



Gippsland Women's Health submission to the Family Violence Royal Commission

May 2015

Executive Summary

Gippsland Women's Health's (GWH) submission examines & evaluates the existing partnership approach to the prevention of family violence that is occurring within a rural context. We aim to increase the Royal Commission's understanding of gaps and limitations of current prevention approaches that are being delivered. These current approaches are guided by evidenced based primary prevention strategies from an International, National and State level.

As recognised by the Royal Commission's Terms of Reference, overwhelmingly the majority of perpetrators of family violence are men and victims are women and children. This submission will demonstrate the importance of utilising language that raises awareness and understanding of the gendered nature of this crime within primary prevention efforts.

Current partnership approaches to prevention

There are a number of partnership models across Victoria dedicated to preventing men's violence against women before it occurs. In Gippsland, the funded partnership approach to prevention (State Government Victoria Department of Justice & Regulation Reducing Violence against Women and their Children Grants) includes a formalised Regional Prevention Steering Committee as part of a clear governance structure.

Early evaluation of the effectiveness of the Gippsland Preventing Violence Against Women (PMVAW) partnership indicates that there has been a direct increase in prevention activities within Gippsland as a result of the formation of the Prevention Steering Committee and the guidance of the lead agency Gippsland Women's Health (GWH). Below are observations and analysis provided by external evaluator, Federation University.

"The PMVAW partnership, particularly regular participation in Steering Group meetings and access to the resource of a Gippsland Women's Health Service project worker, has strengthened the capacity of partners to develop projects specific to their target groups."

"They (the committee) agreed to explore opportunities for sharing resources to ease the burden on event organisers and minimise the costs incurred, such as guest speakers."

"The PMVAW Steering Committee performs a key consultation and information sharing function. As described above, the meetings are a site of collaboration on potential opportunities to maximise the reach and impact of the work being done by all partners, they also provide a space for shared knowledge, which in turn lead to new partnerships."

The 'work being done' referred to in the above observation includes;

- 3 training modules aimed at:
 1. Changing attitudes to family violence
 2. Understanding the link between gender inequality and men's violence against women
 3. Increasing active bystander behaviour
- Implementing workplace policies to address family violence
- Implementing gender audits within the workplace and sport settings
- Building local leadership/action groups
- Holding community events/awareness activities
- Promoting & celebrating women's leadership

Recommendation

- 1. That a partnership approach is integral to the success of primary prevention efforts. Regionally driven partnership models allow for clear coordination of actions without duplication. The development of Regional Prevention Steering Committees across Victoria led by regional Women's Health Services, and guided by a state wide body is required to drive and monitor evidence based local prevention efforts.**

- 2. That Women's Health Association Victoria (WHAV) be included in the development of a state wide body to drive regionally based partnership approaches.**

- 3. Victoria's Women's Health Services must have ongoing funding for at least 1.5 EFT per organisation, to lead and coordinate primary prevention action in every region across the state, to ensure an intersectional approach to that work and to conduct and/or support best-practice evaluations that can determine the value of grassroots efforts and which can be pooled to arrive at an overall picture of Victorian achievements in WHS-led initiatives.**

Limitations to current partnership approaches

Organisations from the public health and wellbeing sector that receive Integrated Health Promotion funding from Victorian DHHS have limited capacity to participate in prevention of men's violence against women activities. This greatly reduces the level of health promotion expertise addressing the issue of family violence and violence against women. This limitation occurs as the current Victorian Health and Wellbeing Plan does not include Violence Against Women as a key priority area. The purpose of this plan is to improve the health and wellbeing of all Victorians by engaging communities in prevention, and by strengthening systems for health protection, health promotion and preventive healthcare across all sectors and all levels of government and to support local public health and wellbeing planning. Health and wellbeing planning provides an opportunity to take action on the determinants of violence against women as outlined in the *VicHealth Preventing violence before it occurs: A framework and background paper to guide the primary prevention of violence against women in Victoria, 2007*.

Evidence from the Gippsland partnership approach demonstrates that the involvement of Primary Care Partnerships in the development and implementation of sub-regional action groups has greatly increased the capacity and expertise at the local level to utilise the *VicHealth Preventing violence before it occurs: Framework 2009* to coordinate activities.

Recommendation

- 4. That the Victorian Public Health and Wellbeing Plan lists preventing violence against women as a key priority area. This would increase level of involvement by IHP funded organisations in current partnerships developed to prevent violence before it occurs and in turn increase the level of public health and health promotion expertise at the local level working to prevent violence before it occurs.**

Limitations to settings based approaches to prevention

The Gippsland partnership approach provides the opportunity for health promotion organisations such as Gippsland Women's Health to engage with non-traditional partners in the work to prevent men's violence against women including the Gippsland Regional Sports Assembly, GippSport. This partnership has been formalised with an MOU and provides the opportunity to reach a range of population groups through the sports setting. The MOU has assisted with the development of localised approaches and programs and the engagement of sporting clubs.

