Men & Boys Violence Prevention | Research Project Final Report

organisation and community wide strategies for prevention keep the field up to date with policy Assess possible programs wider strategy of prevention Develop Leadersh bes cost-effec targets t sexuality th the philanthropic and corpora ppro tion of gender based violence work in partnership

secondary and tertiary areas

Ensure programs comp





Less to lose and more to gain? Men and Boys Violence Prevention Research Project

Final Report

July 2014

Research Team - School of Social Sciences & Psychology

University of Western Sydney

Professor Moira Carmody

Professor and Research Project Leader

Dr Michael Salter

Lecturer in Criminology

Dr Geir H. Presterudstuen

Career Development Fellow

Dr Georgia Ovenden

Senior Research Associate
(July 2013-December 2013)

Dr Myvanwy Hudson

Research Associate
(January 2014-May 2014)

Cover art by Jason Morris Design

ISBN: 978-1-74108-316-3

Suggested citation:

Carmody, M., Salter, M., Presterudstuen, G.H. (2014). Less to lose and more to gain? Men and Boys Violence Prevention Research Project Final Report, University of Western Sydney, Australia.

TABLE OF CONTENTS

EXECUTIVE SUMMARY	6
RECOMMENDATIONS	9
TERMINOLOGY	11
SECTION 1. INTRODUCTION	12
1.1 Research Project	
1.2 METHODOLOGY	
1.3 RESEARCH SCOPE AND LIMITATIONS	18
SECTION 2. ENGAGING MEN AND BOYS IN VAW PRIMARY PREVENTION	19
2.1 DEFINING VAW AND PRIMARY PREVENTION	19
2.2 THE RATIONALE FOR ENGAGING MEN AND BOYS	22
2.3 THE CHARACTERISTICS OF EFFECTIVE PREVENTION PRACTICE	23
2.4 COMMUNITY READINESS FOR PREVENTION	23
2.4.1 Stages of Community Readiness	
2.5 CHARACTERISTICS OF EFFECTIVE PREVENTION	26
2.5.1 The National Standards for the Primary Prevention of Sexual Assault through	00
Education	
2.6 CHALLENGES IN ENGAGING MEN AND BOYS IN PREVENTION PROGRAMS	
2.6.1 Language of Engagement	
2.6.2 Cultural Sensitivity	
SECTION 3. KEY APPROACHES AND SETTINGS FOR ENGAGING MEN AND BOYS	
3.1 KEY APPROACHES	
3.1.1 Respectful Relationships	
3.1.2 Bystander strategies	
3.1.3 Whole of organisation approaches	
3.1.4 Community development approaches	
3.1.5 Infant and Parenting Programs	
3.1.6 Social Marketing	
3.2 KEY SETTINGS	
3.2.1 High schools and non- school youth settings	
3.2.3 Sports and Recreation	
3.2.4 Workplaces	
3.2.5 Faith communities	
3.3 CONCLUSION	
SECTION 4. INSIGHTS FROM THE FIELD	
4.1 BEST PRACTICE IN THE PRIMARY PREVENTION OF VAW	
4.1.2 Gauging increasing readiness for prevention	
4.1.3 Collaboration and consultation	
4.1.4 Engaging with key figures and leaders	
4.1.5 Engaging with other services and stakeholders	
4.1.6 Pedagogical strategies	
4.2 ENGAGING BOYS AND MEN	
4.2.1 Negotiating masculinity	
4.2.2 Recognising disadvantage	
4.2.3 Framing prevention for boys and men	
4.2.4 Peer-to-peer approaches	
· · · · · · · · · · · · · · · · · · ·	

4.2.5 Ensuring accountability	65
4.2.6 Evaluation and funding	66
4.3 CONCLUSION	
SECTION 5. EVALUATION OF BEST PRACTICE PROGRAMS	70
5.1 CASE STUDY 1 STRONG ABORIGINAL MEN PROGRAM (SAM)	72
5.1.2 Background and context to the program: ECAV's Aboriginal portfolio	73
5.1.3 The structure of the SAM program	
5.1.4 Context evaluation: Were important needs addressed?	77
5.1.5 Input evaluation: Was a defensible design employed?	79
5.1.6 Process evaluation: Was the design well executed?	81
5.1.7 Product evaluation: Did the effort succeed?	85
5.1.8 Conclusion of SAM evaluation	89
5.2 Case Study 2 - Evaluation of the National Rugby League Respectful	
RELATIONSHIPS SEX & ETHICS PROGRAM	
5.2.1 Background and Context to the Program	
5.2.2 Structure of the NRL Respectful Relationships Sex & Ethics program	
5.2.3 Context evaluation: Were Important Needs Addressed?	
5.2.4 Input evaluation: Was a defensible design employed?	
5.2.5 Process Evaluation: Was the Design Well Executed?	
5.2.6 Product Evaluation: Did the Effort Succeed?	
5.3 Conclusion of NRL Evaluation	101
6. RESEARCH STUDY CONCLUSION	102
7. REFERENCES	105

EXECUTIVE SUMMARY

Violence against women is a costly personal and social issue that has far reaching and long term impacts across the whole Australian community. Primary prevention takes these factors seriously and aims to intervene to prevent intimate partner violence and sexual violence before they occur.

Our research found considerable interest at a state and national level in engaging men and boys in violence against women (VAW) primary prevention. The study findings indicate that VAW primary prevention is still in the early stages of development both in Australia and internationally. Effective intervention is acknowledged as more likely to occur if actions are taken at multiple levels within the community. This requires action at policy levels as well as within communities or organisations and at the local level of service provision.

The survey that was undertaken for this study of prevention agencies and programs found a significant clustering of prevention efforts in Victoria and NSW with work also being undertaken in Queensland. Students at high school and university were the most common targets of primary prevention efforts, with adolescence and early adulthood recognised as key periods for VAW perpetration and victimisation. Other programs identified in our study worked specifically with Indigenous communities, CALD communities and sports organisations. Most stakeholders described their programs as underpinned by a gendered, ecological model of VAW that understands violence as a product of gender inequity and gender norms.

The findings from surveys and interviews indicate that a coherent and identifiable field of prevention practice focused specifically on men and boys has yet to emerge in Australia. Activities in the field are piecemeal, ad hoc and dispersed. There is no peak organisation that provides support to areas of emerging practice except in relation to men's behaviour change programs (i.e. perpetrator programs). Primary prevention activities are scarce as well as programs focused on boys or men specific activities.

Despite these findings, there are areas of prevention activity focusing on men and boys that indicate promising practice. These include programs and activities such as: respectful

relationships education, bystander strategies, community development approaches, whole of organisation approaches, infant and parenting programs and social marketing.

The strongest finding emerging from our research is that best practice in engaging men and boys occurs in two key areas of primary prevention:

- Community strengthening and development; and,
- Organisational and workforce development.

Section 5 of the report provides a detailed evaluation of 2 programs that demonstrate these approaches. They are the Strong Aboriginal Men Program (SAM) and the NRL Respectful Relationship Sex & Ethics Program. These two programs share the primary prevention goal of preventing violence before it occurs as well as other important similarities, in particular:

- They are underpinned by a gendered analysis of violence against women;
- They involve working specifically or mainly with men;
- They emerge from and are supported by organisations with significant experience and expertise in violence against women; and,
- They engage men in multi-systemic change including at the community or organisational level.

While both programs have been developed in response to men and boys in specific settings they are potentially adaptable and replicable in other settings. The knowledge gained from the design and implementation of the SAM program could be applied well to working with CALD communities and emerging refugee settings. The NRL program has many key features that can be used by diverse sporting codes and with other male workforce based programs.

Both programs therefore demonstrate a potential for reach and influence beyond their immediate program base. This is important to enhance further primary prevention activities and in addressing long term cost effectiveness. Primary prevention is both a short and long term investment in challenging deep seated practices. Without a clear commitment and investment in policies and programs focused on intervening before violence occurs, personal and financial costs will continue to grow leading to increased tertiary sector expenditure. Leadership is needed within organisations and across our diverse communities to promote policies and practices that build on existing international evidence to progress primary

prevention of VAW. In particular, attending to the following issues will increase engagement by men and boys in the prevention of VAW:

- Addressing the role of gender in VAW in a manner that is relevant and boys and men can understand
- Utilising educators who men and boys can relate to as role models will increase their willingness to 'hear' violence prevention messages
- Recognising that masculinities are diverse, fluid and sometimes contradictory within individuals, groups and communities
- Experiences of masculinity are effected by class, location, ethnicity, cultural background, sexuality and other factors; there is no 'one size fits all' experience
- This has implications for ensuring educational programs and other prevention activities are tailored to the specific needs of men; for example using methods of education that Indigenous men can relate to
- Engaging men and boys in the contexts and institutions in which they live, work and play may assist in enhancing the relevance of VAW prevention

RECOMMENDATIONS

The following recommendations are designed to progress violence prevention focused on men and boys. However, while there are specific recommendations particular to men and boys, many have application to the broader field of primary prevention.

1. Recommendations for prevention policy

- 1.1 Develop a whole of government approach to the primary prevention of violence with particular attention to engaging men and boys, operating from an ecological or multisystemic model to maximise cultural change.
- 1.2 Maximise interagency and intersectoral collaboration and ensure relevant strategic planning around program funding for men and boys' violence prevention.
- 1.3 Australia's National Research Organisation for Women's Safety (ANROWS), The National Foundation for the Prevention of Violence against Women and state governments to work in an integrated way to ensure primary prevention is a priority area of activity.
- 1.4 Build a state wide electronic network of service providers, researchers and policy staff to ensure dissemination of the latest research and keep the field up to date with policy developments. This network could serve to generate meetings, forums, practice discussions and conferences.
- 1.5 Prioritise workforce development including developing comprehensive training for new staff entering the field of primary prevention and the particular issues related to engaging men and boys.
- 1.6 Foster dialogue between primary, secondary and tertiary areas of prevention work to maximise the primary prevention of gender based violence by men and boys.
- 1.7 Actively work in partnership with the philanthropic and corporate sectors to develop organisation and community wide strategies for prevention.

2. Recommendations for practice enhancement

- 2.1 Foster the development of primary prevention activities at the whole of organisation and community based levels.
- 2.2 Ensure programs comply with best practice standards and ensure new programs are developed in consultation with specific subpopulations of men and boys to ensure they are appropriately targeted to maximise effectiveness.

2.3 Assess possible programs and activities for funding against the following criteria:

Best practice criteria for effective primary prevention programs with men & boys

- 1. The program aims to prevent violence before it occurs
- 2. The program aims to specifically engage men and boys as part of a wider strategy of prevention or as a discrete component
- 3. The program targets the social determinants of violence such as socio-economic status, cultural background, sexuality and ability
- 4. The program uses a multi-systemic approach to primary prevention
- 5. The program clearly demonstrates adherence to recognised best practice education or other prevention activity standards
- 6. The program is framed by a commitment to human rights and social justice
- 7. The program is embedded within a broader sectorial/community response demonstrated by close integration with other services
- 8. The program has clear objectives and strategies to meet those objectives
- 9. The program has a clearly articulated plan for evaluation

3. Funding of best practice programs

- **3.1** Investment in primary prevention activities targeting men and boys should consider the Stronger Aboriginal Men (SAM) program as an exemplar program focused on prevention via community strengthening and development.
- 3.2 Investment in primary prevention activities targeting men and boys should consider the NRL Respectful Relationship Sex & Ethics Program as an exemplar program focused on prevention via organisational and workforce development.

TERMINOLOGY

Determinants: A determinant refers an attribute or exposure which increases the probability of a health or behavioural outcome.

Domestic and family violence: Behaviours that control or dominate a person, causing them to fear for their own (or someone else's) safety. It includes behaviour that controls, intimidates, terrifies or coerces a person. It includes physical, sexual, verbal, psychological, mental, and emotional abuse; stalking; harassment; financial abuse and manipulation; denial of freedom and choice; and control of access to family and friends ("It Stops Here: Standing together to end domestic and family violence in NSW," 2014).

Early Intervention: Identifying and targeting individuals and groups who exhibit early signs of violent behaviour or of being subjected to violence.

Intimate partner violence (IPV): IPV describes physical, sexual, or psychological harm by a current or former partner or spouse. It may include economic and emotional forms of abuse.

Primary prevention: Primary prevention strategies seek to prevent a particular outcome before it occurs. These strategies can be delivered to the whole population or targeted to particular groups who are at higher risk of the outcome.

Protective factors: Protective factors refer to those factors that decrease the likelihood of someone becoming a victim or a perpetrator of IPV or SV.

Risk factors: In the context of VAW primary prevention, risk factors refer to those factors that increase the likelihood of someone becoming a victim or a perpetrator of IPV or SV.

Sexual violence (SV): SV refers to any sexual act perpetrated against another person without their consent

Social norms: Norms are defined by the World Health Organisation (2010, p 53) as shared 'rules or 'expectations of behaviour' which regulate the roles and relationships of men and women within a specific cultural and social group'.

Summative evaluation: Summative evaluation looks at the impact of an intervention on the target group.

Violence against women (VAW): VAW refers to acts of violence by men against women in the context of unequal power relations that are 'directed toward women by virtue of their gender' (True 2012, p 9). There are many forms of VAW including IPV, SV, and emotional and economic abuse.

SECTION 1. INTRODUCTION

Violence against Women (VAW) is a leading cause of injury, death and disability to women in Australia and around the world (UN General Assembly (2006). Intimate partner violence (IPV) has been found to cause greater harm to women aged 15-44 than other well-known risk factors for disease and death, including high blood pressure, smoking and obesity (VicHealth, 2004). VAW remains a leading cause of mental illness, self-harm, substance abuse and suicidality in women (Breckenridge & Salter, 2012; Ussher, 2010). A 2009 analysis found that the \$13.6 billion per annum cost of VAW in Australia was distributed throughout the health system, the labour market, the economy, child protection services, the criminal justice system, police and the welfare system (NCRVAWC, 2009). Without preventative action, these economic and human costs are likely to rise.

The National Plan to Reduce Violence against Women and their Children (Commonwealth of Australia, 2009) provides a policy framework for the development of a range of activities across the prevention spectrum. Around Australia various state governments have designed priority action plans to significantly reduce physical and sexual violence against women and children. In 2011 the NSW government released its ten year plan NSW 2021: A plan to make NSW number one, which included a commitment to significantly reduce VAW.

In 2014 the NSW Department of Family and Community Services (FACS) published its domestic and family violence reform framework It Stops Here: Standing together to end domestic and family violence in NSW. The first priority identified in the document is a strategic approach to the prevention of family and domestic violence, and the report articulated a whole of government commitment to achieving this outcome. These reforms recognise the underlying causes of VAW and promote an integrated and coordinated approach to prevention and early intervention.

Engaging men and boys is widely recognised as crucial to the success of VAW primary prevention initiatives. While the majority of boys and men do not engage in VAW and indeed condemn it, VAW is grounded in common understandings of male identity and masculinity (Pease, 2008). Men have a critical role to play in the prevention of VAW since the majority of perpetrators of VAW are men in a society where inequality based on gender is recognised, men are often in positions of social power and influence. Nonetheless, engaging men and

boys in VAW prevention is challenging and ongoing work that requires careful thought and planning.

1.1 RESEARCH PROJECT

This research project was commissioned by FACS to advance the implementation of the VAW reforms and to complement the National Plan to Reduce Violence against Women and their Children (Commonwealth of Australia 2009). This study has been commissioned as one of three studies funded under the Domestic and Family Violence Funding Program, with each study focusing on one of three prevention outcomes:

- Men are supported to be non-violent;
- High risk groups and communities are safe and free from violence; and,
- Children are supported and inter-generational violence is averted.

The research study focusing on men and boys addressed the following questions:

- 1. What is the effectiveness of existing approaches, strategies and projects that aim to prevent violent behaviour of men and boys throughout Australia?
- 2. What are the characteristics of good practice in men and boys' primary prevention and early intervention?
- 3. What strategies and programs should be developed to build on existing good practice?
- 4. What exemplar or demonstration projects could be implemented in NSW to advance practice? How would this be evaluated?

This study was conducted by a research team led by Professor Moira Carmody from the School of Social Sciences & Psychology at the University of Western Sydney, Australia. The team consisted of Dr Michael Salter, Dr Geir Presterudstuen, Dr Georgia Ovenden (July-December 2013) and Dr Myvanwy Hudson (January –May 2014). The project was funded from July 2013 until June 2014.

This report provides a comprehensive analysis of current men and boys' violence primary prevention and early intervention evidence, conceptual frameworks and trends in good practice. It reviews current men and boys' primary prevention and early intervention approaches, strategies and projects against good practice standards. The evaluation of two

primary prevention programs provides case studies of best practice. The report also provides recommendations for future directions in furthering primary prevention of VAW by focusing on engaging men and boys.

1.2 METHODOLOGY

The project was conducted in four stages as described below.

Stage 1: Analysis of men and boys' violence prevention, early intervention evidence, conceptual frameworks and practice standards (*July 1– August 31 2013*)

An application for Human Ethics Committee was approved at the beginning of the project. A detailed international research literature review was conducted and a summary of the findings was developed. The review included:

- research on VAW risk factors and determinants;
- evaluation studies of VAW primary prevention approaches;
- literature on the engagement of boys and men in primary prevention;
- conceptual frameworks for understanding VAW and primary prevention, and,
- relevant evaluation methodologies.

The review considered key findings from primary prevention in other fields. While practice and research in this field is still relatively in its early stages compared with other primary prevention areas, the review of research and evaluation studies suggest that the effective engagement of men and boys enhances primary prevention efforts.

