and from organisations or funding bodies that might not have previously considered prevention work. As prevention is a relatively new area, ‘primary prevention’ might not be listed as a criterion in funding guidelines. Prevention work, however, often sits well alongside other programs or can be framed in your grant to suit the funders’ requirements. For example, funding for increasing women and girls leadership in sport might be available, but not promoted as prevention.

• make sure that your prevention work is visible and measurable and the findings and knowledge of your work are communicated to a broad audience. This will ensure your work is accountable to the decision-makers and funding bodies.

• align your work with national, state and local prevention and gender equality plans to ensure the work is integrated into the broader prevention agenda. Action undertaken in isolation will have less impact than work that is integrated and aligned.

• develop a prevention workforce through sharing skills and knowledge and training of new and potential workers and partners.
Putting the prevention of violence against women into practice: How to Change the story

All prevention work can contribute to building the knowledge, skill and commitment of the organisations, communities, individuals and systems that are needed to prevent violence against women over a sustained period of time.

Resources to support the PLAN stage


Stage 4. Implement

Now that your strategy has a clear, researched and considered approach, it’s time to put that strategy into action.

Key issues to think about throughout the implementation of your prevention strategy are:

- evaluation and continuous improvement
- partnerships and stakeholders
- participatory approach.

Throughout the implementation of your strategy, you should refer back to your logic model and your implementation plan, and be realistic about timeframes for implementation.

**Evaluation and continuous improvement**
- Keep the key principle and approaches for effective prevention practice, detailed in Section 5 of this Handbook, at the forefront of your mind throughout implementation.
- Are you collecting the data you need to evaluate your work?
- Reflect and evaluate throughout implementation. Are things going as you had expected? Do you need to revise your implementation plan to make more time for some activities?
- Remember that things might not go as you expected or planned. Ask yourself, how is the strategy progressing? Is it following the expected pattern of change? Do you need to make any adjustments? You may want to keep a journal or log of how the strategy is going.

**Partnerships and stakeholders**
- Monitor how partnerships and relationships with partners and other stakeholders are progressing. Are they working well? Does everyone have the information they need? Are there referral arrangements you established for response and support if participants disclose violence? Are they working?
- How are you going to get people to participate and engage with your strategy? What steps did you identify during planning? What are the practical logistics of making this happen?

**Take a participatory approach**
- Who is responsible for implementing the strategy? Do you need to provide any further training for your staff or program facilitators? This may include training related to cultural competency, inclusive and accessible practice with people with disabilities including those with communication disorder, and awareness of transphobia and homophobia.
- You might want to promote and host an event where the prevention strategy is publicised and the key messages are presented. This can be a good way to engage with the wider community (see Section 8 for further information on holding a prevention event).
- Include the voices of participants in your reflection and evaluation by continuing your engagement and consultation with them. Ask them how they feel about the strategy. Is there anything they want to do differently or that they think is not working?

**Resources to support the IMPLEMENT stage**


Centers for Disease Control and Prevention, [Training professionals in the primary prevention of sexual and intimate partner violence](https://stacks.cdc.gov/view/cdc/5760)

VicHealth runs a number of [training courses for the prevention workforce](https://www.vichealth.vic.gov.au/courses-and-events/vichealth-short-courses)
Stage 5. Evaluate

Evaluation is crucial for effective and sustainable prevention work to learn about what works and what doesn’t work, and to examine and prevent unintended consequences. Evaluation provides solid information to share with others and to help build a prevention sector.

The key elements and steps to evaluating prevention activities are detailed in Section 9.

Stage 6. Learn

This stage includes two key elements:

- learning through reflection
- sharing what you have learnt.

Learning through reflection

Throughout the planning and implementation of a strategy it is important to reflect on what you have learnt and use that to revise and reshape the strategy where necessary. This is known as an ‘action learning’ approach. Action learning uses critical reflection to affirm positives as well as identifying areas for development or change.