This work takes time and after 2 years a number of clubs are engaging with prevention activities and are keen to deliver key prevention messages within their club, participate in gender audits, review club policies and empower women to become leaders within the sport setting. This work is guided by the *VicHealth Preventing violence before it occurs: A framework and background paper to guide the primary prevention of violence against women in Victoria, 2007*, and utilises and builds on evidence based programs that have been delivered within the sport setting.

However recent changes to the Victorian Regional Sports Assemblies (RSA) funding stream through VicHealth has resulted in GippSport (local RSA in Gippsland) to revise their capacity to remain in this space and they will not be able to continue to participate in the PMVAW partnership to the same extent. This will directly limit the amount of work that can be achieved within the sport setting. This again demonstrates the lack of coordination at the State level to recognise the multi-layered and cross-sectoral efforts that are required to create long term approaches to prevent men's violence against women, in particular Family Violence.

Recommendation

5. That Regional Sports Assemblies are funded to participate in prevention efforts as they have the expertise in working with sporting clubs and have demonstrated within the Gippsland PMVAW model that they are the integral to the success of work within the sport and recreation setting.

6. That an incentives based system be developed to assist sporting clubs, which are largely volunteer based organisations, to participate in prevention activities eg. Incentives for coaching & leadership staff to become trained bystanders, small grants for clubs participating in community awareness activities and policy review.

The importance of getting community messaging right

As outlined in the Royal Commission into Family Violence Issues Paper under point 22. That there may be a need to increase public awareness of the problem of family violence. This has been highlighted by findings from the 2013 National Community Attitudes towards Violence Against Women Survey (NCAS) that the majority of Australians have a good knowledge of violence against women and recognise it as a problem. However the report also highlighted the clear link between people's attitude towards gender equality and attitudes towards violence. The Women's Health Sector in Victoria understands that without the understanding of gender as a determinant of violence it is impossible for individuals to make change. Community messaging around this issue has largely focused on increasing community understanding that violence against women exists and the impact that this violence has on the community is serious. This has clearly contributed to the increased understanding of the seriousness of violence against women that was identified by the 2013 NCAS. However there has been a lack of campaigns focusing on the determinants of violence with the aim of increasing community understanding of the gendered nature of family violence in particular and the need to improve gender equality in order to prevent men's violence against women.

The Gippsland partnership has been delivering training in relation to improving the understanding of how gender inequality is both a cause and consequence of men's violence against women and that in order to prevent this type of violence then we need to act to change attitudes towards women, challenge rigid gender roles & sexist attitudes and increase opportunities for women's leadership. This training and community messaging is in trial stage but is showing promise in achieving its goal.

Recommendation

7. That community messaging aims to increase the awareness of the root cause and gendered nature of family violence within the wider community.

8. That community messaging provide clear action for people to take in regard to challenging rigid gender stereo types, sexist attitudes and recognising women as equal to men.

Primary prevention needs leadership and coordination

Primary prevention can't be done in isolation. It requires cross-government, multi-sector, whole-of-community and business partnerships. Leadership and coordination are therefore essential elements of an effective primary prevention system, to support innovation, collaboration, evidence informed practice, knowledge exchange and avoid duplication of effort – and to provide an authorising environment for the work.

GWH wishes to see appropriate governance arrangements immediately established to oversee Victorian primary prevention efforts and provide vision, focus and direction, especially if policy is developed that explicitly and exclusively focuses on primary prevention, as proposed above. Such governance arrangements must reflect the fact that the primary prevention system is interlinked with the response system, and different from it too.

Our suggested governance and advisory structures for Victorian primary prevention and family violence response is shown in Figure 1. These governance arrangements build upon past Victorian governance experience, the structures and processes of which have eroded in recent years due to changes in government. GWH proposes a reinvigoration of, and building upon, these previous governance arrangements.



Violence against Women & Children Governance & Advisory Structures



Gippsland Women's Health

Recommendation

9. As an immediate priority, there must be stand-alone, long-term and evidence-informed policy to guide Victorian primary prevention programming, partnerships and the development of its workforce. The policy could comprise an overarching strategic framework with accompanying action plans. The policy must be for at least 20 years, with five-yearly reviews. It must be whole-of-government and whole-of-community; and it must be developed with bi-partisan support so it can withstand successive governments.

10. As an immediate priority, there must be adequate long-term funding for the implementation of evidence-based primary prevention initiatives under the new policy. These resourcing commitments must be separate to, and over and above, that for Victoria's family violence response system, and must be assured for the lifetime of the policy.

11. Appropriate governance arrangements must be immediately formed to oversee Victorian primary prevention efforts under the new policy and ensure that it maintains its primary prevention focus. All structures formed must involve high-level representation from across government departments and the community. As leaders in prevention, Women's Health Services must have a clear role in this governance structure.

12. It is critical that momentum for primary prevention in Victoria is not lost while the Royal Commission into Family Violence completes its inquiry. There must be continued funding of primary prevention initiatives in the interim.