Stage 2: Consultation with relevant stakeholders (September 2013- December 2013)

This stage focused on engaging a sample of key stakeholders across Australia with a specific interest in activities taking place in NSW. The objective was to map the activities of service providers who are currently delivering programs with relevance to men and boys' violence primary prevention and early intervention. This mapping exercise commenced in September 2013 and continued throughout the project. Locating the most relevant stakeholders proved time consuming as there was at the time no peak state or national VAW primary prevention body with the exception of the Victorian Health Promotion Foundation (VicHealth). It became apparent that there were a range of understandings of primary prevention and early

intervention, and this had to be negotiated with each new contact, in order to determine whether each program fell within the scope of this project.

This phase incorporated an online survey, as well as individual and focus group interviews with violence prevention workers, program designers and experts in the field of men and boys' violence prevention and early intervention. This project was also interested in targeting violence prevention workers that engage the diverse needs of men and boys across multiple settings (e.g. sports groups; youth/community groups; faith based and specific cultural groups). In order to achieve the above objectives, the data collection phase of the project (Phase 1) involved the following areas of enquiry:

i) An online survey for service providers

A short online anonymous survey was developed for service providers and was distributed through relevant organisations and service networks. The survey asked respondents about their qualifications and years of experience in primary prevention, the prevention approach used by their service or program, the theories underpinning their program or service, challenges and rewards in working with boys and men, and the funding and resourcing needs of their program. The survey allowed the participant to indicate their willingness for a follow up interview via telephone or in person. The survey was distributed nationally (October 2013 to January 2014) via an email list of clearinghouses and personal contacts. While the survey cannot claim to have reached all service providers it provides a useful snapshot of prevention activity focused around engaging men and boys.

One factor not anticipated was the number of concurrent consultations being conducted across the sector of violence prevention. These including consultations by the National Centre of Excellence to Reduce Violence against Women and their Children (now ANROWS), and the National Foundation for the Prevention of Violence against Women and their Children as well as a separate consultation on perpetrator and offender programs. This concurrent consultation, alongside other activities, indicated that the sector was close to suffering "consultation fatigue", potentially impacting on response rates to the survey. To offset this, and to minimise respondent burden, the survey was kept short and Twitter was used to promote the survey through clearinghouse and other sector email lists.

ii) Recruitment of individual and focus group interviews with experts and service providers

Following the survey key violence prevention workers, as well as experts and program creators in the field, were targeted for individual and focus group interviews. The interviews addressed the perceived strengths and weaknesses of violence prevention/early intervention programs that are currently (or have recently) been implemented by service providers in Australia, along with outcomes of evaluation. The interviews were semi-structured and allowed participants to reflect on some of the barriers to wider implementation of violence prevention and early intervention with men and boys.

iii) Data analysis

Data was analysed on an ongoing basis concurrent with data collection. The interview data was recorded on digital recorder and professionally transcribed. Transcripts from interviews and the qualitative data from the surveys were analysed to draw out themes most relevant to violence prevention workers. Section 4 of this report will discuss these findings in detail.

The originally intention was to hold a series of roundtables in NSW, Victoria and Queensland but investigations suggested that greater insight would be gained from visiting key agencies and service providers in NSW and Victoria. This approach was adopted due to the dispersed nature of activities in other states, and the high levels of roundtable meetings being held by private consultancy groups on behalf of other government agencies.

Stage 3: Evaluation of best practice programs (December 2013 - April 30, 2014)

This stage involved in-depth evaluation of two programs of particular interest and promise based on earlier reviews and consultations. The process of selection was guided by best practice criteria identified in previous stages of the research and consultation with FACS. To assist in this process the "Context, Input, Process, Product" (CIPP) evaluation model developed by Stufflebeam (1971) was used to frame discussion for the purpose of this report. The CIPP model of evaluation was developed with the aim of critically evaluating the objectives, requirements, implementation and outcomes of programs. As an evaluation approach, CIPP focuses on the adequacy of the methods used by programs to achieve their outcomes as well as on the outcomes themselves. It is geared towards providing information that is useful for decision-makers rather than those delivering the programs per se, with a focus on creating information to support managerial decisions (Mertens and Wilson

2012). Stufflebeam (1971 p. 268) describes the four components of the CIPP model as follows:

- 1. **Context evaluation** provides an overview of the problem that is addressed by the program and seeks to identify unmet needs and potential opportunities. The key question at this stage is: *Were important needs addressed*?
- 2. **Input evaluation** describes how needs and objectives could be met by program design and delivery. The key question at this stage is: *Was a defensible design employed*?
- 3. **Process evaluation** serves implementing decisions by monitoring project operations. The key question at this stage is: *Was the design well executed*?
- 4. **Product evaluation** saves recycling decisions by determining the degree to which objectives have been achieved and by determining the cause of the obtained results. The final question is: *Did the effort succeed?*

Once the programs were identified a detailed evaluation was conducted, which included a consideration of program outcomes and effectiveness including cost and the characteristics that shape effective practice. This evaluation was benchmarked against international and national standards of best practice identified in the earlier stages of the project. A presentation of this work in progress was made to FACS on 17 March 2014.

Stage 4: Recommendations for future directions (May 1, 2014- June 30, 2014)

The final stage of the project focused on the preparation of the final report, planning the dissemination of findings and recommendations for action. The dissemination of the project findings is an important aspect of building the capacity, knowledge and skill base of the violence prevention sector which is in its infancy in Australia. We will develop a number of journal articles based on findings of the study and host a one day research and practice workshop to discuss findings and encourage greater collaboration between key players in the prevention field.

1.3 RESEARCH SCOPE AND LIMITATIONS

Our review of the published and grey literature, as well as our survey and qualitative fieldwork in the prevention sector, revealed that VAW primary prevention is an exciting but emerging area of policy and practice in Australia. The majority of research and evaluation studies in VAW policy and practice have focused on tertiary interventions. Although some Australian agencies are global leaders in this field, VAW primary prevention is in the early phase of establishment. A number of promising prevention strategies and practices are being explored and, in some instances, investment in evaluation has enabled programs and services to build a convincing evidence base. However, in many instances services are applying prevention approaches but were not resourced to rigorously evaluate their practice.

It is increasingly recognised that social, economic and political characteristics of nation-states make an important contribution to the prevalence of VAW. Australian researchers and service providers emphasise the importance of public policy and legislation that supports women's economic and political participation, financial security and social inclusion in reducing VAW(Landvogt & Ramanathan, 2011; Theobald, 2011; True, 2012). While it is clear that this is an important future area of inquiry, it is beyond the scope of this paper to conduct a policy analysis of legislation and policy possibilities for engaging men and boys in the reduction of VAW.

Literature on working with men and boys in VAW prevention often suggests a continuum of engagement from hostile or disinterested to active leadership (e.g. Minerson, Carolo, Dinner, & Jones, 2011; Rich et al 2010). This continuum conflates male engagement with preventative messages and programs (a necessary precursor to changing attitudes and behaviour) with male engagement with anti-violence social movements. However, there are many other ways that men and boys resist VAW and only a small percentage will become actively involved in social movements. This report is focused on how the goals of VAW primary prevention, which is the reduction of the prevalence and incidence of VAW, can be furthered by enhancing the efficacy of programs engaging men and boys directly. The recruitment of men and boys into anti-VAW social and political movements is laudable and indicative of positive community mobilisation but it is not the focus of this report.

SECTION 2. ENGAGING MEN AND BOYS IN VAW PRIMARY **PREVENTION**

The aim of this section is to situate the engagement of men and boys in the context of VAW primary prevention and identify 'what works' in this area. The section begins by defining VAW and primary prevention before going on to examine the rationale for engaging men and boys in this work. It then summarises best practice standards in primary prevention and analyses the implications of these standards for VAW prevention work with men and boys. Many of the characteristics of effective practice identified in this literature are not genderspecific or even VAW-specific, but rather emerge from lessons that have been learnt in multiple fields of prevention activity. Other themes that emerge from VAW prevention research and discussion relate in particular to men and boys and the challenges, opportunities and practical steps involved in engaging them in VAW prevention.

2.1 DEFINING VAW AND PRIMARY PREVENTION

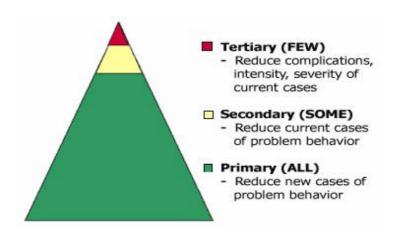
VAW refers to all forms of violence directed against women on the basis of their gender. IPV and SV are therefore variants of VAW, although these categories of VAW are not distinct and it is recognised that SV can occur in the context of IPV. The NSW Government has generally used the term 'domestic and family violence', defined as:

Behaviours that control or dominate a person, causing them to fear for their own (or someone else's) safety. It includes behaviour that controls, intimidates, terrifies or coerces a person. It includes physical, sexual, verbal, psychological, mental, and emotional abuse; stalking; harassment; financial abuse and manipulation; denial of freedom and choice; and control of access to family and friends("It Stops Here: Standing together to end domestic and family violence in NSW," 2014).

This definition is commensurate with the term IPV and understandings of VAW more broadly. However this report will use the term VAW to refer to all forms of gender-based violence directed at women, and then make distinctions between intimate partner violence (IPV) and sexual violence (SV) where relevant, for three reasons. The first is that IPV and SV share a number of risk factors and pathways, and hence research and programs focused on SV frequently have implications for IPV and vice versa. The second is that many primary

prevention programs target both SV and IPV or VAW generally. The third is that the overlap between IPV and SV complicates any attempt to disaggregate the two. Restricting this report to the subject of engaging men and boys in the prevention of domestic and family violence would delimit consideration of relevant research and programs, and this is not feasible given the nascent stage of VAW primary prevention research, policy and practice.

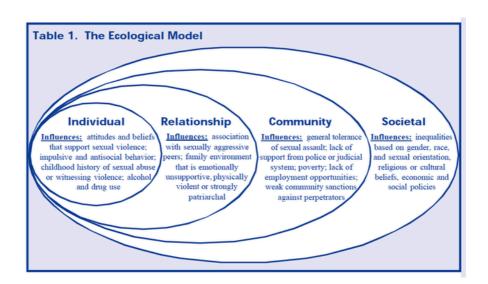
Primary prevention can be defined as strategies, interventions and programs that aim to prevent VAW before it occurs (VicHealth, 2007). Primary prevention is typically situated in relation to secondary and tertiary interventions, which are understood to target those populations at high risk of VAW and those already impacted by it, respectively. Primary prevention may include education efforts, social marketing campaigns, community mobilisation, and policy changes that target the social determinants of health and behaviour. Secondary prevention approaches may include support and transition services for women and children affected by violence, or services that target women, men or couples at high risk of VAW. Tertiary prevention in VAW can be understood broadly as those services and systems that intervene after the violence has occurred. This includes support and counselling services for victims, police and criminal justice responses to perpetrators, and potentially child protection interventions for impacted children and family law.



The relation of primary prevention to secondary and tertiary interventions can be illustrated as a pyramid as shown above, indicating the breadth and scope of primary prevention in contrast to the narrow and more targeted approaches of secondary and tertiary prevention. However these are often not as discrete as they appear in the diagram. Often programs or activities may have multiple prevention outcomes. Efforts to address VAW have typically been focused on tertiary prevention efforts. It is increasingly recognised that VAW is so prevalent that it is not

feasible to adequately resource tertiary prevention efforts without investing in efforts to reduce the prevalence of VAW overall (Krug, Mercy, Dahlberg, & Zwi, 2002; NCRVAWC, 2009; VicHealth, 2004). The important issue of concern here is to ensure that all prevention efforts do not remain at the tertiary end of the spectrum. Without developing policy and practice to intervene before violence occurs, there will be no significant change in crime figures.

Following the World Health Organisation's (WHO) release of the *World Report on Violence* and Health (Krug, Dahlberg, Merci, Zwi, & Lozano, 2002), VAW primary prevention is typically conceptualised according to an ecological model that identifies risk factors for violence at each level of society, from the individual to the societal. This model is frequently used in public health when planning and implementing health promotion interventions (Glanz, Rimer, and Viswanath 2008). The *World Report on Violence and Health* positioned VAW as a preventable outcome with multiple risk factors embedded within the social ecology. VAW primary prevention should therefore incorporate coordinated strategies that target multiple levels of the social ecology. The following table from the US Centers for Disease Control and Prevention (2004) demonstrates how the ecological model can be applied to the issue of sexual violence.



(Table 1 Centers for Disease Control and Prevention. Sexual violence prevention: beginning the dialogue. Atlanta, GA: Centers for Disease Control and Prevention; 2004).

In Australia, VicHealth has been the most active agency in the application of public health and primary prevention frameworks to VAW. Their framework, published in 2007, prioritises prevention activities that target the social and economic determinants of VAW and recognises

key contributing factors including gender differentials in income, employment and access to material resources (VicHealth, 2007). Importantly the VicHealth framework identified priority populations for prevention initiatives as well as priority settings for action. They endorse VAW primary prevention initiatives in a range of settings and institutions including schools, faith communities, workplaces and sectors such as the military.

2.2 THE RATIONALE FOR ENGAGING MEN AND BOYS

Social constructions of masculinities are at the root of VAW. Patriarchal and sexist attitudes and traditional understandings of masculinity increase men's likelihood of committing VAW (Murnen, Wright, & Kaluzny, 2002; Fabiano et al 2003;Stith et al. 2004; Turchik, & Edwards, 2012; Gullvag Holter 2013). When discussing masculinity from a community psychology perspective, Mankowski and Manton (2010) found that men's performance of gender contributed significantly to their engagement in a series of violent and risky behaviours:

Underlying each of these social problems are social expectations and norms, supported by social and organizational systems and practices that expect boys and men to reject or avoid anything stereotypically feminine, to be tough and aggressive, suppress emotions (other than anger), distance themselves emotionally and physically from other men, and strive towards competition, success and power (2010 p.74).

Such tensions around masculinities can in turn be considered contributing factors in men's engagement in VAW. The differential social position of women relative to men, due to well-recognised gender disparities in income, workforce participation and other factors, can inhibit women from protecting themselves and their children from violence, and empower men to enact violent and aggressive masculinities in their relations with women and children.

Work with men and boys is effective. While unequal relations of power between men and women arguably remains the foundation for all VAW (Cockburn 2010; Sweetman 2013), it is also important to recognise that relationships between men and women are complex and fluid. Many men are both willing and able to engage in activities that prevent violence and support women. A number of men respect women, negotiate power with women, and actively challenge gender inequalities on an everyday basis, a fact that can be successfully utilised in order to further engage men and boys in activities in VAW prevention (Berkowitz 2004).

VAW is an obstacle to the goals and aspirations of men and boys. Engaging men and boys in VAW prevention is a crucial way to involve men in work which have positive, transformative impacts on their own lives both in the short and long term (Wells et al 2013). One key aspect of programs aimed at engaging men and boys in the prevention of VAW is to extend the notion of empowerment, which is frequently used to frame policy initiatives aimed towards women, to include men as well. In this sense, men can be empowered to challenge stereotypical notions of masculinity, reject hyper-masculine ideologies and behaviours that condone, celebrate or facilitate violence and adopt alternative modes of masculinity.

2.3 THE CHARACTERISTICS OF EFFECTIVE PREVENTION PRACTICE

As discussed, VAW primary prevention is still in the early stages of development both in Australia and internationally. It is well recognised that the efficacy of interventions will be enhanced when preventative actions are undertaken at multiple levels. This requires action at policy levels as well as within communities or organisations and at the local level of service provision. Effective prevention practice therefore needs to operate on all these levels. The following discussion highlights effective practice frameworks for multiple levels of intervention. It begins by discussing the importance of understanding the readiness of a community to receive prevention messages. This will be followed by a discussion of the characteristics of effective general prevention programs and an application of how these have influenced the Australian National Sexual Assault Prevention Education Standards. The section will conclude by addressing specific issues that seek to increase the specific engagement of men and boys.

2.4 COMMUNITY READINESS FOR PREVENTION

Community can be defined as population or geographically based or on affiliation around certain values, beliefs or interests. Research on effective cultural change suggests that there is a need to assess a community's readiness to receive prevention messages. Community readiness is defined as the degree to which a community is prepared to take action on an issue. Readiness is

- Issue-specific
- Measurable
- Measurable across multiple dimensions
- May vary across dimensions

- May vary across different segments of a community
- Can be increased successfully
- Essential knowledge for the development of strategies and interventions. (Plested et al 2006 p.2)

The Community Readiness Model (CRM), developed by the Tri-Ethnic Center for Prevention Research at Colorado State University, integrates an assessment of the community's culture and readiness for change as well as resources to more effectively implement change strategies (Edwards, Jumper-Thurman, Plested, Oetting, & Swanson, 2000; Plested, Edwards, & Jumper-Thurman, 2006). The premise underlying this model is that effective social change requires an audience that is ready or open to understanding or identifying that there is an issue or problem that needs addressing. They may not be ready due to other pressing priorities like high rates of unemployment, social fragmentation or the dominance of traditional beliefs about gender.

The authors indicate how the model has been used across a range of prevention programs:

The community readiness theoretical model was originally created for use with alcohol and drug abuse prevention programs. It is now being used in a broad and varied arena of prevention programs. Health and nutrition programs such as those dealing with the reduction of sexually transmitted diseases, the elimination of heart disease, depression awareness, and AIDS awareness have used this model. It has also been used in environmentally-centered prevention programs (water and air quality, litter, recycling, etc.). Finally, social programs have benefited—the model has been used in numerous ways, including readiness assessment of communities before implementation of suicide prevention and intimate partner violence prevention programs (Edwards et al 2000 p. 293).

2.4.1 STAGES OF COMMUNITY READINESS

The Community Readiness Model (CRM) (Plested et al 2006) involves a 9 stage model to assess and help communities become increasingly ready and supportive of cultural change.