Questions to ask yourself as part of critical reflection include:

- what do we now know about prevention work in our setting or community that we didn’t know before?
- what has been confirmed about prevention work in our setting or community that others also experienced?
- what worked or did not work?
- were there any negative outcomes?
- what were the unintended impacts – positive and negative?
- what could be improved?
- what would we do differently or the same?
- what lessons do we want to share with other practitioners about the work?

Keeping a journal or diary can be a useful tool to encourage reflection and learning as your strategy is planned and implemented. Creating or joining a community of practice/learning network is also a way to participate in reflective practice. Building discreet activities to prompt reflection about your work into your action plans can also be useful.
Communities of Practice as a tool for reflective practice

It is important to reflect on your practice as an individual, but there are also benefits to using reflective practice as a group, such as through a community of practice. This can be an opportunity for people undertaking similar work to share experiences and to reflect and improve prevention practice.

Participants can benefit from sharing knowledge, experience, new evidence and resources with others working on the same issue in different settings or locations.

Communities of Practice are relatively new in the prevention area. Evaluation reports from two Communities of Practice associated with recent prevention programs, which include recommendation for good practice, can be found on the Victorian Government website and the Our Watch website.

The highlights and insights from advanced practitioners who attended VicHealth’s Community of Practice Forums may assist in your own reflection process. A Canadian National Community of Practice Toolkit also features a number of helpful resources.

If there aren’t opportunities to join or establish practitioner networks or a community of practice in your area or setting, you can also invite feedback from colleagues and the community you are working with about the work and your practice.

Sharing your learning

Sharing information and learning with others is central to building effective prevention work across Australia. As you collect information on your strategy through your evaluation as well as through your practice experiences, think about the best way to share this information with other practitioners and your key stakeholders. Communicating the outcomes from your work is important for transparency and accountability. Your stakeholders have been involved in decision-making and participation throughout your strategy, so it is important for them to understand what impact the work has had.

Incorporating feedback loops – where stakeholders receive regular updates on the progress of the strategy, alerting them to any emerging issues that need adjusting to ensure the work stays on track – into the design of your strategy and your evaluation plan will support ongoing reflection from your stakeholders and facilitators, and make sure that important lessons become part of future strategies. This learning and reflecting is also important for the potential future scale-up or expansion of your strategy, as well as for other initiatives. Think about what steps you would need to take to successfully implement this strategy again, either in the same context or in different settings.

Resources to support the LEARN stage


Different practitioner sectors have their own communities of practice that can offer support, training and resources for those working in prevention. Check through your local women’s health service or through Our Watch, http://www.ourwatch.org.au/
Appendices
## Appendix 1: Stakeholder mapping matrix

<table>
<thead>
<tr>
<th>Influence/Power of stakeholders</th>
<th>Interest of stakeholders</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>High Power, Low interest</strong></td>
<td>Meet their needs</td>
</tr>
<tr>
<td></td>
<td>Keep satisfied</td>
</tr>
<tr>
<td><strong>High Power, High interest</strong></td>
<td>Key player</td>
</tr>
<tr>
<td></td>
<td>Engage closely</td>
</tr>
<tr>
<td><strong>Low Power, Low interest</strong></td>
<td>Least important</td>
</tr>
<tr>
<td></td>
<td>Minimal effort</td>
</tr>
<tr>
<td><strong>Low Power, High interest</strong></td>
<td>Show consideration</td>
</tr>
<tr>
<td></td>
<td>Keep informed</td>
</tr>
</tbody>
</table>

*Use this matrix to identify the key stakeholders who will influence or be impacted by your prevention strategy remembering that every sector, institution, organisation, community and individual has a potential role to play in preventing violence against women. The matrix can also help identify who might be invisible or excluded from a stakeholder mapping process through the inclusion of key questions to assist with making the stakeholder group gender equitable and inclusive.*

Consider the level of participation that different stakeholders should have or need to have. Identifying the relationships between you and your stakeholders, and how they will interact with your strategy, will help identify the best methods of communication and consultation with them. Remember to think about how your work will be connected to broader prevention strategies, at a local, state and territory level and national level.

The table below sets out the potential stakeholders for you to think about and key points for you to consider. Refer back to the stakeholder mapping matrix (above) to think about how different stakeholders may influence and impact your strategy. Consider if some stakeholders would be valuable partners in the work or form part of the governance structure of the initiative.