1.No awareness	Issue is not generally recognized by the community or leaders as a problem (or it may truly not be an issue)
2.Denial/ Resistance	At least some community members recognize that it is a concern, but there is little recognition that it might be occurring locally. "It's not our problem." "It's just <i>those</i> people who do that." "We can't do anything about it."
3. Vague Awareness	Most feel that there is a local concern, but there is no immediate motivation to do anything about it
4. Preplanning	There is clear recognition that something must be done, and there may even be a group addressing it. However, efforts are not focused or detailed.
5. Preparation	Active leaders begin planning in earnest. Community offers modest support of efforts.
6. Initiation	Enough information is available to justify efforts. Activities are underway.
7. Stabilization	Activities are supported by administrators or community decision makers. Staff are trained and experienced.
8. Confirmation/	Efforts are in place. Community members feel comfortable using services, and they support
Expansion	expansions. Local data are regularly obtained.
9. High Level of	Detailed and sophisticated knowledge exists about prevalence, causes, and consequences.
Community	Effective evaluation guides new directions. Model is applied to other issues.
Ownership	

A community's position within this scale of community readiness will determine the kind and level of prevention intervention required. For example if a community has no awareness of the extent and impact of VAW (stage 1), this is where prevention intervention needs to begin. Similarly, if a community is found to be in the preplanning (stage 4), then a different kind of assistance and activities are needed to assist the community to progress their prevention efforts and move closer towards a high level of community ownership of the issue (stage 9). A failure to recognise that communities are at different stages concerning knowledge and skills in terms of specific issues will result in a poor match between community needs and prevention initiatives. The likelihood of achieving change around a particular issue is therefore significantly lower.

This approach utilises elements of community development by focusing on community strengthening (van Mierlo 2012; Michau 2007; Mehta and Gopalakrihnan, 2007) and theories of social and behavioural change. It highlights the importance of careful planning in

introducing prevention activities and how change requires an ongoing commitment beyond short term pilot initiatives that are most common in the Australian prevention context. The model recognises that the term 'community' has multiple meanings. Its potential application to engaging men and boys in VAW prevention is strong as it recognises many different communities in which men and boys can be accessed for prevention efforts. Potential examples include school settings, specific sporting codes (such as rugby) and in specific workplaces which are seen as traditionally male dominated (such as mining, defence and manufacturing).

2.5 CHARACTERISTICS OF EFFECTIVE PREVENTION

Much of the early work on prevention has focused on developing strategies and running programs aimed at targeting populations deemed to be 'at risk'. General indicators of effective practice in prevention are available in the work of Nation et al. (2003), who conducted an extensive search of the prevention literature to determine the characteristics of effective programs. They identified nine characteristics that were consistently linked to success across four areas of prevention (substance abuse, risky sexual behaviour, school failure, and juvenile delinquency and violence). The following table from Nation et al (2003 p.452) indicates the principles and how they are defined.

Principle	Definition
Comprehensive	Multicomponent interventions that address critical domains (e.g., family, peers, community) that influence the development and perpetuation of the behaviors to be prevented
Varied teaching methods	Programs involve diverse teaching methods that focus on increasing awareness and understanding of the problem behaviors and on acquiring or enhancing skills
Sufficient dosage	Programs provide enough intervention to produce the desired effects and provide follow-up as necessary to maintain effects
Theory driven	Programs have a theoretical justification, are based on accurate information, and are supporte by empirical research
Positive relationships	Programs provide exposure to adults and peers in a way that promotes strong relationships an supports positive outcomes
Appropriately timed	Programs are initiated early enough to have an impact on the development of the problem behavior and are sensitive to the developmental needs of participants
Socioculturally relevant	Programs are tailored to the community and cultural norms of the participants and make efforts to include the target group in program planning and implementation
Outcome evaluation	Programs have clear goals and objectives and make an effort to systematically document their results relative to the goals
Well-trained staff	Program staff support the program and are provided with training regarding the implementation

2.5.1 THE NATIONAL STANDARDS FOR THE PRIMARY PREVENTION OF SEXUAL ASSAULT THROUGH EDUCATION

The National Standards for the Primary Prevention of Sexual Assault through Education were developed to guide the emerging field of prevention education around sexual violence in

Australia (Carmody et al. 2009). They built on the work of Nation et al (2003) with a specific focus on SV prevention education and other best practice evidence across the field of VAW. Generally prevention education has developed more rapidly around SV than IPV where tertiary work has been and remains a primary focus. The National Standards endorsed six key standards for best practice in the area of SV prevention education based on international and local research and evaluation studies. While many of the standards were seen as aspirational for prevention services across Australia, they provide a framework to assess the potential effectiveness of existing programs, assist in the design of new programs and provide guidance to policy makers on assessing funding applications. The six standards are briefly summarised below:

- Using coherent conceptual approaches to program design. Programs should endorse a clear framework for understanding why sexual violence occurs and how to reduce it. The authors recommend that a gender analysis, including an acknowledgement of the gendered reality of violence, is integral to all prevention programs.
- *Demonstrating the use of a theory of change*. Programs need to be based on models that facilitate attitude change, skills development and behavioural change. This includes conceptual links between program content and the perceived change outcomes.
- *Undertaking inclusive, relevant and culturally sensitive practice.* Program developers need to be aware of cultural aspects of program content and delivery and modify programs to ensure they are inclusive, sensitive and relevant to all population groups.
- Undertaking comprehensive program development and delivery. Programs should aspire to integrate who the program is targeting; what the specific structure of activities are; where the program will be delivered (context and target group); and how long the program will be run.
- *Using effective evaluation strategies*. Evaluation strategies need to be accompanied by a clear identification of how program content relates to intended outcomes.
- Supporting thorough training and professional development of educators. The success and sustainability of a program is dependent on the expertise and skills of the educators involved. Programs should provide educators with knowledge and skills to deliver the program, and adequately support participants.

An understanding of 'what works' in prevention is crucial when considering the efficacy of prevention and early intervention programs which specifically target men and boys. In this way the National Standards provide an important structure for framing this new direction in violence prevention practice.

2.6 CHALLENGES IN ENGAGING MEN AND BOYS IN PREVENTION PROGRAMS

The above frameworks provide a general backdrop of principles of best practice.

In their reviews of best practice in the engagement of men and boys in VAW primary prevention, both Berkowitz (2004) and Flood (2005/2006) endorse the findings of Nation et al. (2003) as integral to best practice in prevention, while also suggesting further criteria that specifically deal with the effective engagement of men and boys. These contributions can be summarised by four additional points:

- Integrated approach to prevention. Programs addressing men and boys need to be
 integrated in a wider prevention context in order to create an environment which is
 conducive to change. This change can be achieved through the use of mutuallyreinforcing, synergistic messages, which include a concurrent focus on cognitions,
 affective or emotional responses, and behaviour, delivered through a variety of
 channels to a variety of audiences.
- *Utilising men as peer educators*. Peer influences have a stronger impact on individual behaviours and attitudes than biological, personality, familial, religious, and cultural and other influences. Drawing upon men as role models is the most effective way to change men's behaviours.
- *Promoting positive messages*. Highlighting men as a part of the solution rather than perpetrators of the problem minimised men's defensiveness against participation and enables their more effective engagement in the program.
- *Emphasising empathy with victims*. Flood (2005/2006) proposed that building empathy amongst men and boys is a crucial aspect of successful prevention on the basis that a gender differential in empathy makes a significant contribution to male perpetration of VAW.

2.6.1 LANGUAGE OF ENGAGEMENT

Scholars and program creators in the area of men and boys' violence prevention have voiced caution about using language in programs that might ostracise or deter men and boys' participation (Berkowitz, 2001; Heppner et al. 1999; Flood, 2004). Some other changes to language which have been endorsed by the public health model have generated considerable debate. For example, recent attempts to disregard or 'skip over' the central role of gender and gendered practices in promoting VAW has been met with caution from a number of scholars (Phillips, 2006; Pease, 2008). Furthermore, as Reed, Miller and Silverman (2010) have argued, discounting the gendered nature of violence has serious consequences for the efficacy of prevention programs. They suggest that given the global consensus regarding the gendered nature of intimate partner violence, a failure to underline and educate about this reality can be seen as a step backward in public health responses to VAW.

Other research in this area also suggests that navigating gender 'in practice' causes particular tensions when facilitating groups of men. In their study of program facilitator's experiences, Casey et al. (2013) found that discussion about the links between traditional masculinity and power were often poorly received by male participants. Their findings support earlier research by Berkowitz (2004), who found that the majority of men reported feeling uncomfortable about 'being taught how to be men'; including how to behave in relationships with women, emotional expression and homophobia. Given that men are likely to feel defensive, Berkowitz argues that it is imperative that programs are delivered in safe, non-judgmental contexts.

Reviews of research also suggest that given the different goals of prevention across gender, prevention programs have a greater impact on men and boys when they are delivered as single-gender programs (Brecklin and Forde 2001; Berkowitz, 2004; Gidycz., Warkentin & Orchowski, 2007; Breitenbecher, 2000; Schewe, 2002; Yeater & Donohue, 1999. A number of authors suggest that attending to traditional roles that underlie male power and control is imperative in men's programs, particularly given their connection to behaviours that support male violence toward girls and women (Burgess, 2007; Berkowitz, 2002). Flood (2005/2006) has also argued that norms surrounding masculinity play a crucial role in VAW, and this must be carefully considered in programs with men to ensure effective prevention.

At the same time others have warned of the dangers of emphasising the gender divide, arguing that a focus on gender analysis and single gender groups might reaffirm the notion that men and women are innately 'different'. While the literature points to a preference for single gender groups, it is important to note that when deciding the gender composition of a program other influencing factors may need to be examined. As Casey et al. (2013) address in their recent paper, programs must also attend to intersectionality and the ways in which sexuality, race, disability and social positioning may impact men's engagement and program implementation in general. The importance of tailoring programs to meet the needs of specific community contexts will be addressed in a following section.

2.6.2 CULTURAL SENSITIVITY

2.6.2.1 CULTURAL AND LINGUISTICALLY DIVERSE COMMUNITIES (CALD) AND VAW PRIMARY PREVENTION

In recent years, academics and service providers working with men in violence prevention have started to address the importance of culturally competent sensitive programming and the complex relationship that exists between performances of masculinity, culture and power. Research in this area has highlighted the need to consider multiple masculinities, in addition to the economic, social, religious and historical factors that may influence men's investment in particular constructions of masculinity (Flood, 2013). For example, Pease's (2001) work with different cultural and ethnic groups in Australia revealed significant differences in constructions of masculinity. Furthermore, he noted that while popular notions of Australian masculinity have been largely defined in relation to hyper masculine norms such as 'mateship', hegemonic masculinity in Australia remains dependent on 'other' subordinated masculinities, such as those constructed around racial, sexual or class minorities.

Presently, the large majority of violence prevention programs have been developed for and by white males, and impact studies often reflect program effectiveness in privileged populations such as colleges in the United States and Canada (Lonsway, 2009). Arguably, the cultural reach of a large number of studies remains dubious. Heppner et al. (1999) found that programs that demonstrate efficacy in relation to white, privileged participants, may have limited success when trialled with men from diverse cultural backgrounds.

While research in this area remains contested, a number of studies have shown that culturally diverse notions of masculinity may also impact men's attitudes and propensity to sexual

violence (Bartels, L., 2010). Broad research studies suggest that higher levels of VAW are likely to be influenced by factors which align with specific cultural emphasises such as male dominance in the family, traditional gender roles and higher gender segregation (Flood & Pease, 2009; Nayak et al. 2003). Furthermore socio-cultural differences also impact perceptions about what is considered to be 'violent' behaviour. (Flood, 2013)

Much of the research in this area has focused on the reporting of violence by women from CALD backgrounds. For example, Mouzos & Makkai (2004) found that women from CALD backgrounds were likely to define violence more narrowly than their non-CALD counterparts. The resulting lower rates of reporting have been attributed to various factors, including spouse dependency; social isolation; language barriers; cultural and religious factors; lack of access to legal and support services (VicHealth, 2007; Flory, 2012; Bartels, 2010).

Similarly, men from CALD communities may be less likely to view violence perpetration as a problem that requires attention. This has been reported in refugee communities in Australia. Pease and Rees' (2008) study of refugees from Iraq, Sudan, Ethiopia, Bosnia, Serbia and Croatia found that the many men from these communities viewed government intervention of a 'family conflict' as something that undermined their authority and position in the family. Further, while men from a range of different backgrounds offer a range of apparent justifications for violence, the belief that violence was justified was more likely to be held by men from CALD backgrounds (VicHealth, 2007; 2010).

Flood (2013) has also identified a number of elements that needed to be addressed when considering violence prevention activities in CALD communities. These include:

- Addressing the social and economic conditions of CALD men and communities;
- Endorsing culturally relevant content (which acknowledges the impact of racism);
- Addressing culturally specific supports for violence and gender inequality;
- Drawing on local resources and texts in promoting non-violence and gender equality;
- Engaging male community and religious leaders; and,

Addressing men's experiences of changing gender dynamics in families;
 improving CALD men's access to services.

Research focused on VAW in CALD communities emphasises the range of factors that impact on violence in these communities (Grossman & Lundy, 2007). A focus on questions of culture and ethnicity can obscure mediating variables such as low socioeconomic status, which is an important risk factor for VAW, or the geographic location of communities, which can affect their access to support services. Attempts to increase the efficacy of behaviour change programs through the provision of culturally sensitive programming have had mixed results (Gondolf, 2007). Violence prevention programming to CALD communities may require sensitivity not only to cultural specificity but to other common concerns and issues shared by community members, such as employment opportunities or social isolation.

2.6.2 INDIGENOUS COMMUNITIES AND VAW PRIMARY PREVENTION

In Australia, evidence suggests that violence against women and children is more prevalent in Indigenous communities (Morgan & Chadwick 2009; Memmott et al. 2001). Furthermore, research has shown that Indigenous people may attach different meanings to the experience of violence. This is likely impacted by a range of factors such as colonisation, loss of ethnic identity and dispossession that further complicate indigenous experiences of violence (Mermott et al., 2006; Wright & Carmody, 2012). Increasingly, individuals working in violence prevention in Indigenous communities have emphasised the need to engage in culturally sensitive practice. For example Mermott et al. (2006) offered a comprehensive framework for good practice for working with Indigenous communities, including:

- the cultural and community grounding of projects (including the observation of Indigenous customs, protocols and traditions);
- engagement of men and elders from communities;
- activities aimed to enhance participant self-empowerment and self-esteem;
- the use of inter-generational family history and colonial experience as a method for healing;
- cultural preference for group approaches; and,

 culturally sensitive content; provision of a safe and non-judgemental environment.

Prevention programs for Indigenous people have tended to include a whole community focus rather than engage in efforts aimed at individual men (Urbis Keys Young, 2004). As outlined in the NASASV Standards (Carmody et al. 2009), the implementation of violence prevention and early intervention activities within Australian Indigenous communities are more effective if they are guided and supported by the whole local community, rather than be driven by representatives outside the community (also see ASTI Social Justice Report, 2007, p.26). VicHealth (2007) suggested a number of strategies to increase program effectiveness for diverse populations, including Indigenous communities. These include:

- ensuring that the structural inequalities and barriers faced by various communities are addressed;
- the development of partnerships with the communities including involving community leaders; and,
- ensuring cultural and linguistic appropriateness and relevance.

While numerous violence prevention initiatives with culturally diverse groups have been conducted elsewhere, very few have been conducted in an Australian context. One noteworthy project by Wright and Carmody (2012) involved tailoring a mixed-gender program to consider the particular needs of Indigenous participants living in regional NSW. The revised program considered the following broad areas of modification:

- educator requirements (to ensure educators are aware of culturally sensitive aspects of Indigenous communities and that Indigenous educators are appointed if available);
- provision of culturally appropriate support services for participants and educators;
- appropriate venue selection (ensuring privacy and convenience for participants); and,
- flexibility with regard to the program delivery schedule and alternative methods of teaching (to ensure participants with varying levels of literacy and language are able to engage in the program).

Implementing violence prevention and early intervention programs with men from CALD and Indigenous communities should consider relevant and culturally sensitive practice. This includes tailoring the program content to ensure that it includes information regarding culturally specific perceptions of gender and culture based rape myths, along with information regarding cultural perceptions of violence. Researchers in this area have also urged that programs tailored for men from culturally diverse backgrounds should highlight the links between racism and sexism and between racist and sexist violence (Flood and Pease, 2009; Flood, 2013; Pease and Rees, 2008). The benefit of having a program facilitator who is 'similar' to the program participants and familiar with culturally specific language and sensitive topics of discussion has been supported in the international literature (Schewe, 2002).

2.7 CONCLUSION

The primary prevention of VAW is an increasingly important area of work. This requires considering strategies that affect the social and institutional risk factors that contribute to VAW. Working out how to best support attitudinal and behavioural changes within communities and institutions requires a careful assessment of their readiness to receive prevention messages. This is a crucial first step to ensure any prevention actions meet the specific needs of a community.

Best practice standards in relation to prevention and sexual assault education indicate the importance of coherent conceptual approaches, a clearly articulated theory of change, undertaking culturally sensitive practice, having a range of comprehensive program activities and forms of delivery, effective evaluation strategies and training and professional development of educators.

Current research also suggests some additional specific considerations that program planners and educators need to understand to enhance the engagement of men and boys in violence prevention work. These include:

 Addressing the role of gender in VAW in a manner that is relevant and in a way that men and boys can understand

- Utilising educators who men and boys can relate to as role models will increase their willingness to 'hear' violence prevention messages
- Recognising that masculinities are diverse, fluid and sometimes contradictory within individuals, groups and communities
- There is no "one size fits all" experience of masculinity which is affected by class location, ethnicity, cultural background, sexuality and other factors
- Educational programs and other prevention activities are more effective when they are tailored to the specific needs of men; for example using methods of education that Indigenous men can relate to
- Engaging men and boys in the contexts and institutions in which they live, work and play may assist in enhancing the effectiveness of VAW prevention efforts
- Prevention strategies should act at a community/institutional level as well as an individual level such that boys and men are not 'responsibilised' in the absence of a supportive context

The following section will extend on these concepts by examining specific approaches to engage men and boys across multiple settings.

SECTION 3. KEY APPROACHES AND SETTINGS FOR ENGAGING MEN AND BOYS

3.1 KEY APPROACHES

This aim of this section is to highlight promising VAW primary prevention approaches that engage men and boys and to discuss the contexts in which this work is proving to be most effective. Finding a 'good fit' between prevention approach and setting enhances the relevance of VAW prevention for men and boys and provides opportunities to target the social determinants of VAW in everyday contexts. It is beyond the scope of this section to review all VAW prevention approaches or all possible settings for VAW primary prevention. However, these have been the subject of recent reviews (Martin et al., 2009; Renzetti, 2011; Staggs & Schewe, 2011; Stith, 2006). This section will begin with an overview of key approaches followed by a discussion of settings in which best practice for engaging men and boys is being implemented to promising effect.

There are a number of approaches that have emerged over the last ten years as particularly promising in their capacity to engage men and boys in prevention programming and the uptake of prevention messages. These include:

- Respectful relationships
- Bystander strategies
- Whole of organisation approaches
- Community development approaches
- Infant and parenting programs
- Social marketing

3.1.1 RESPECTFUL RELATIONSHIPS

The continued focus on 'what works' has been fuelled by the public health model and the emphasis on evidence-based practice in evaluations of program efficacy (McMahon, 2000; Pierce, 2005). This is a key aspect of accountability for government funding. Program developers face increasing accountability to ensure that program development and evaluation adhere to evidence based methods and utilise an appropriate theory of change (Carmody, 2009; Schewe, 2002; Wolfe & Jaffe, 2003). This has obvious consequences for program design and content. Most notable is the shift away from program content that focuses on 'risk'

toward the promotion of 'healthy' and 'respectful' and 'ethical' behaviours (Carmody, 2003; Carmody, 2009; Pease, 2008). For example, rather than position men and boys as potential perpetrators of sexual violence, prevention programs are likely to focus on problem solving tasks that encourage them to build respectful relationships with women.

This development has been pertinent in terms of engaging men and boys in prevention programs. International evidence has repeatedly demonstrated that school-based approaches that help young people identify inappropriate sexual or violent behaviour and shape their expectations and capacity to build and sustain respectful relationships are promising approaches to preventing VAW (Harvey, Garcia-Moreno, & Butchart, 2007).

This approach to prevention education is reflected in Outcome 2 (Relationships are successful) of the National Plan to Reduce Violence against Women and their Children (2011). This Outcome included three strategies, one of which was to build on young people's capacity to develop respectful relationships – as a result, funding has been made available for respectful relationships education projects throughout Australia. Despite this important funding commitment, federal government evaluations of these projects have yet to be made public.

A summative evaluation of the NRL Respectful Relationships program is provided in Section 5.

3.1.2 BYSTANDER STRATEGIES

Bystander approaches to prevention aim to increase participant willingness to act and speak out in the context of VAW. A large-scale survey of community attitudes undertaken by VicHealth found varying levels of capacity and confidence in the community to intervene in instances of VAW and sexual harassment, pointing to the potential contribution of bystander intervention programs in building community skills in this area (Powell, 2012). Drawing on social norms theory, this expanding area of men and boys' violence prevention looks at engaging men as social justice allies and encouraging bystander behaviours (Berkowitz, 2004; Banyard, 2004; VicHealth, 2012). Research in this area suggests that men who take action to stop incidences of violence not only help lessen negative outcomes, their behaviour also challenges misconceptions (such as 'pluralistic ignorance' and 'shared misconception') and fosters a sense of community responsibility for violence prevention.

The success of bystander intervention programs has been attributed to their ability to mobilise young men in situations where they would have otherwise remained silent. Banyard (2008) found that education is important here; men and boys who have greater knowledge about gender based violence (what it is, as well as the consequences associated with it) were more likely to take up a role as active bystanders. While positive outcomes are being reported in several studies using bystander approaches (Banyard et al 2008; Carmody 2009; 2013) several key masculinities theorists and activists have warned against the dangers of men occupying a non-violent ally position without challenging their own implication in perpetrating gender inequality (Pease 2008; Katz 2011).

Bystander programs have been developed for use in several settings including high schools, universities and workplaces. In high schools, evaluation data finds that the programs do not necessarily improve attitudes to gender and violence but do promote changes in bystander behaviour (Miller et al., 2012). Other bystander training programs also find positive impacts on attitudes and a reported willingness to intervene in risky behaviours. (Coker et al., 2011; Gidycz, Orchowski, & Berkowitz, 2011; Langhinrichsen-Rohling, Foubert, Hill, Brasfield, & Shelley-Tremblay, 2011).

Bringing In the Bystander - USA

One of the best known and most evaluated bystander interventions is the "Bringing in the Bystander" program developed by Victoria Banyard and her colleagues in the United States. (Banyard, Moynihan, & Plante, 2007; Moynihan & Banyard, 2008). The program can be delivered through either a single workshop or three 90-minute group sessions. The program evaluates well when delivered to specific populations such as athletes and students in fraternities and sororities. (Moynihan & Banyard, 2008; Moynihan, Banyard, Arnold, Eckstein, & Stapleton, 2010) (Moynihan, Banyard, Arnold, Eckstein, & Stapleton, 2011). Compared with a control group, program participants demonstrated improvements across measures of attitudes, knowledge and behaviour up to two months after participation (Banyard et al., 2007). Most program effects persisted at 4- and 12-month follow-up.

3.1.3 WHOLE OF ORGANISATION APPROACHES

Whole of organisation approaches utilise a range of strategies in order to enhance organisational/institutional determinants of VAW while also engaging individuals in educational and skills development programs. This approach aims to encourage sustained behavioural and attitudinal change through ensuring that the structures, policies and culture of an institution supports and reinforces VAW prevention programs and messages. This may include professional development and training on the subject of VAW for senior staff and managers, changes to training and curricula, and the engagement of staff (and, in schools, students) in direct participation programs. In Australia and overseas these whole of organisation approaches have been applied to schools (where they are also sometimes known as "whole of school" approaches), workplaces, sports clubs and other institutions. Examples in the Australian context include the 'respectful relationships' program in schools, youth services and football clubs (Carmody & Ovenden, 2013) and the CASA House Sexual Assault Prevention Program for Secondary Schools.

In Australia and overseas, these whole of organisation approaches have been applied to schools (where they are also sometimes known as "whole of school" approaches), workplaces, sports clubs and other institutions. Examples in the Australian context include the 'respectful relationships' program in schools and football clubs (Carmody & Ovenden, 2013) and the CASA House Sexual Assault Prevention Program for Secondary Schools.

Sexual Assault Prevention Program in Secondary Schools (SAPPSS) - Victoria

The CASA House Sexual Assault Prevention Program for Secondary Schools (SAPPSS) utilises a whole-of school approach to the prevention of SV. It is a principal-driven program strengthened by an ongoing partnership between the school and Centre for Sexual Assault (CASA) House since 1999 in Victoria. The whole-school approach was adopted by CASA House in 2004 in response to research demonstrating that prevention programs must address the social context in which VAW occurs. The overall objective of the program is for secondary schools to sustain positive changes and incorporate SV prevention into the curriculum in ways that suit their school community. Although the focus is prevention of SV, the program addresses a range of harmful behaviours and social norms that relate to other forms of VAW and aims to promote contextually specific cultural shifts towards respect and

equality. The program has also been successfully received in diverse school communities, including communities with a high concentration of Islamic or Christian students.

As the SAPPSS program evolved over several years (from 1999 to 2007), CASA House were able to evaluate several different styles of curriculum delivery (which evolved out of a Participant Action Research program development model). An evaluation report was published in 2008 which collated data on the impact of the program on students' knowledge, skills and attitudes in the short term (immediately after program delivery), medium term (six months after) and long term (12 to 24 months after). The medium term evaluation was also able to compare data with a control group of age-matched students who did not participate in the program).

As with other curriculum based violence prevention programmes, participants' knowledge and attitudes showed consistent improvement, though participants appear to experience difficulty in sustaining changes to attitude and skills over time without a continually supportive environment. This is particularly true for young men who participate in the program. The role of peers and creating supportive peer environments was also identified as an important component for the successful ongoing delivery of this type of approach. To this end, the SAPPSS program has incorporated a Peer Educator component for the 2007 program(Imbesi, 2008; 2011).

3.1.4 COMMUNITY DEVELOPMENT APPROACHES

Social disorganisation and isolation is a well-documented environmental factor which impacts on community rates of VAW (Boyle, Georgiades, Cullen, & Racine, 2009; DeKeseredy & Schwartz, 2013; Raghavan, Mennerich, Sexton, & James, 2006). Community development approaches assist in mobilising communities through creating environments and networks. This can include community fora and men's or women's groups that discuss VAW as a community issue and seek to identify community-based solutions to it (Flood, 2011). The CDC in the US has recently been arguing the need for more attention to be paid to community level interventions (DeGue et al 2012). In Australia, community mobilisation and development has proven to be an effective health promotion intervention. For example,

community mobilisation programs in Aboriginal communities have been effective in reducing petrol sniffing (MacLean & d'Abbs, 2002), increasing exercise (Parker et al., 2006) and reducing alcohol-related harm in the long term (Midford, Wayte, Catalano, Gupta, & Chikritzhs, 2005).

A summative evaluation of the community development program Strong Aboriginal Men is provided in Section 5.

3.1.5 INFANT AND PARENTING PROGRAMS

The World Health Organisation has documented the value of targeting parents and people who are responsible for the care of children (Butchart, et al., 2004). Rosewater (2003) reports some success in preventing IPV through programs that engage young fathers concerning their values, their influence in the lives of their children, and their sense of being role models for their children.

Epidemiological and other evidence supports the theory that the additional stresses of parenthood (financial and psychosocial) may create an environment where VAW is more likely to occur (Gartland, Hemphill et al., 2011). In addition, it is well documented that exposure to VAW as a child acts as a risk factor for both future IPV perpetration and victimisation (Whitfield, et al., 2003). Through supporting parents, infant and parenting programs can have a primary prevention impact across generations. The following Victorian program provides one example of working with first time parents to reduce the occurrence of VAW

Baby Makes 3 - Victoria

VicHealth's "Baby Makes 3" program is an example of a VAW prevention intervention designed to ameliorate the risk of IPV amongst first-time parents by providing them the skills to build and maintain an equal and respectful relationship (Bouma, 2012).

An evaluation of the program showed that it led to a significant shift in couples' attitudes characterised by greater understanding of their partner's role, and greater support for gender equality in new families. In addition, there was evidence that some couples had implemented changes to how they structured their parenting and relationship roles, and that this was in response to seeking a more equal relationship. Further to this, the author of the evaluation noted that a key achievement of the program has been engaging men, overcoming their resistance and gaining their support for gender equality (Flynn, 2011).

3.1.6 SOCIAL MARKETING

Another key strategy used in the prevention of VAW is the social norms or social marketing approach. Donovan and Vlais (2005) conducted one of the largest international reviews of social marketing in relation to the prevention of VAW. They argue there has been much confusion about the term 'social marketing' by health and social change organisations. Often it has been seen as merely a marketing tool to sell products and focused on getting consumers to part with money. However, they point to a shift in attitude where many organisations interested in cultural change are using variations of this approach to develop community messages to enact behavioural change. They argue that social marketing draws from multiple disciplines:

Social marketing, operates in far more complex fields, extends marketing's borrowings from psychology (e.g., mental health & happiness), sociology (e.g., war & conflict, social movements) and economics (e.g., globalisation effects), and further draws on disciplines and concepts that are related to community wellbeing, such as public health & health promotion, criminology, social policy & social welfare and environmental sustainability (Donovan & Vlais 2005 p. 4-5).

Despite the global use of campaign materials across a range of social issues, there appears to be little comprehensive formal evaluation of the impact of the strategies used including cost benefit analyses. Donovan and Vlais (2005) conducted a global search of social marketing campaigns targeting the reduction of VAW. In the process they spoke with social marketing campaign developers and gleaned a number of important considerations. These include:

- assessing local needs prior to developing a marketing message;
- being aware of possible unintended negative consequences;
- marketing needs to be one strategy of a wider multi-level approach to prevention;
- finding ways to extend the impact of the messages beyond single exposure during a campaign;

- developing approaches which will engage the general public to challenge VAW in their communities;
- basing interventions on a clear model of health promotion; and,
- the need to obtain political support for the prevention marketing initiative.

The most well- known use of social marketing campaigns in Australia that target men and boys are the annual campaigns developed by White Ribbon.

3.2 KEY SETTINGS

With the exception of broad-based social marketing campaigns, prevention programs directed at men and boys usually seek to engage them in specific contexts. Interventions have typically targeted high school and university aged boys and men. It is well understood that adolescence and early adulthood is a crucial intervention point for VAW primary prevention (Flood & Pease, 2009; Butchart, et al., 2004; Urbis Keys Young., 2004). However it is increasingly recognised that there is a need to expand the settings in which men and boys are being engaged in VAW primary prevention to other contexts in order to broaden the reach and influence of programs and messages. Key settings for engaging men and boys include:

- High schools and non- school youth settings
- Universities
- Sports and recreation
- Workplaces
- Faith communities

3.2.1 HIGH SCHOOLS AND NON- SCHOOL YOUTH SETTINGS

A range of prevention programs have been developed for high school settings targeting SV, IPV and related behaviours including bullying and sexual harassment (Mulroney 2003). These programs usually operate a mixed model which tries to affect students' knowledge, attitudes and skills through curriculums that include information and discussion on VAW prevalence, impacts and legal consequences as well as, more recently, a focus on ethical relationships and negotiating consent (Carmody, 2009).

School settings, particularly high schools, provide relatively easy settings for the delivery of VAW prevention programs that target young men and boys. Prevention stakeholders are readily able to access a population who are considered more receptive to challenging information (due to age) and can be mandated to attend programs. This has no doubt contributed to observations that while there are a number of well-developed prevention programs for use in Australian secondary schools, there are a limited number of programs being conducted with young men in non-school settings (Flood & Pease, 2009). This mirrors international findings, such as the meta-analysis conducted by Ricardo, Eads and Barker (2011) who found that of the 65 studies conducted in the USA, UK, Africa and Asia, 90% were conducted in classrooms. One Australian exception to this trend is the Sex & Ethics Program which purposefully targets young women and men outside of school settings, recruiting through sexual assault and generalist youth services and sporting codes (Carmody 2009).

A number of evaluations have documented at least a short-term positive change in knowledge and attitudes about VAW amongst teenagers (Clinton-Sherrod et al., 2009; Smothers & Smothers, 2011; Whitaker, Murphy, Eckhardt, Hodges, & Cowart, 2013). However evaluation methodologies have generally not been rigorous and rely on self-report measures of attitudes and behaviour (Cornelius & Resseguie, 2007; Whitaker et al., 2013). For an exception to these findings see Carmody & Ovenden (2013) for sustained impact of the Sex & Ethics Program six months after completion.

The following program from the US highlights one attempt to implement and evaluate a high school based initiative around VAW.

Shifting Boundaries - United States

The Shifting Boundaries program is one of the more rigorously evaluated and assessed high school based VAW prevention programs in the United States. This program included two tiers of activity – one of which was a six week curriculum for students which included a significant component of skills and relationship building as well as improving knowledge on the consequences of VAW. The second tier involved institution wide changes including the creation of safe spaces, social marketing campaigns and the implementation of school based restraining orders for victims of IPV (Taylor & Woods, 2011).

In a large multi-level study, Taylor et al. (2010) tested these two educational interventions against a control group. In this study over 2,500 sixth and seventh grade students (across 30 high schools) were randomly assigned to receive the "Shifting Boundaries" program, a two tiered program called "Shifting Boundaries".

As with similar Australian programs, the evaluation findings were mixed. A key finding was that the curriculum based primary prevention intervention was only effective in conjunction with the institution based secondary and tertiary prevention activities (Taylor, Stein, et al., 2010).

3.2.2 UNIVERSITIES

Similar to high schools, university campuses have been key targets for programs which target young men in order to prevent VAW (Davis and Liddell (2002). Unlike their younger counterparts, university students (primarily in the United States) are more likely to receive programs based on SV prevention and bystander interventions which attempt to encourage young people to intervene in, and interrupt, incidents of SV before they occur. SV prevention on campuses shows some positive effects, specifically in leveraging attitude change and promoting pro-bystander behaviour. Evaluations of two bystander intervention projects show sustained positive change at one year follow up (Banyard et al., 2007; Gidycz et al., 2011).

Prevention efforts at universities have focused specifically on SV prevention. This reflects an early 1990s US funding requirement that colleges and universities in receipt of federal funds must provide rape prevention education. There is a potential need for broader VAW prevention work with this population including IPV prevention. Relatively little prevention work has been undertaken on other aspects of VAW such as IPV or sexual IPV for university aged students (Casey & Lindhorst, 2009). It would also appear that the role of institutional and workplace cultures within universities is yet to be fully appreciated and programs which seek to act on these cultures are relatively few. Banyard (2013) expresses concern that with the proliferation of SV prevention programs for this population, there has been limited attention paid to the coordination of prevention programs to ensure that they build on one another over time.