You can then use the stakeholder matrix to map out your key stakeholders and think about the power and interest of different stakeholders. This exercise should encourage reflective prevention practice as you consider the relationships both with and between your stakeholders. Identifying the power and gendered dynamics of the relationships between your various stakeholders and in your own relationships as a practitioner will help identify the strengths, weaknesses, opportunities and threats that will influence the success of your strategy.
<table>
<thead>
<tr>
<th>Stakeholder</th>
<th>Who are they?</th>
<th>Key considerations or questions to ask</th>
</tr>
</thead>
</table>
| Participants or target audience                 | Identifying your participants, beneficiaries or target audience is important to make sure the strategy is appropriate and relevant, and to improve uptake of the key messages and activities.  
This might be individuals or groups of people, an organisation or community, government agencies and industries. | Who does the intervention work directly with, or who is the intervention trying to reach?  
Will it target specific individuals or groups of people, or do you want to work with everyone in a specific community?  
Will it work with men and boys or with women and girls or with the whole community?  
Who is likely to benefit and who may be negatively impacted from this program?  
Are there groups of women who are more likely to be impacted by the program?                                                                 |
| Trainers or facilitators                        | Identify the trainers, facilitators and other practitioners who will use your strategy and work with your participants or target audience.                                                                   | Who is going to implement the strategy?  
Do they have the necessary skills and experience?  
Are you modelling good practice by having experienced women and men co-facilitate in a respectful and empowering manner?                                                                                                                |
| Community members                               | Even if your strategy has a defined target audience or community, engaging with the broader community in which the strategy is being implemented is critical. Community members can offer important partnerships and can be influential in the strategy’s success.  
It is also important to consult with the community to minimise resistance and backlash.  
It is important to define the scope of your ‘community’, as this may refer to a small population such as a school or suburb, or it may relate to a wider municipality. | Who are the people in the community that will be impacted or who have an interest in the strategy?  
Who is ‘the community’ we are intending to work closely with?  
Are we using appropriate language to engage community members?  
How will the experiences, knowledge and opinions of different women be included?                                                                 |
| Key or influential individuals, gatekeepers, champions of change | There may be key individuals who hold particular influence over decisions and events within the community. Often these individuals will identify themselves to the strategy’s organisers, however you should remember that the loudest voices in the group are not always the most important. In culturally diverse communities, you may need to identify key people who can help make sure the strategy is culturally sensitive and relevant for people with different needs.  
In some settings these may be known as ‘champions of change’ and can be influential advocates to promote the strategy. | Who is in positions of management or leadership within your target community or organisation? Are they formal or informal leaders?  
Who else might have decision-making power or can influence people’s behaviour and attitudes toward the strategy’s activities and key messages?  
Will the strategy use influential individuals or advocates to champion the messages of the strategy?  
If only men are identified as champions, how can we bring women champions into the initiative?  
If the gatekeepers are blocking access to people who traditionally have less power and control in society, how can we work with that community to ensure broader representation? |
<table>
<thead>
<tr>
<th>Stakeholder</th>
<th>Who are they?</th>
<th>Key considerations or questions to ask</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community organisations</td>
<td>Different organisations often have pre-existing relationships and interactions in communities and can be important for partnerships. These partnerships may be across different prevention settings. This may include health, legal and justice services, schools, businesses, faith-based organisations, media and community services.</td>
<td>Which agencies or organisations within the community will be important partners for prevention work in your setting or area? Are there new or marginal organisations which have been excluded?</td>
</tr>
<tr>
<td>Response sector</td>
<td>Response and support services for victim/survivors of violence against women are central to the successful and safe implementation of primary prevention strategies. These will include counselling and rape crisis centres, family and domestic violence services, women’s health organisations, medical and reproductive health services, women’s shelters, child support agencies, and legal and justice services.</td>
<td>What are the available response and support services for women and their children who have experienced violence? How can we develop a strong partnership with existing response services, including a referral mechanism for women who disclose violence? If strong response services are not present in the area, is it too great a risk to implement a strategy that could cause harm without the necessary support measures in place?</td>
</tr>
<tr>
<td>Government</td>
<td>Governments as partners can be helpful in promoting advocacy efforts and encouraging participation. They also determine the policies, legislations and regulations that make up the prevention infrastructure and therefore have a key stake in how strategies are implemented. It may be important to coordinate with local governments or other government representatives to organise or facilitate the strategy, or to get permission for specific elements of the strategy. Local government may also be important for encouraging participation or supporting the strategy’s key messages within the community.</td>
<td>Does the strategy require partnership or coordination with any local, state or federal government agencies? Which government agencies have a stake in the strategy’s implementation?</td>
</tr>
</tbody>
</table>
Appendix 2: Implementation plan template