3.2.3 SPORTS AND RECREATION

A number of successful prevention programs have been conducted with young men in sporting arenas. The most prominent of these have involved partnerships with the Australian Football League (AFL) and National Rugby League (NRL) in Australia. As mentioned, a detailed review of the NRL prevention program is provided in Section 5 of this document.

Sports based settings are a particularly relevant site for the delivery of programs which aim to prevent VAW. Male athletes who participate in more aggressive sports are more likely to hold more gender-inequitable attitudes than their non-athletic peers and report higher rates of abuse perpetration (Moynihan et al., 2010). In addition, athletic coaches are able to act as influential non-parental role models and are an effective ally for the delivery of VAW prevention program (Fraser-Thomas, Côté, & Deakin, 2005).

Coaching boys into men - United States

"Coaching Boys Into Men" (CBIM) is a program designed in the United States targeting middle and high school—age adolescent males and their coaches. This program trains coaches to be messengers to young athletes about standing up against gender based violence and promoting gender equity through a bystander intervention approach. An evaluation of the program found that participants reported increased intentions to intervene and more positive bystander behaviour. However, the program did not appear to have an effect on gender-equitable attitudes (Miller et al., 2012).

3.2.4 WORKPLACES

As noted earlier, most programs which work with men to prevent VAW occur in educational settings which means that little primary prevention work has been conducted in workplace settings (Flood, 2011). However, the workplace is a key site where gender inequity can lead to increased risk of SV and harassment. This gender inequity is reinforced through economic and social exclusion where it is more difficult for women to participate in the workforce due to the gendered divisions of labour in private and public life (True, 2012). A lack of affordable childcare combined with a lack of female-friendly workplace policies and the persistence of the 'double shift' at home and work (due to a lack of male engagement in household labour) compromises women's career advancement and economic stability.

Workplace policies that reduce the obstacles women have experienced to economic advancement and seek to address other common workplace gender inequities (such as a lack of female representation in managerial and board positions), are important VAW prevention interventions. These policies, alongside gender equality training, are key components of protecting women from SV and harassment at work and enhancing the protective effects of employment and income (Chung, Zufferey, & Powell, 2012).

VicHealth is a leading national and international agency in the development of workplace-based VAW primary prevention initiatives. The first example highlights how VAW prevention is being incorporated into the male dominated transport industry.

Take A Stand - Victoria

'Take a Stand Against Domestic Violence: It's Everyone's Business' (also known as 'Take a Stand') was a project carried out as part of a broader program called 'Working Together in Violence'. The Take a Stand project was led by Women's Health Victoria in partnership with Linfox Transport Company. The project was funded by VicHealth and ran from 2007 to 2012. It aimed to strengthen the organisational capacity of a male-dominated workplace to promote gender equality and non-violent norms. The project comprised three elements and utilised a "top-down" approach to instituting cultural change in the workplace. The first element (called "Lead") comprised of cultural change activities including executive-level commitment and the development of policy to prevent domestic violence. The second element, "Train", utilised a bystander intervention education program with employees to equip them to take a stand against sexist behaviour, gender norms and violence-supportive attitudes. The third element, "Promote", reinforced the other elements of Take a Stand through the communication of consistent messages in the workplace.(VicHealth, 2012) The project has won several awards and the key learnings from the project informed the development of Women's Health Victoria's 'Take A Stand' program.

The second example below demonstrates how the YMCA in Victoria is working at a whole of organisation level to reduce gender disparities across its female dominated workforce.

The YMCA Y Respect -Gender Project - Victoria

In 2013, YMCA was selected as the host of a pilot program for a violence prevention project, *Y Respect Gender*, funded by VicHealth. YMCA employs over 5000 staff plus hundreds of volunteers, and operates at over 150 sites across Victoria. 70% of the YMCA workforce is female with a preponderance of men in senior leadership positions. YMCA provides an example of the kinds of organisational gender disparities that are symptomatic of many businesses and not-for-profit organisations, which research suggests perpetuates gender stereotypes and attitudes associated with VAW while constraining women's economic opportunities and limiting their career development. This is turn contributes to the diminishment in women's financial wellbeing and social status which increases women's vulnerability to violence and abuse.

Y Respect Gender is driven by a VicHealth violence prevention worker based within the YMCA Human Resources Department, working with managers and senior staff to build the capacity of the organisation to prevent VAW. This includes a number of activities, including the incorporation of the theme of gender equality within conferences, seminars, communication and training, with a specific focus on shifting the masculine culture of senior leadership, identifying the representation of women in senior management positions, and reviewing existing marketing materials and internal communication for unintended gendered stereotypes and assumptions.

Y Respect Gender is an exemplar of an organisational and workforce development strategy that specifically seeks to engage a largely male senior management team in violence prevention via changes to the culture and policies of a large-scale organisation. In doing so, it aims to address both attitudinal and structural correlates of male violence however it does so not by targeting pro-violence attitudes but rather by engaging management to recognise and change contextual factors that diminish women's status at work.

3.2.5 FAITH COMMUNITIES

Faith communities such as churches have also been identified as key settings where projects to reduce VAW can occur. In 2006, leaders of faith communities in the United States published the "National Declaration by Religious and Spiritual Leaders to Address Violence Against Women" which unequivocally acknowledged that VAW exists in all communities

and articulated a commitment to work towards preventing VAW(Fortune, 2006). In Australia and the United Kingdom, there is burgeoning literature on the protection of vulnerable adults which includes a significant amount of progress in building capacity and policy development from key church leadership bodies. Importantly, much of this work doesn't explicitly acknowledge issues related to gender inequity nor does it specify VAW as a targeted problem to be addressed. Nonetheless work in this area is anticipated to assist faith communities as being safe places for all adults and can be expected to have a positive impact on reducing VAW. At this stage, no evaluation data exists on the efficacy of these programs.

Darebin Northern Interfaith Respectful Relationships Project - Victoria

This project was coordinated by Darebin City Council in Melbourne's northern suburbs. It engaged faith leaders and communities in Melbourne's north to raise awareness of the problem of VAW through the incorporation of a range of activities, including using scripture and teachings to promote respectful relationships, White Ribbon Day initiatives, and interfaith declarations as well as peer mentoring programs.

An evaluation for the project suggested that there continue to be both challenges and opportunities for capacity building for primary prevention within the faith setting. It identified challenges including those generated by the patriarchal paradigms of many faith traditions, the need to develop advocates and mechanisms for capacity building, and the complexity of addressing gender issues in an interfaith context. Opportunities identified include the value of peer based capacity building programs, the potential for faith specific programs, resources and policy development, and the growing commitment of the faith sector to preventing VAW (Holmes, 2012).

3.3 CONCLUSION

The effective engagement of men and boys in VAW primary prevention involves approaches that address their lived realities and contexts. The key approaches summarised in this section share a common focus on the roles that men and boys occupy in the community, such as boyfriends, husbands, peers, workers, community members and fathers. These approaches are then embedded in the everyday contexts and settings of education, work, recreation and

community and religious life. VAW and gender inequity are framed as obstacles to the individual and collective good that everyone, including men and boys, has a shared interest in removing. Whole of organisation and community development approaches stand out as larger frameworks that address the determinants of VAW in a multi-systemic way. These approaches can incorporate other strategies (such as respectful relationships and bystander approaches, parenting programs and social marketing) and are situated within a broader focus on ensuring that institutional and community contexts support long-term attitudinal and behavioural change.

SECTION 4. INSIGHTS FROM THE FIELD

This section describes the results of our surveys, interviews and focus groups with prevention stakeholders. Twenty six (26) on-line surveys were completed. This was complimented by thirty-seven (37) stakeholders who participated in either interviews or focus groups. There were twenty two interviews (22) and two (2) focus groups. Twenty five (25) participants were from Victoria, seven (7) were from NSW and one was from the Northern Territory. Five (5) stakeholders worked with Indigenous or CALD communities and eleven (11) stakeholders worked with programs designed for adolescents. Two (2) stakeholders worked for faith based organisations. The high numbers of interviews conducted in Victoria reflect the advanced state of the field of VAW prevention under the ten year leadership of the Victorian Health Promotion Foundation (VicHealth). Interviews were not conducted with any respondents from Queensland as they were all working at the tertiary end of prevention primarily with male perpetrators of IPV.

Interviews were conducted with program developers and implementers as well as experts in the field of men and boys VAW prevention. A number of these interviews resulted from survey participation but others were identified as key informants by the field or by other interview participants. There were a range of programs and activities discussed in interviews and focus groups. These included: programs targeting specific sub-population groups such as CALD or Indigenous populations, lesbian and gay communities, faith based communities or in specific settings such as school or football clubs, community organisations and through specific victim support agencies.

The section begins with a discussion of best practice in primary prevention, including the community development model that is emerging as an important primary prevention paradigm, and the opportunities and challenges that prevention stakeholders have identified in engaging men and boys. Although it has a growing evidence base, VAW remains a relatively new focus of primary prevention in comparison to other health and social problems. It is clear that documenting and sharing the 'practice wisdom' of service providers and other stakeholders is important in consolidating the field. Therefore the aim of this section is to provide an overview of the VAW primary prevention field focusing on men and boys in Australia and to disseminate more widely the insights of those at the 'coalface' of prevention.

4.1 BEST PRACTICE IN THE PRIMARY PREVENTION OF VAW

Our survey of prevention agencies and programs found a significant clustering of prevention efforts in Victoria and NSW with work also being undertaken in Queensland. Students at high school and university were the most common targets of primary prevention efforts, and it is known that adolescence and early adulthood are key periods for VAW perpetration and victimisation. Other programs identified in our study worked specifically with Indigenous communities, CALD communities, and sports organisations. Most stakeholders described their programs as underpinned by a gendered, ecological model of VAW that understands violence as a product of gender inequity and gender norms. They sought to leverage change at the individual and community level by addressing pro-violence or sexist attitudes and beliefs. A handful of programs assessed in this study were described as primary prevention but worked solely with perpetrators, and were therefore excluded from our analysis as they are better categorised as tertiary interventions.

The most promising programs identified in our study fell within whole of organisation and community development approaches. These two approaches share a common focus on effecting multi-systemic change within the contexts of gender inequity and VAW. These two approaches provide a useful overarching framework for the coordination of consultation, program and post-program activities incorporating other prevention approaches such as respectful relationships and bystander strategies and social marketing. This framework can be understood as a series of phases that are summarised below according to the following themes as they emerged from our interview data:

- Gauging readiness for prevention interventions
- Consultation and collaboration
- Engaging with key figures and leaders
- Engaging with other services and stakeholders
- Pedagogical strategies
- Maintaining commitments

4.1.2 GAUGING INCREASING READINESS FOR PREVENTION

A number of stakeholders discussed the readiness or otherwise of communities and institutions for prevention interventions, and the impact of readiness on the acceptability and

efficacy of programs. They signalled the importance of pre-intervention work in determining and building on community or institutional readiness. Being invited into an organisation or community was seen as an important signal of readiness that they were ready to begin addressing and discussing the issue of VAW. An Indigenous educator explained:

We don't just go into a community and say, "We've got this great product and we'd like to present it". We wait for an invitation. The invitation, once it's extended, we go in and we meet as many people as we possibly can, service providers, community members, Elders. We start the process of understanding who that community is, what makes that community tick, who's who in the community, what are some of the issues presenting for the community.

These invitations were sometimes triggered by a crisis moment that illustrated to community or organisational members that intervention, however difficult or challenging, could not be put off any longer. In the following quote, a prevention program facilitator described being contacted by an institution looking for a prevention program after multiple scandals around VAW:

...they had ticked every box on readiness for change, before we even got there. They were in such a bad place. They had to do something. They knew that they were screwed.

For some stakeholders, assessing and building on prevention readiness involved an almost ethnographic approach to assessing the culture and power structure of a setting or community, identifying the gatekeepers within the organisation and securing support from relevant groups, organisations and services. The end result of this process could be the determination that a community or organisation isn't ready yet for primary prevention. Reflecting on her current work with a small ethnic minority community, a prevention stakeholder expressed uncertainty that the program would proceed, noting that it may be might be 'a bit too early' in the settlement process to start the discussion about VAW:

They're not that interested really I don't think - some are, some aren't. Because they've only been here for really a short period of time I'm just starting to think it might be a bit early for this kind of thing.

This process of gauging readiness enables prevention workers to identify the unique culture, history and politics of a community or institution that directly impacts on the relevance and design of prevention programs. When a decision is made to proceed with the prevention program, the work of gauging readiness segues naturally into the process of collaboration and consultation.

4.1.3 COLLABORATION AND CONSULTATION

Most stakeholders interviewed for this project described a highly collaborative and consultative approach to prevention that involved the development of supportive networks and relationships within communities and organisations prior to the delivery of educational or training interventions. The willingness of prevention professionals to learn about the cultures and practices of the community or organisation fostered mutual respect and trust. A stakeholder working in refugee communities said:

You've got to be prepared to engage with a culture. That doesn't mean you have to agree with it but you've got to be prepared to say "teach me" and for there to be respect earned on that basis.

This process of consultation was important in institutional as well as community settings. A lack of consultation could lead to an intervention that was unresponsive to the prevailing culture and needs of the target population. One stakeholder described being employed at a university in order to engage boys and men in primary prevention and spending 'eight months asking people to come to groups they didn't come to'. He felt that the initial approach of the prevention project did not complement the 'independent' and 'self-directed' culture of universities. It was only when he began consulting with student clubs and organisations, 'rather than saying "this is where you need to be", that he was able to develop strategies that promoted student engagement.

It was more of a consultation. So what would happen is that I would meet with someone and we'd talk about what is it that you want for your club? ... [One of the university clubs] have a bar and they were going to lose their licence because bad things had been happening. Alcohol fuelled violence of a number of different sorts. So they were wanting to change what it is that was happening and [the president] - it wasn't just about the perception of what it is that was happening. He really was

committed to like changing what it is that's happening ... He had done things already... Then he said I want to work with you, for you to resource a process of change. That was a very successful process.

4.1.4 ENGAGING WITH KEY FIGURES AND LEADERS

The process of consultation frequently involved identifying and speaking to key figures and leaders in a given setting. Some programs formalised their engagement with leaders and managers with the establishment of advisory groups. Leaders and managers operated as both gatekeepers and vital allies in primary prevention work. In institutional and community settings, leaders could champion the project, motivate others to participate, share important 'insider' information, and disseminate information about the program to others.

Educators and facilitators working in institutional settings emphasised that prevention initiatives needed support from the highest echelons of the organisation if they were to be effective. A policy maker said, 'Without the buy-in from the CEO, if it's a tokenistic gesture of 'yeah, yeah, yeah' ... then it [prevention] hasn't been successful'. Speaking about his current prevention work in a workplace setting, a facilitator commented:

The CEO is very on board. ... There's been situations where I've heard of, or seen things, that have been particularly worrying, I actually have brought them to his attention, so he can actually go and talk to the people. Because it's more appropriate for him, or for other senior managers, to have those conversations, than me.

For stakeholders who worked with CALD and Indigenous communities, partnerships with community elders or leaders were integral to ethical and effective prevention work.

There's usually an Elder's group that we contact in the community ... the community Elders like to be informed and involved. If we can - by getting their support that puts a lot of weight on the program as well.

While a range of stakeholders reflected on the importance of male as well as female leadership in prevention, this could introduce a point of tension. Finding male champions of change involved at times a pragmatic engagement with hierarchies in which power and influence accrued disproportionately to men at the expense of women; the very situation that primary prevention research has identified as a driver of VAW. Assigning prominence to men

in public discussion of violence prevention could paradoxically affirm the very power imbalances that prevention seeks to address. A policy and research expert said:

But having spoken with a few individuals, there's that sense of caution because these men are already powerful in a situation, where the women community members are less so. So if they're already in positions of power, and then are given the opportunity to be an ambassador or a champion of preventing violence against women - but at the same time have a silencing capacity - there are some real problems there.

One prevention worker was in a unique position to comment on this issue, since he was based within a large organisation and tasked with changing policies, procedures and workplace cultures that inhibited women's workforce participation. In this role, he was often in dialogue with senior management within the organisation, who were overwhelmingly male. Engaging them in prevention was vital to the success of his program, but he noted that they could be both desensitised to male privilege and at the same time protective of the benefits that it provides.

I think the other big challenge is just getting the buy in from the senior men who, in a sense, have the most to lose. Now, I don't think they have got anything to lose because they've actually got more to gain from being less patriarchal men. But from their perspective, in terms of men who've enjoyed a lot of privilege, it's quite challenging when I come along and start to talk about the problem that privilege has in terms of gender equity.

Stakeholders felt that leaders and managers ideally needed to *model* the kinds of ethical relationships that primary prevention programs are seeking to disseminate. The creation of non-violent and equal relationships, the ultimate goal of primary prevention, therefore requires influential decision makers to examine gender, power and ethics in their own professional and personal lives.

4.1.5 ENGAGING WITH OTHER SERVICES AND STAKEHOLDERS

In addition to partnership with community members and leaders, stakeholders also underscored the importance of interagency and interdepartmental relationships. An Indigenous educator explained that, during his consultation process, 'We also contact any organisations and the police and the clinic and get their input as well; see where they're

coming from'. Another stakeholder described the success of her program as being a consequence of numerous partnerships between 'community members and professionals and other organisations as well' when running her prevention training workshops. She said:

So depending on the area we're with we have someone from the [local] council, we have police - because police are involved and run some of the training as well. We're also in partnership with the community legal centre, so they come to that as well.

During the delivery of programs, these collaborative relationships also assist prevention educators in managing the personal disclosures of victimisation or perpetration that are frequently triggered during workshops and training. For stakeholders such discussions and disclosures required careful management but they were nonetheless positive signs, particularly in communities that had not previously supported public dialogue on violence and gender. Through their partnerships with other services, prevention programs can link affected participants with relevant support services. One schools-based program coordinator saw this as an important benefit of primary prevention work, particularly since students met rape crisis workers during the prevention program. She said:

The secondary benefits [of our program] for some of those people are personally affected by it, they're left with support areas. They can follow up this link for support here, support from here. That's not the main aim [of prevention] but that is a sidebenefit. But now they've sort of have had the opportunity to see somebody to face who works at [the local sexual assault service] ... You know they've sort of met somebody, that's a real barrier for young people I think sometimes in contacting a faceless service to seek help. Whilst that's not our primary aim, it's a nice side benefit that they've eyeballed someone from [rape crisis] that looked like a human being.

4.1.6 PEDAGOGICAL STRATEGIES

Most programs reviewed in this study included an educational or training component that aimed to directly engage target audiences in sessions that raised awareness and skills in responding to VAW. Of the twenty six program providers surveyed, more than half delivered six or more sessions per program, the majority of which ran for two hours or more. This focus on a theoretically driven, 'dose' intensive and multi-method approach to primary prevention is in accordance with best practice as identified by international research (M. Carmody et al.,

2009; Nation et al., 2003). Stakeholders described a number of program components and strategies that enhanced the effectiveness of their program, including the role of facilitators; establishing safe places; issues of gender segregation; diverse activities and maintaining commitments.

4.1.6.1 THE KEY ROLE OF FACILITATORS

Many stakeholders discussed the key role played by facilitators in successful primary prevention programs, as well as the traits inherent to success in this role, including appropriate training not only in facilitation but also in the gendered nature of violence. This requires a high degree of self-reflexivity among male prevention facilitators whose own masculinity was often at stake in their work with men and boys. To be taken seriously by boys and men in a workshop setting there was pressure on male facilitators to perform a version of masculinity that the men or boys could relate to. There were tensions between this performed masculinity and the need to model ethical and gender sensitive behaviour, which in some settings and for some audiences can be seen as incongruous with authentic masculinity. One male facilitator commented on the specific challenges that he experienced in his work with men and boys:

I think a lot of us men who are doing this work are men who are not - who don't necessarily identify with hegemonic masculinity. So, there's a challenge for us, I think, to sort of actually hold our own ground and be taken seriously sometimes. Even if you are a male who sort of is more visibly, perhaps - toes the line [laughs], it's very easy, I think, to be seen as sort of somehow betraying the team by just starting to talk about, say, feminine or even just equal rights. So yeah, look, I think it's necessary but I think it's - yeah, there are challenges with it.

4.1.6.2 ESTABLISHING SAFE SPACES

Educators described engaging participants in discussions about the parameters and rules that would guide the conduct of the workshops. For example, an Indigenous educator begins his workshops with a 'cultural safety agreement':

We invite them to come up with the cultural safety agreements for the group, and we put them up and they stay up for the whole three days, and every time we go back and present the workshop, we put them up and we say, these are the group agreements,

when you come into this room, these are what you agree with. You can - they're organic, we can change them as we go along, but we also - for newcomers that come in, we visit the group agreements and we invite them to agree with that. If they have any issue around it, then we put it to the group so that the group has the power.

4.1.6.3 GENDER SEGREGATION

Research consistently finds that the efficacy of primary prevention is bolstered by gender segregation during educational components. This was evident in the experience of stakeholders. One school-based facilitator described the impact of mixed-gender groups on their program, which led to their decision to implement separate boys and girls groups:

We actually initially did them together [boys and girls] and the [facilitators] would come back and it was just like - this is 15, 16 years ago - and say "that was awful, it was so awful". Then we would discuss why and it became really apparent. The boys would get incredibly macho and the girls would get just really silly. There'd be a few who didn't but it was just quite destructive. You couldn't actually deal with the issues. So it was practice wisdom, it was not based in anything academic at all. It was just people saying "you can't run this session; it's a free for all". It was awful, just awful ... We thought fine, we'll just split them, so it was our own practical solution.

Stakeholders discussed the benefits of gender segregation, which allowed for the creation of safe spaces for males and females to discuss gender specific issues.

They need a space where they can explore it without the other gender being there. They need a space where they can dump all over it, and be like, I don't really know and then come together and discuss it.

Depending on the context, other programs integrated mixed sex and same sex groups to engage in cross gender discussion and understanding.

If you asked our best-practice model now, I would describe it as being co-ed group at various points we actually break into same sexed break out groups... (School based program stakeholder)

Stakeholders emphasised the importance of integrating multiple activities into workshops and training sessions, including interactive and skills development exercises that change attitudes and behaviours, and build relationships and capacity, through participation. Participants drew on a range of adult education and learning theories to teach critical thinking and provoke reflection on gendered assumptions and norms. These strategies were highly interactive and dialogue based, rather than didactic, which was important given the range of educational experience and literacy skills amongst different groups of boys and men. In particular educators and facilitators sought to engage men and boys in activities that, as one facilitator put it; simultaneously 'challenge assumptions that might be very strongly part of people's identity but in such a way that you respect their knowledge and their experience'.

4.1.6.5 MAINTAINING COMMITMENTS

The relationships formed during prevention interventions can be very meaningful to both prevention workers and community members and hence need to be respected and carefully managed. An Indigenous educator emphasised the high level of commitment shown by his host agencies to the communities they work with, to the point of continuing to deliver the program even where funding has run out.

When there are promises made about an opportunity for them to heal or an opportunity to get work or an opportunity to be part of the greater society or to be respected, appreciated, they don't care anymore. That's really, really powerful. When we go out into these communities and we're saying to them, we want to work with you, we're going to deliver three months' worth of programs and we want to build a relationship with you, there's a lot of apprehension about that. When - because you know what? They're going to reveal some of themselves to us and it's going to be painful for them to do that, because they might admit a truth about themselves that they never thought that they would have an opportunity to do. If they're going to do that with us and then we're going to be disappearing and not coming back there, then where does that leave that man?

All stakeholders expressed a high degree of commitment to primary prevention which they described as interesting and meaningful work. When asked, they typically nominated as the most rewarding aspect of their job the positive changes they see in the boys, men and

communities they work with. However, engaging men and boys was also consistently described as the most difficult area of their work.

4.2 ENGAGING BOYS AND MEN

Stakeholders discussed in detail the strategies they used in order to engage boys and men, who were generally seen as less engaged in the issue of violence prevention than girls and women. These themes are summarised below as:

- Negotiating masculinity
- Recognising disadvantage
- Framing prevention for boys and men
- Peer to peer approaches
- Ensuring accountability

4.2.1 NEGOTIATING MASCULINITY

Stakeholders generally agreed that engaging boys and men on the complex linkages between masculinity and violence was essential to any primary prevention program, thus it informed a considerable portion of program content. However stakeholders emphasised that this is a fraught area and prevention messaging can, at times, risk reinforcing the very stereotypes that it aims to challenge. For example, slogans such as "be the hero" and "real men don't hit women" were seen as problematic in their use of a discourse of hegemonic masculinity to counter VAW. One stakeholder comments 'My concern about it, is it reinforces some things that we're trying to modify about men' and another said 'I think the thing is that it sort of assumes that that sort of masculinity is not oppressive for other young men and for the participants'.

Stakeholders stressed the importance of moving beyond a one-dimensional or 'one-size-fits-all' account of masculinity. A prevention facilitator and researcher said, in the context of her program with sports clubs:

We had an understanding of gender that was not purely about hegemonic masculinity but was about the ways that masculinities might run in parallel within a particular person. So one of the guys, who runs the educational welfare area now, was a really tough player. Fearsome player in the day. I remember watching him. He was just hardcore. Extraordinarily gentle guy off the field, and really articulate about the way he played and why he played like he did. People aren't one aspect of their gender.

Recognising the multiplicity of masculinities between, but also within, men and boys requires an appreciation of the diversity of their experiences. Boys and men are impacted by violence in a range of ways and this has consequences for their gender relations, practices and identities. Violence is highly salient for boys and men due to its social associations with masculinity but also due to their own lived experience. A prevention researcher raised the ethics of education in engaging boys and men, emphasising that prevention interventions raise very sensitive issues for male participants about identity and experience. She said:

I think the ethics of education are really interesting, because you are - you're messing with people, especially around this stuff [violence]. It's very fundamental identity stuff. There were also victims and survivors of sexual assault in the groups too. People from families with lots of trauma. Lots of people disclosed to us and - or told us stories of friends and sisters and so on, who had experienced violence. What that was like for them, or their mothers or - and so it was - they - there was no sense in which it didn't resonate with them.

4.2.2 RECOGNISING DISADVANTAGE

Stakeholders spoke of particular challenges to engaging boys and men who live in disadvantaged communities. Prevention programs maintained a strong focus on challenging pro-violence and conservative gender norms, but there are other risk factors that increase rates of VAW including poverty, unemployment, substance abuse and other indicators of social disadvantage. A researcher and policy expert noted that a conversation about male privilege and power may have little resonance for boys and men in poor or marginalised communities:

And the challenge with that too, is that there are men and boys who are disenfranchised. Who - for whom power is not an experience they actually have,

unless it's maybe lauding it over somebody else. But in the grand scheme of things, are profoundly disenfranchised.

A stakeholder working in refugee communities recognised the fragility of masculine authority in the turmoil of migration and resettlement, which she described as prompting resistance to prevention messages that challenged male dominance in the community. He said:

The first thing they see is they've got to give up something and they've got to give up a lot. They're already unemployed, they already can't find work, their role in the family has been trashed in their way of thinking - and you want me to give up this?

Experts moreover emphasised that intersectional issues of race, class, and social status as well as gender must be negotiated by facilitators and program designers in their engagement with men and boys. A school-based program coordinator discussed her work in very disadvantaged schools and sought to avoid, in her program, adding to the shame that she felt the young people in her program were already experiencing:

That's constantly at the forefront of our minds that these young people walk around carrying a lot of shame already. So how do we correct this or support them to challenge that thinking without shaming them?

4.2.3 FRAMING PREVENTION FOR BOYS AND MEN

Many stakeholders observed that generalist prevention strategies were more likely to attract female participation, and that the way in which prevention is framed is crucial to promoting interest and engagement from boys and men. A university-based program coordinator found that prevention initiatives that attempt to leverage male interest via an insistence that VAW is 'something they should care about', or have a responsibility to intervene in, is not a 'good basis' for programs. He suggested that this sentiment reproduced a problematic form of authoritarian 'ultra-masculinity' that attempts to dragoon boys and men into participation, rather than appealing to them in a way that is relevant to their lives.

Rather than focusing on male "responsibility" to prevention VAW in an abstract sense, stakeholders recommended situating this responsibility within the social and family roles of boys and men as managers, leaders, fathers, husbands, boyfriends and so on. This approach

frames VAW as an obstacle to the kind of life that boys and men want to lead, the kind of community they want to live in or the kind of institution they want to be part of. Stakeholders found that this prompted a much more constructive and active engagement. A university-based prevention worker said:

I talked about it's not just about being a good person; it's about being a good leader. A lot of these people are in positions of leadership. I've said, ""Yeah, there's argument that sometimes we don't put our hands up for leadership, its thrust upon us. But if you have put your hands up for leadership, by being a leader it means that you've got actually be courageous and stand up and not stand by". It's very much putting that back on them, that's a big one.

A community-based educator began his workshops by asking:

"[W]hat kind of father do you want to be, what kind of father, what kind of husband, what kind of man do you want to be?" Now I've sat in on sessions where those questions have been asked in the introduction of the program - these are things that we're going to be exploring and instantly the men will hear that, it's recognisable. ... I've seen the hardest, hardest most brutal-looking men reduced to tears in that very moment because everybody, I think, wants to be good.

In this approach, responsibility remains a central theme but it is grounded in the experience and aspirations of male participants. The onus is then placed on male participants to adopt an active role in their institutions and communities in order to facilitate change and disseminate prevention messaging.

4.2.4 PEER-TO-PEER APPROACHES

This active reframing of prevention in terms of aspiration can reposition men and boys as partners in prevention rather than clients or participants. A number of stakeholders endorsed a peer-to-peer approach in which boys and men are enabled to lead and ultimately to drive prevention messaging and activities. A university-based educator emphasised that this broadened the reach of the program:

You can have these advocates and peer to peer sort of stuff because theoretically these male student leaders from student clubs are advocating to the male student members of

the student clubs. That's an effective communication. Much more effective than me speaking to them.

Stakeholders noted that peer led strategies had risks, since peers and male leaders could potentially promulgate misogynist or sexist views through or within the program. More than one stakeholder called this the "dickhead moment". However they found that resistance need not be negative and can be harnessed as a catalyst for a more open discussion. A school-based facilitator said:

When you have the peer led approach where they [male participants] say something which is not consistent with our program, usually their peers actually respond the right way, like "So what do you think about what Johnny said, like saying that so and so is a slut for doing that?" Usually their peers, they come up with alternative responses like "Yeah no that's not cool". So instead of being authoritative and telling them what's the right or wrong answer, the peer led approach is just engaging discussion, getting them to come up with the answers and drawing out responses from them. Which is - nine times out of 10 it works like that.

A program facilitator and researcher working in sports clubs noted that a peer-led model should not reproduce existing hierarchies of male authority, but rather it should aim to expose boys and men to the diversity of gender relations already evident in their peer group. In a peer-to-peer model, older men and leaders could learn from young men and boys, just as younger men and boys could learn from older men. She said:

In many cases, the young men might be much - might be engaging, for example, with their female partners in a much more egalitarian way, than the coaches or the CEOs are. Or [they] might have many more women friends than the older men have. The older men might be socialising in all-male groups, whereas the young guys have always had a mixed friendship group. They kind of - but the older men can't necessarily see that the younger men have, in fact, a kind of very different approach to gender than they do.

4.2.5 ENSURING ACCOUNTABILITY

An experienced service manager sounded a strong note of caution in relation to the role of men and boys in primary prevention. She described visiting communities in which men's groups and services were operating and being told by women in the community that 'the blokes who are actually running the programs are domestic violence and sexual assault offenders ... if behaviours [like] violence against women and kids comes up [in the men's programs], it's absolutely excused'. This foregrounds the important issue of the accountability of men in primary prevention work to women and to the communities and institutions in which they are working.

There were a number of such accountability mechanisms evident in the programs surveyed in this study. For example, some programs were hosted by IPV and SV services while other programs developed within non-government organisations with backgrounds in welfare and therapeutic services. This ensured that prevention program activities were informed by considerable institutional experience in the complex dynamics of VAW, and work with men and boys occurred alongside and in consultation with work with girls and women. A number of programs ensured that prevention activities and programs were consistently reporting back to community and institutional representatives through formal advisory committees or via community forums.

However some prevention efforts were disconnected from services with expertise in VAW and espoused unsound and idiosyncratic theories about engaging men and boys. For example, a male health promotion consultant claimed that it was difficult to engage men and boys because 'health, welfare, community, legal, education services' uniformly discriminate against men. He described services for victimised women as a 'domestic violence industry', suggested that the scale of male VAW was exaggerated, and claimed that male violence was primarily caused by violent television and video games. Such responses illustrate the importance of programs that draw upon established expertise in the field of IPV and SV and are accountable to communities and women.

4.2.6 EVALUATION AND FUNDING

Stakeholders identified that the primary prevention of VAW requires long-term commitment and investment if it is to achieve its goal of reducing rates of VAW. This raised two related challenges: the first in relation to funding, and the second in relation to evaluation. One policy

maker called the primary prevention of VAW 'a 20 year project', noting that Australian successes in preventative health (in diverse areas such as blood born viruses, drink driving and skin cancer) were achieved only after sustained and ongoing effort over many years. This was echoed by another service manager who stressed that "We're not going to have happy, smiling faces in six months' time."

Despite these insights, service providers noted that their program funding was typically shortterm, which inhibited long-term planning, staff retention and the maintenance of productive relationships with institutions and communities. A manager who drives whole-of-school prevention programs in high school settings noted the contradiction between her intensive model and the demands of the quick funding cycle:

Most projects are funded year to year and you're trying to achieve so much and you can see so much potential, but you have such a small window time to even build the relationships and get a conversation going within the school so you can try and consolidate with much more meaningful longer term change. I think that's the biggest frustration because you can see so much potential but you don't necessarily have the resources long term to make sure that happens.

Short-term funding typically included a limited budget for evaluation but funders had high expectations for evaluation data, sometimes expecting evidence of behaviour change or a reduction in violence in a short period of time. A program coordinator noted with irony that 'what funders expect from my evaluation is to show a challenge to thousands of years of tradition within one small project in a two to three year program'. Another commented:

I think also it's very hard when you're talking about - in gaining funding. Talking about the fact that you won't see cultural change immediately, it is not something we can test in 12 months' time. These are statistics that we are looking at changing in 10 years' time and they [funders] want that hard data, which is hard when we are looking at generational change and community change.

It seemed that the issues of short-term funding and evaluation represented something of a vicious circle and posed an obstacle to the expansion of primary prevention efforts. While all programs gathered feedback from program participants and relevant community representatives in order to inform program development, many stakeholders found that postprogram measures of changes in attitudes or beliefs were not considered reliable enough

indicators of success to attract public funding. In effect, a lack of long-term, longitudinal evaluation data was a barrier to obtaining substantive government support, but gathering such data required funding that was not forthcoming. This paradox led to multiple inefficiencies as prevention programs had to divert limited time and resources away from prevention work in order to secure funding.

Another possible danger of the short-term funding cycle is that it discourages comprehensive, sustainable, long-term prevention work in favour of 'single dose' (that is, one session) workshops and programs. Our research identified a number of programs that were promoted as primary prevention initiatives although they had very limited intensity, typically engaging school students in an afternoon or day of activities. Such approaches may be better conceptualised as awareness raising initiatives since their limited intensity calls into question their preventative effect. As short and inexpensive interventions they were often appealing to institutions and to funders, in comparison to more complex, holistic and expensive programs operating in accordance with best practice.