Implementation plans should include:

- objectives
- key actions to meet the objectives
- tasks or activities required for each action
- timelines
- who will be leading this action
- task status, such as: completed, on schedule, behind schedule, cancelled
- deliverables
- priority
- a section for notes and comments can be useful to note any additional considerations.

An implementation plan should reflect the discussions, consultations and planning that has taken place. An implementation plan allows you to think and plan for critical components before beginning. By detailing all critical steps before starting the project, you can identify the resources required and who is available to assist with this. An implementation plan also allows you to monitor progress and share this with stakeholders.

This is an example of an implementation plan that can be modified to suit the project or strategy that you are working on.

<table>
<thead>
<tr>
<th>Name: Name of the strategy or initiative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objectives: The goals of the prevention work</td>
</tr>
<tr>
<td>Key Action</td>
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</table>

Appendix 2: Implementation plan template
Appendix 3: Project planning template

The Project Planning template can assist you to develop your project and ensure you have considered all of the key elements that are needed to plan prevention projects.

<table>
<thead>
<tr>
<th>1. Name of project</th>
</tr>
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<tbody>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Description of project</th>
</tr>
</thead>
<tbody>
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</table>

<table>
<thead>
<tr>
<th>3. What is the overall objective/s of the project?</th>
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<tbody>
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<table>
<thead>
<tr>
<th>4. Which setting(s) will your project operate in?</th>
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<tbody>
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</table>

<table>
<thead>
<tr>
<th>5. Reminder – ensure you have conducted a gender analysis in the setting/s you have selected (Section 7)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ednaanation and care for children and other tertiary institutions</td>
</tr>
<tr>
<td>Education and care for children and young people</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6. Who is your target audience and why? (reminder to undertake a stakeholder analysis – see Appendix 1 and Section 7)</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>7. Who are your key stakeholders in the project? (see the stakeholder mapping matrix in Appendix 1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• How do you plan to engage with these stakeholders?</td>
</tr>
<tr>
<td>• Detail the roles and key actions these stakeholders will have in your project</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8. What level/s of the ecological model does your project address?</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Individual and relationship level</td>
</tr>
<tr>
<td>• Community and organisational level</td>
</tr>
<tr>
<td>• System and institutional level</td>
</tr>
<tr>
<td>• Societal level</td>
</tr>
</tbody>
</table>
9. How are the gendered drivers (1-4 below) and reinforcing factors (5-9 below) of violence against women present in the setting/s you’re working in? Be as specific as possible.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Condoning of violence against women</td>
</tr>
<tr>
<td>2.</td>
<td>Men’s control of decision-making and limits to women’s independence in public and private life</td>
</tr>
<tr>
<td>3.</td>
<td>Rigid gender roles and stereotyped constructions of masculinity and femininity</td>
</tr>
<tr>
<td>4.</td>
<td>Male peer relations that emphasise aggression and disrespect towards women</td>
</tr>
<tr>
<td>5.</td>
<td>Condoning of violence in general</td>
</tr>
<tr>
<td>6.</td>
<td>Experience of and exposure to violence</td>
</tr>
<tr>
<td>7.</td>
<td>Weakening of pro-social behaviour, especially harmful use of alcohol</td>
</tr>
<tr>
<td>8.</td>
<td>Socio-economic inequality and discrimination</td>
</tr>
<tr>
<td>9.</td>
<td>Backlash factors (increases in violence when male dominance, power or status is challenged)</td>
</tr>
</tbody>
</table>

10. How will your project address the essential actions (1-5 below) and supporting actions (6-10 below) required to prevent violence against women? Be as specific as possible.