4.3 CONCLUSION

The majority of programs surveyed in this study employed a highly collaborative model that worked within institutions and communities in order to identify needs and risk factors related to VAW and to target the determinants of violence. These approaches fall broadly within a whole of organisation and community development or mobilisation models underpinned by a gendered ecological theory of violence. Stakeholders used a range of strategies in order to change attitudes and behaviour at the individual and collective level, generally with a strengths-based focus on promoting of the overall health and wellbeing of institutions and communities. There was an emphasis on engaging with multiple stakeholders, services and agencies in order to build collaborative links and relevant referrals between agencies, and to raise the profile of relevant services within communities. Stakeholders made a number of suggestions to improve the engagement of boys and men in primary prevention.

They emphasised in particular the complexity of masculinity in men and boys' lives, particularly its intersections with race, class and disadvantage, as well as the lived experience of violence. Effective engagement with boys and men required a tailored approach that aimed to establish the relevance of the program to the lives and aspirations of potential male participants. While the majority of the programs assessed in this study showed a high degree

of congruence with best practice principles identified by previous research, feedback from
stakeholders suggests that the lack of funding for longer-term evaluation poses a barrier to
more substantive investment in the field of primary prevention.

SECTION 5. EVALUATION OF BEST PRACTICE PROGRAMS

The data collected from surveys and interviews and our earlier review of best practice international research, indicates that a coherent and identifiable field of prevention practice focused specifically on men and boys has yet to emerge in Australia. While some leadership in this area is evident through organisations such as White Ribbon, their focus and reach is limited. Activities in the field are piecemeal, ad hoc and dispersed. There is no peak organisation that provides support to areas of emerging practice except in relation to men's behaviour change programs (i.e. perpetrator programs). Primary prevention activities are scarce as well as programs focused on boys or men specific activities. For example school based anti-violence education is most often provided in mixed gender contexts despite educator's experience that this is often quite problematic for both female and male students.

Despite these findings, there are areas of prevention activity focusing on men and boys that indicate promising practice. We have used the following criteria to assess programs and activities that seek to address the primary prevention of VAW by men and boys.

A detailed multi-stage process of analysis was employed using survey and interview data to determine what primary prevention activities and programs focusing on men and boys were identified by the sector.

- Stage 1 analysis From survey and interview data, 27 programs and activities were identified for further assessment on the basis that they identified the primary prevention of violence as a core aim.
- Stage 2 analysis All 27 programs and activities were reviewed. Their focus was diverse and included activities in high school settings, with Indigenous/CALD communities, university programs, sporting locations and general mentoring or attempts to engage men or boys in community activities or workshops. A number of programs and activities were excluded since they did not meet the brief of the research project. These included services with a focus on tertiary prevention that work with men or boys with a history of IPV or SV behaviours (8); agencies that were peak bodies rather than program/service providers (2); and organisations that nominated themselves for the study but did not identify a specific program (2).

Stage 3 analysis – Fifteen programs and activities were identified for further assessment. These were assessed using criteria drawn from international research evidence of best practice for the primary prevention of VAW as well as expert opinion and practitioner experience from across Australia on building effective men and boy's violence prevention activities.

In selecting best practice projects, we recognise that addressing structural inequalities and social norms simultaneously is crucial to preventing VAW. Therefore we were keen to find prevention activities that go beyond an educational intervention but aim to achieve behavioural change at individual, group, organisation and community levels. We identified two prevention programs that operate at a community or organisational level and use a range of mechanisms to change contextual and attitudinal determinants of VAW. These mechanisms included direct program delivery (such as workshops) but they typically also include changes to policies, practices and norms that enable or facilitate violence. In each program, there is an intended dynamic interaction across the social ecology between programmatic elements and other strategies that target contextual or environmental factors.

These programs are presented below as case studies of best practice. They illustrate emerging best practice in engaging men in two key areas of primary prevention: firstly, community strengthening; and secondly, organisational and workforce development. These two programs share the primary prevention goal of preventing violence before it occurs as well as other important similarities, in particular:

- They are underpinned by a gendered analysis of VAW,
- They involve working specifically or mainly with men,
- They emerge from and are supported by organisations with significant experience and expertise in VAW,
- They engage men in multi-systemic change including at the community or organisational level,
- The model is context-specific and sensitive to issues of culture and difference, but potentially adaptable and replicable in other settings.

The first program, Strong Aboriginal Men, is an example of a community development and mobilisation approach, and the second program, NRL Respectful Relationships Sex & Ethics Program, is an example of a whole of organisation approach. Evaluations were conducted according to the CIPP model described in the introduction to the report.

5.1 CASE STUDY 1 STRONG ABORIGINAL MEN PROGRAM (SAM)

Community development and mobilisation approaches are emerging as best practice in VAW primary prevention, particularly in vulnerable or isolated communities. Community development describes a process of consultation, dialogue and feedback with the aim of creating a supportive environment in which communities can develop their own understanding of the problems facing them, as well as identify and implement potential solutions. This approach typically includes a programmatic element in which community leaders or members engage in training, workshops or other direct participation approaches. This is crucial to building community capacity and focusing community discussion on shared issues. However community development integrates these programmatic activities into a larger framework of consultation and feedback that aims to generate interest, raise awareness and mobilise a community-wide response. Importantly, this model requires considerable skill and sensitivity by prevention educators who consult and work with community members to develop a set of prevention activities and strategies relevant to that context, rather than rolling out a standardised intervention.

In our survey of available programs, it was felt that these best practice principles were strongly evident in the community program Strong Aboriginal Men (SAM) - a primary prevention initiative of the Education Centre Against Violence (ECAV) within NSW Health. It is well recognised that effective strategies are needed to support Indigenous communities to respond to VAW and those factors that contribute to it. We were interested in evaluating SAM to understand how they were implementing the community development model in order to address the needs of Aboriginal communities in NSW, but we also felt that other community initiatives could benefit from the approach taken by SAM. This is a potentially replicable model that could be applied to other communities, including CALD communities or migrant and refugee populations.

The following section provides a summative evaluation of SAM based on in-depth interviews with SAM program educators and managers and an analysis of SAM outcome data. The evaluation concludes that SAM is an innovative, effective and sensitive intervention model in Aboriginal communities with high levels of complex needs relating to VAW, social disadvantage and the legacies of the colonisation, the Stolen Generation, and contemporary racism.

5.1.2 BACKGROUND AND CONTEXT TO THE PROGRAM: ECAV'S ABORIGINAL PORTFOLIO

SAM is based within the NSW Health centre ECAV, the state-wide unit responsible for training programs in VAW and child abuse and neglect. ECAV provides the mandated training for workers in the fields of child protection, sexual assault and Aboriginal family health, as well as specialist training in abuse and violence to mental health and drug and alcohol workers. In addition to its learning and development services, ECAV also provides clinical and policy consultation and resource development within NSW Health and for other government agencies and non-government organisations.

ECAV has been working with Aboriginal communities since 1985 and provides state-wide specialised training, consultancy, clinical supervision and resource development for NSW Aboriginal health workers and their Aboriginal colleagues, community members and non-Aboriginal frontline workers. ECAV's Aboriginal portfolio aims to build the capacity of communities to identify and prevent physical and sexual violence against children and women. This work is guided by the Aboriginal Communities Matter Advisory Group members (ACMAG). ACMAG was established in 2003 and members provide leadership and mentoring for new Aboriginal trainers and workers.

A Memorandum of Understanding is in place between ACMAG and ECAV to ensure an Aboriginal voice is present in decisions around workforce development, training, resource development and policy initiatives. The Aboriginal team at ECAV is currently made up of 4 permanent full time staff and 18 Aboriginal contract educators. ECAV Aboriginal staff and contractors are responsible for delivering a total of 17 separate courses, including three community development programs that aim to prevent violence against women and children. These programs are explained below:

• Weaving The Net (WTN): WTN was developed primarily as a child protection program that aims to connect Aboriginal community members with relevant child and family services and to increase community engagement in child protection. WTN is

delivered to communities or interested community groups that approach ECAV to request the program. ECAV then consults with Elders and key community members to ensure that the program is delivered in a sensitive and relevant fashion. WTN typically involves a series of workshops and fora in which local service providers and community members discuss child protection matters in their community. These discussions are facilitated by Aboriginal educators with experience in working with children, young people and families affected by abuse and violence.

- Strong Aboriginal Women (SAW): Given the high level of violence experienced by Aboriginal women, this suite of three educational workshops has been developed to improve women's access to services for assistance with domestic, family and sexual violence and to encourage women to engage with the legal process. The workshops provide women with information about physical and sexual violence and its intergenerational effects. In the workshops, women discuss how violence impacts on them and their children and formulate solutions and plans to address violence in their lives and communities.
- Strong Aboriginal Men (SAM): Feedback from consultation with Aboriginal communities, educators and ACMAG indicated a need to engage Aboriginal men to promote child protection, prevent family violence and engage community men in discussions about abuse and violence. This led to the development of SAM, which provides Aboriginal men with an opportunity to address the trauma and shame of their own histories of abuse, and time to reflect on how this has shaped their adult lives. In order to address the emerging issues for Aboriginal men in a culturally competent and respectful way, ECAV has established an Aboriginal men's educational team to deliver this program.

5.1.3 THE STRUCTURE OF THE SAM PROGRAM

Following a request or invitation from an Aboriginal community, SAM enters into an extensive consultation phase with community members about the problems of violence and abuse and contributing historical, cultural, social and economic factors. This consultation process may include discussions with local community leaders and Elders, meetings with

relevant local services, and the organisation of formal and informal consultation events such as forums and barbeques.

Once the consultation process has been finalised, SAM educators provide three two day workshops over three consecutive months. The SAM workshops target individual and community level attitudinal determinants of VAW, such as attitudes to violence and abuse, social norms and male peer cultures, but it also encourages dialogue on the links between current VAW and prior exposure to violence, as well substance abuse, unemployment and other historical, structural and material contributors. Men may attend one, two or all of the workshops as they see fit. Attendees may include Aboriginal men and boys over the age of 15, and Aboriginal male workers in relevant services. During the period of the workshops, the SAM educators maintain close links with community life in order to engender trust and support for the program.

The workshops follow a set curriculum that is explained to men during the consultation phase. The delivery of the workshops is relatively flexible and men may raise and discuss matters of concern to them but each workshop is organised around a set of core themes and activities. The three workshops are described below:

- Workshop 1 Building Strong Foundations: Being an Aboriginal Man. This workshop explores the context of Aboriginal men's experiences of abuse and violence. Participants discuss their own histories and those of their family and community. This assists in clarifying personal goals, values and aspirations that are supportive of a life and community free from violence. Participants are invited to make commitments to address the impact of abuse and violence in their lives in ways that support the wellbeing of their family and community as well as themselves.
- Workshop 2 Looking at Our Communities: Talking about the Tough Issues. The focus of this workshop is open dialogue about community experiences of child sexual assault and IPV in a safe space. Men are given the opportunity to discuss the impact of abuse and violence on themselves and their families. Workshop discussion is focused in particular on the intergenerational impacts of trauma. Participants identify strategies to identify and respond to child abuse and IPV in order to bring change for themselves and their community.

Workshop 3 - Safe Men, Safe Families & Strong Communities: Being Positive Role Models: Participants in this workshop discuss the anti-violent, protective and supportive dimensions of Aboriginal masculinities. The men identify strategies to support and assistant those experiencing and recovering from abuse. The aim of the final workshop is to build an understanding of the benefits of supporting one another in the community. The men also work on their skills at conflict resolution and communication.

At the conclusion of the SAM workshops, participating men brainstorm ideas about how they can continue to contribute to community-level efforts to prevent violence and abuse. This typically involves the formation of a new men's group or the revival and expansion of an existing group with the ongoing support of SAM educators. These groups may then take carriage of future violence prevention initiatives including educational programs in schools and White Ribbon marches. SAM educators remain in contact with the men's groups and communities they have worked with and may return if further training and support is necessary.

Community participants in ECAV's Aboriginal programs are eligible to pursue their interest in violence prevention via a number of educational pathways. This is a unique feature of ECAV's Aboriginal program and it has the potential to make a significant contribution to the expansion of a qualified Aboriginal health and prevention workforce. The three qualifications offered by ECAV to program participants are:

- o The Certificate IV in Aboriginal Family Health (Family Violence, Sexual Assault & Child Protection);
- o The Advanced Diploma in Aboriginal Specialist Trauma Counselling; and
- o The Graduate Certificate in Human and Community Services (Trauma Stream) co delivered with the University of Sydney and leading into the Masters of Social Work (Qualifier), a two year HECS funded program.

SAM is often delivered alongside or following Strong Aboriginal Women (SAW). Joint team meetings between SAM and SAW enables the confidential sharing of information about program participants and community needs. Following the workshop, SAM stays in contact with the communities it has worked with, and provides advice and support about future community activities including the maintenance and direction of men's groups. Ideally, the

roll-out of SAM and SAW in a community provides the context for ECAV to deliver WTN in order to strengthen Aboriginal families and bolster community child protection efforts.

5.1.4 CONTEXT EVALUATION: WERE IMPORTANT NEEDS ADDRESSED?

Context evaluation assesses the overall readiness of the project and examine whether its goals and priorities are attuned to the needs of the target population. Relevant questions to ask at this juncture include: What are the needs of the people and communities that SAM aims to work with? What opportunities are available to meet those needs? What has prevented those needs from being met in the past?

SAM seeks to identify and address the needs of men and boys in Aboriginal communities who are experiencing problems with VAW. Aboriginal women in Australia experience intimate partner violence at six times the rates of non-Aboriginal women (Bryant & Willis, 2008; Grech, Burgess, & Wales, 2011). Researchers have situated violence against Aboriginal women within a continuum of intergenerational trauma evident in Aboriginal communities, including histories of dispossession and forced child removal (Willis, 2011). The burden of VAW in Aboriginal communities is related to multiple factors indicative of social disorganisation or a lack of community cohesion; including residential instability (people frequently moving into and leaving the area), family disruption (high rates of relationship breakdown), low socioeconomic status, high rates of unemployment and poor educational attainment (Homel, Lincoln, & Herd, 1999; Jobes, Barclay, Weinand, & Donnermeyer, 2004). The legacies of colonisation, racism and discrimination have had a corrosive effect on interpersonal ties and networks that are known to exert a protective effect against VAW.

The methods through which government agencies have previously sought to address VAW in Aboriginal communities have focused on child protection and criminal justice interventions (Gordon, 2002; Human Rights and Equal Opportunity Commission, 1997; Tilbury, 2009). These interventions do not address the underlying determinants of VAW and indeed may exacerbate them by removing children and men from their communities and interrupting family and community relationships. Government interventions into Aboriginal communities which seek to address abuse and violence typically occur in the absence of community consultation or efforts to build community capacity to prevent and respond to violence (O'Mara, 2010). It has become apparent that a reliance on punitive nature of interventions

into VAW is a key factor that inhibits victimised women and other community members from reporting and addressing abuse and violence (Willis, 2011).

A key need in Aboriginal communities that is not addressed by child protection or criminal justice interventions is the need for self-determination, including individual and community empowerment. ECAV managers and SAM educators described working in communities with pockets of concentrated disadvantage 'where the violence is much greater, the drug use, alcohol abuse, probably sexual abuse, all the negatives'. One SAM educator said: 'Every Aboriginal community that I've ever been to has an issue around disempowerment, Aboriginal people that are disempowered, disenfranchised, disadvantaged; we can put all the disses in there'. A prevailing sense of disempowerment can inhibit the formation of protective community responses even amongst those highly motivated to stand up against violence and abuse. In their work with Aboriginal women, ECAV managers noted that some women were already taking a proactive stance in relation to abuse and violence in their community, albeit in the face of resistance and sometimes hostility.

ECAV and SAM educators have identified individual and community empowerment as an important but unmet need in relation to VAW. A prevailing sense of disempowerment can inhibit the formation of protective community responses even amongst those highly motivated to stand up against violence and abuse. In their work with Aboriginal women, ECAV managers noted that some women were already taking a proactive stance in relation to abuse and violence in their community, albeit in the face of resistance and sometimes hostility. ECAV's efforts to build a support network around these women received limited buy-in from community men:

[Our] vision was to build core groups of people, to be able to keep strengthening them, and there are lots of people in communities that are doing fantastic work, but keep empowering them to do that. What we found when we were doing that was that often and mostly women would attend, we'd had scatterings of men, but it was seen as a woman's program.

SAM was therefore designed in order to meet men's specific needs in relation to disempowerment and disadvantage as risk factors for VAW. It aims to address the complexity of issues evident in Aboriginal communities including the linkages between the intergenerational traumas of colonisation, racism and social disorganisation. Prevailing

criminal justice or child protection interventions into Aboriginal communities may respond to the characteristics of a particular incident of abuse and violence, but they do not address the multiple interlocking determinants of violence. In contrast, SAM facilitates Aboriginal men to identify the causes of violence in their own community.

5.1.5 INPUT EVALUATION: WAS A DEFENSIBLE DESIGN EMPLOYED?

Input evaluation critically analyses how a program seeks to address the identified needs. This can involve an assessment of the overall design of the program and the adequacy of resources available to it. It is important that this phase of the evaluation is framed by the recognition that ECAV has continued to support SAM out of its core operating budget after government funding for SAM finished in 2012. The lack of additional funding for SAM is unsustainable and it has necessarily limited the resources available to SAM and ECAV.