**Reminder – you don’t have to address all of the essential actions**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Challenge condoning of violence against women</td>
</tr>
<tr>
<td>2.</td>
<td>Promote women’s independence and decision-making in public and private life</td>
</tr>
<tr>
<td>3.</td>
<td>Foster positive personal identities and challenge gender stereotypes and roles</td>
</tr>
<tr>
<td>4.</td>
<td>Strengthen positive, equal and respectful relations between and among women and men, girls and boys</td>
</tr>
</tbody>
</table>
5. Promote and normalise gender equality in public and private life

6. Challenge the normalisation of violence as an expression of masculinity or male dominance

7. Prevent exposure to violence and support those affected to reduce its consequences

8. Address the intersections between social norms relating to alcohol and gender

9. Reduce backlash by engaging men and boys in gender equality, building relationship skills and social connections

10. Promote broader social equality and address structural discrimination and disadvantage

11. How will you undertake the essential actions in a way that considers how multiple systems and structures of oppression and discrimination affect different people? Specifically, have you thought about how to be inclusive and responsive to diversity by undertaking the following, where appropriate:
   • tailoring initiatives to your audience
   • ensuring initiatives are inclusive
   • working across the life course

How will you apply the following additional good practice approaches in your work?
   • work in partnership on common goals
   • challenge masculinity and engage men and boys while empowering women and girls
   • develop and maintain a reflective practice.

12. How will your project use the proven and promising techniques identified in Section 6? Reminder —you do not have to use all of the techniques.

Direct participation programs

Community mobilisation and strengthening

Organisational development

Communications and social marketing

Civil society advocacy
13. Ensure you have undertaken all of the ten key steps for evaluation (see Section 9)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Identify the purpose and users of your evaluation</td>
</tr>
<tr>
<td>2.</td>
<td>Develop or review your logic model</td>
</tr>
<tr>
<td>3.</td>
<td>Develop your overall program design</td>
</tr>
<tr>
<td>4.</td>
<td>Engage the right people to conduct your evaluation</td>
</tr>
<tr>
<td>5.</td>
<td>Establish your indicators</td>
</tr>
<tr>
<td>6.</td>
<td>Select your data collection methods and develop instruments</td>
</tr>
<tr>
<td>7.</td>
<td>Implement your data collection</td>
</tr>
<tr>
<td>8.</td>
<td>Analyse and interpret your data</td>
</tr>
<tr>
<td>9.</td>
<td>Communicate and disseminate your findings to facilitate shared learning</td>
</tr>
<tr>
<td>10.</td>
<td>Feedback findings to improve your prevention strategy</td>
</tr>
</tbody>
</table>
Appendix 5: Alternative text for figures
Appendix 1

Page 158

This image illustrates a stakeholder mapping matrix. It is a table of two columns and two rows which are shown as four quadrants. On the left vertical side of the column it says influence/power of stakeholders. On the bottom of the two rows it says interest of stakeholders.

The first quadrant is titled high power, low interest. For stakeholders you identify as having this, you should meet their needs and keep them satisfied. The second quadrant is titled high power, high interest. For stakeholders you identify as having this, you should engage them closely as a key player. The third quadrant is titled low power, low interest. For stakeholders you identify as having this, you should engage them closely as a key player. The third quadrant is titled low power, low interest. These are your least important stakeholders and you should invest minimal effort with them. The fourth quadrant is titled low power, high interest. For stakeholders you identify as having this, you should show consideration and keep informed.
Endnotes
Endnotes


Endnotes


27 Always, *#Likeagirl*, https://www.youtube.com/watch?v=XjJQBjWYDTs


33 Australian Bureau of Statistics. (February 2015), *Gender Indicators*, http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/4125.0~Feb%202015~Main%20Features~Time%20use~410


Endnotes


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