Like ECAV's other Aboriginal programs, SAM was designed as a culturally sensitive approach to the primary prevention of VAW known as 'community mobilisation' or 'community development' (see Mehta & Gopalakrishnan, 2007; Michau, 2007; van Mierlo, 2012). This approach is designed to support communities to identify and respond to risk factors for VAW. In their review of culturally sensitive protective factors for the prevention of violence in Aboriginal communities, Homel et al. (1999) emphasise the importance of interventions that build community and cultural networks, increase individual coping and communication skills, and strengthen Aboriginal families. These are all important components of the community mobilisation approach, which may account for its success in Aboriginal health promotion initiatives. Where implemented, community mobilisation programs in Aboriginal communities have been effective in reducing petrol sniffing (MacLean & d'Abbs, 2002), increasing exercise (Parker et al., 2006) and reducing alcohol-related harm in the long term (Midford et al., 2005).

The community development model emphasises the strengthening of communities through a number of key stages:

- (1) a mapping of conditions in communities;
- (2) building networks of support at different levels;
- (3) developing a community-based action plan;
- (4) investing in skilled workers and services; and,

(5) engaging in community activities and service delivery (Mehta & Gopalakrishnan, 2007; Michau, 2007; van Mierlo, 2012).

This can take the form of men's groups and women's groups that are organised to prevent VAW, and to respond to risk factors for violence such as substance abuse, unemployment and social isolation (Flood, 2011).

SAM carefully implements the community development approach with some unique and innovative features. In addition to building new networks of support and enabling men to create community-based action plans to prevent violence, SAM provides a gateway to further qualifications via the Certificate IV and thus aims to build professional skills and capacity to respond to violence in Aboriginal communities. SAM also provides the opportunity for other services to connect with regional Aboriginal communities. Over the last two years, ECAV has formed a productive partnerships with the incest offender program Cedar Cottage, as well as New Street Adolescent Service, which is a program for children and young people who sexually abuse. Aboriginal counsellors from New Street assist SAM educators in delivering their workshops. While SAM educators benefitted from the mentoring and training provided by New Street counsellors, the Sydney-based counsellors valued the opportunity to engage constructively with regional and rural Aboriginal communities.

The engagement of tertiary services with SAM is important in light of the relatively high levels of disclosure of violence perpetration in the workshops. Outcome data indicates that approximately 40% of men who participate in SAM programs disclose past or current family violence perpetration during the program. SAM educators emphasise that they do not exclude perpetrators from the program, since rates of VAW are so high in some Aboriginal communities that excluding men who have perpetrated VAW from the program would be counter-productive. As a SAM educator explained:

It's pointless working with the good men because the good men know what to do already or they have got some idea. So we want to say - not want to, we let them know, we don't care about what you're doing wrong or what you've done wrong, we want to invite you along because you will carry or you will bring with you something that you can share with another man. So that becomes really integral, that it's open to everyone.

It is explained to all SAM participants when the workshops begin that SAM educators are mandatory reporters and required to report information about at-risk children to child protection services. Meanwhile the engagement of counsellors with a background in perpetrator programs, and SAM's partnerships with New Street and other tertiary services for perpetrators and victims enable them to refer men who disclose during workshops appropriately.

In light of the complexities that underlie violence against Aboriginal women, SAM's application of the community development model is sensitive and appropriate. While SAM remains heavily resource constrained, it nonetheless promotes the development of community infrastructure and skills building in the prevention of violence. In a support letter sent to the evaluation team, Pauline Kelly, manager of the Language, Culture and Identity program at the NSW Office of Communities, Aboriginal Affairs, emphasised the integrity of SAM's program design, and noted specifically that it was empowering, participatory, holistic, intersectoral, multi-strategy and likely to bring about sustainable and ongoing change in individuals and communities.

5.1.6 PROCESS EVALUATION: WAS THE DESIGN WELL EXECUTED?

Process evaluation assesses the implementation of the project and asks whether the program design is being adequately applied. It provides feedback on the extent to which planned activities are being carried out and whether adjustments or revisions may be necessary. The following section will review the process of consultation, workshop implementation and postworkshop activity undertaken by SAM educators.

Consultation phase

Consultation is key to effective program design for prevention interventions at a community-level and this is particularly the case for interventions targeting disadvantaged or marginalised groups. In the absence of consultation strategies programs are unlikely to be responsive to community needs and will therefore have limited preventative potential. SAM educators described a thorough and careful approach to consultation which included identifying key figures within the community who can act as local coordinators and champions. The consultation period enables SAM educators to bring together groups of men to discuss the

issues in their lives and provide feedback on how they would like to improve their community. A SAM educator stated:

So when we go in for a community consultation, we're just basically meeting people, introducing ourselves and talking about the program. We do often - we'll try to gather a group of the men together and this is - I implemented this when we very first started doing the SAM program, is that we ask them, "What do you like about your community, what don't you like about your community, and if you could change one thing about your community, what would it be that you would change?"

The SAM consultation process is focused on identifying common goals within the community, and engaging community members in discussions on how the community might meet those goals and the potential contributions of SAM and ECAV. A SAM educator described their consultation process in terms of supporting men to identify the 'steps' they can take to build a platform for individual and community change:

We're going to actually talk to you about the things that you need to know about what it is to build a step and what has happened to you that is inhibiting you from building a first step or taking the first step. So that's what we did and the result was, we were well received. The men had found that what we did is, we didn't go in and say that we had the answers, we thoroughly worked with them to say that, "You guys have the answers because this is your community, this is your home, these are your families and this is your traditional land".

Fundamentally, SAM educators see their role as facilitating communities to build their own understanding of their strengths and problems and working towards shared violence prevention goals. This conversation is initiated from the outset of consultation and continues throughout the program. It reflects ECAV's strong commitment to consultation and to the self-determination of Aboriginal communities, which is in alignment with best practice in primary prevention.

The workshops

The workshops involve the SAM educators visiting the communities for three or four days at a time for three consecutive months. Each workshop lasts for two days and involves a

combination of educational information, group discussion and participatory activities in which men developed their confidence and communication skills as community members concerned about violence and abuse. Successful prevention programs identified in research involve varied teaching methods and incorporate a combination of strategies that aim to increase information and awareness and provoke skills development (Nation et al., 2003). Participants also need to be exposed to enough of the intervention for it to have an effect (Nation et al., 2003). SAM operates at a high level of program intensity and incorporates multiple approaches and methodologies, which are delivered over time to allow for individual and community reflection, which are all characteristics of strong program coherence and integrity.

Another key dimension of successful program delivery is the development of positive relationships between program delivery staff and participants, and between participants themselves (Nation et al., 2003). This is a core focus of SAM educators, who spend considerable time establishing and firming up their relationships with SAM participants and their communities. A SAM educator explained:

What we do is we go in and we present the workshops and we're there for three days, usually four, actually, it works out to be usually about four days that we're there for a workshop. What we do also, we attend - they might say, we're having a barbecue, or, football training is on tonight, we'll go down and kick a football around, we'll go to a barbecue or we might go and attend a - if there's a funeral, we'll go and pay our respects to the family. We will go and engage and interact with people in the community who we feel it's respectful to do so and supportive and understanding to do SO.

SAM educators described men's primary response to the workshops in terms of 'relief'. One educator stated: 'The majority of men want to talk about it, sometimes they just don't know how to get the conversation happening.' A key aim of the workshops is to promote dialogue between the men, and between the men and their communities, about abuse and violence. This serves as the basis on which the men can begin planning a collective response to community problems, and builds their confidence and skills to intervene in abuse and violence as they become aware of it. A SAM educator described the aims of the workshops in the following way:

So ultimately at the end of each day, and at the end of each workshop, we want them to be going away and talking. Talking to each other, and not about football, fighting,

fishing. We want them to go away and be talking about their families themselves, their children, their partner, their mum and dad, and start that conversation happening. "I think if we can do that, achieve that", then that gives us the - or them the capacity to expand it out.

The cultural appropriateness and relevance of prevention programs is one of the primary drivers of positive outcomes (Nation et al., 2003). The focus of the workshop phase of SAM on maintaining a strong sense of relevance to the lives of individual men and the experiences of their community builds on the insights gained during consultation. This makes it more likely to make a significant contribution to the overall impact of the intervention. The SAM workshops meet multiple criteria for best practice principles related to prevention program characteristics; specifically in terms of comprehensiveness, intensity, and the use of multiple methodologies and approaches.

Accountability mechanisms

The roll-out of SAM programs is a reflexive and ongoing process in which SAM educators adjust the program as it is delivered in response to community feedback and needs. A recent innovation has been the organisation of a 'graduation ceremony' for those men who complete all three SAM workshops. ECAV sees this ceremony as an important recognition of the achievements of the men but also an accountability and reporting mechanism back to the community, so that community women and Elders are apprised of what has been canvassed in the workshops. An ECAV manager said:

So it's really important that, when these fellas are in community, or when the women are in a community, they need to report back to Elders, not breaking confidentiality, but like - or other community members, letting them know the gist of what's going on in the groups, in the workshops. Some ways around that have been to bring the bubs the kids and the partners to, like, a graduation ceremony, so they get a sense of - so they're not on the outer, not saying, what are they doing? Then there's not this thing of, oh, they're just getting - making more excuses for their violence. Because that's also an issue for the women at - could be an issue for the women.

SAM educators indicated that they frequently hear community concerns about systemic issues such as the responsiveness or adequacy of police, schools and local child protection services to abuse and violence. An ECAV manager noted that, without improvement to systems and services in communities, social change can be inhibited and there is a need for local reporting

mechanisms. ECAV has sought to 'feedback' system issues to relevant departments and sectors and this has been successful in some regions and less successful in others. ECAV indicated an interest in pursuing interagency communication more broadly but currently lacks funding and government support to do so.

5.1.7 PRODUCT EVALUATION: DID THE EFFORT SUCCEED?

Outcome data for SAM is limited due to a lack of funding for evaluation. ECAV previously partnered with the University of Sydney in order to seek evaluation funding via a grant application but was unsuccessful. While ECAV is committed to a process of ongoing reflection about the development of their program, a lack of funding necessarily limits their capacities to document the process and outcomes of SAM. As an ECAV manager stated:

We know it's really important to be able to get a sense of the ongoing impact. Because we only hear - these fellas [SAM educators] come back with really amazing stories, so we know it works, they know it works, because of what they hear amongst communities. But to have an evaluation - we thought about it, we got as far as developing a methodology, which would be really still useful for SAM, but we're flat out getting money to actually deliver the program. But evaluation is so important.

There are a number of indicators of program success that are relevant to note here. In addition to interviews undertaken with ECAV managers and SAM educators, the evaluation team had access to the workshop notes taken by SAM educators for 125 men who participated in SAM in 11 communities between 2011-2014. This included information on rates of disclosure, forms of help-seeking, and the development of community-based responses to violence. It is clear that ECAV has a high profile in Aboriginal communities and their work is well respected by relevant agencies as well as communities. This was evident in the letters of support sent to the evaluation team from the Aboriginal Affairs portfolio of the NSW Office of Communities. SAM educators described a high level of demand for the program from Aboriginal communities where information about the program has spread primarily via word of mouth. An ECAV manager describes the process in this quote:

Last year, one fella attended a Strong Aboriginal Men program, then he's gone back to his community and said, I want this for my community. So it's spread like wildfire. It has not been - we haven't really even had to advertise it, because it's word of mouth.

Between 2010 and 2014 the Strong Aboriginal Men program was completed in 13 communities including Toomelah/Boggabilla, Wilcannia, Menindee, Walhallow, Tamworth, Redfern, Tweed Heads, Dubbo, Emerton, Moree, Taree, Inverell and Moree. These are some of the most disadvantaged areas of New South Wales. The SAM program is scheduled for completion in 2014 in Griffith, Bowraville and Yamba. The program was initiated in Wallaga Lake and La Perouse but did not continue due to competing community interests.

Increase in disclosure

SAM participants are invited to discuss their experiences of abuse and violence as either victims or perpetrators. In communities where violence and abuse are taboo topics attended by shame and silence, an increased willingness to discuss these issues generates a supportive environment for ongoing prevention work. Overall, approximately 50% of SAM participants disclosed experiencing family violence in childhood. 40% disclosed perpetrating family violence in adulthood, and 95% disclosed experiencing racism. In four of the eleven groups, a man also disclosed experiencing sexual abuse in childhood. A number of groups agreed collectively that child abuse and family violence was a problem in their community, with men sharing stories about the impact of abuse and violence on their partners, children as well as themselves. Men often commented that they had not had the chance to talk about abuse and violence in their lives before.

Increase in help and support seeking

SAM participants were asked about their current sources of support, and where they might seek support in the future to address the issues raised by SAM. With the exception of one community, where a high proportion of men were engaged in a mentor program and/or a substance abuse recovery group, most men in SAM groups indicated that they did not access formal or informal sources of support. The most common source of support prior to accessing the program was their partner, with a few men in contact with Aboriginal support services or other services.

Help and support seeking generally increased in all SAM groups. In the ten communities where data was available on this question, over 40% of men indicated that they were speaking, or would begin speaking, to their partner about the issues raised in the program. In the eight communities where data was available on this question, almost 40% of men indicated that they had or would access an Aboriginal support service to discuss the issues

raised in the SAM program. Educator notes record that some men began accessing their local GP, alcohol and drug service or counselling service in order to follow up on health and welfare issues.

Community based responses to violence

Following SAM, participants formulated and implemented community development and antiviolence activities. Data on these outcomes was available for ten of the eleven communities. In 70% of communities, the men's group was revived and expanded. This is frequently longterm work in which SAM educators maintain connections with communities over substantial periods of time. A SAM educator reflects on his long association with the men's group in one community:

Four years ago we initially went there, we continue to work with them and we stay in touch with them, we're keeping engaged with them as to what's going on in the community. We've had some issues around their men's group that's been - it got up and it was running and then it's petered out a little bit. They've come to us and asked for help as to how we - whether or not we can support them to rebuild their men's group.

In 20% of communities, new men's groups were formed. In 40% of communities, SAM participants organised and run anti-violence initiatives including anti-violence education programs in schools, community forums, training programs, and White Ribbon day events.

Positive personal outcomes

Educator notes document a number of other positive outcomes, including four instances where men initiated employment following SAM and attributed this to the gains they made in the program. The educators also documented an instance in which a man initiated legal action over childhood experiences of sexual assault. Men frequently contacted the SAM educator to follow up concerns about substance abuse, depression and problems with parenting and relationships. Men's feedback from the 2012 Toomelah-Boggabilla program points to the general benefit that many men felt that they had gained from the program in terms of confidence-building, communication and leadership skills:

I have gained confidence to express my opinion in the safety of the group, and this has encouraged me to speak up more confidently within the community and at various community forums that are held. I feel stronger to do this.

People have noticed a change in me and especially in my participation in my work place. They say I am more confident, that I speak up more.

I really liked learning about conflict resolution skills. I have been so interested to learn more that I have been doing some more training by myself.

Regional Director of Aboriginal Affairs North West Regional Office, Tad Kiemski, emphasised by letter the benefits of SAM in six Aboriginal communities in the area. He stated:

- Aboriginal men have gained more understanding about how trauma has affected their lives and their relationships with their partners and children.
- As a result of the SAM education, men have made personal decisions such as reaching out for support, changing the way they relate to their kids and partner, and communicating better with other people in the community.
- The program has strengthened the men's groups, given them more direction and encouraged men to support each other.
- Some men as a result of attending SAM have been more vocal in their community about child protection issues and are working closer with community, agencies and organisations in addressing these issues.

Educational pathways

SAM is a potential gateway to ECAV's qualification courses for Aboriginal positions specialising in response to family violence. An independent evaluation of the Certificate 1V in Aboriginal Family Health (Family Violence, Sexual Assault & Child Protection found that the course employs high-quality content and materials, uses rigorous, transparent assessment processes and is taught by trainers who are highly regarded by both students and their managers (Piggot & Milward, 2010). The evaluation found that the progressive educational offerings provides Aboriginal health workers with an optimal platform for secure employment, and further enhances the skill level of the workforce.

Seven participants in SAM have enrolled in the 2014 Certificate IV. Ongoing attendance requires a substantial financial commitment in relation to accommodation and meals, as well

as support from the workplace to allow men to attend during work time. This has prevented five of the seven men from completing the course.

5.1.8 CONCLUSION OF SAM EVALUATION

Addressing violence against Aboriginal women remains a major state and national policy priority, however tertiary responses have failed to reduce the prevalence and impacts of VAW in Aboriginal communities (O'Mara, 2010). SAM is an innovative and promising primary prevention intervention into VAW in Aboriginal communities. It employs a community development approach that is targeted appropriately and sensitively in order to address the multiple underlying determinants of VAW in Aboriginal communities. It has a high profile in the communities where it has worked, and partnering agencies speak very highly of the program. This indicates that SAM is addressing an important need in NSW Aboriginal communities and it does so in a manner that engenders considerable trust and community support.

The completion of SAM in thirteen communities in four years, with only two years of funding, indicates strong demand for the program and also the capacity of ECAV to deliver high-impact, lost-cost programs. Despite the lack of funding for the program or formal evaluation, ECAV and SAM educators employ a holistic and targeted program design that is continually being refined and developed through participant and community feedback. Their execution of the community development model is in accordance with principles of best practice identified by research (Carmody et al., 2009; Nation et al., 2003). SAM is unique in its focus on building and supporting community infrastructure such as men's groups to take a leadership role in violence prevention, and in the post-workshop educational opportunities which have the potential to increase the number of Aboriginal men qualified to address family violence. This potential is currently inhibited by a lack of financial resources to support men entering the course.

There is a strong case for providing financial support to Aboriginal men to complete the Certificate IV given the urgent need for more qualified Aboriginal health workers in this area. The available data indicates that SAM has been very successful in raising awareness and building community capacity in responding to IPV. Men's groups in each community were

Aboriginal team. Additionally, many of these groups have developed and implemented violence prevention initiatives. SAM has had positive impacts on individual workshop participants, including an increased willingness to discuss experiences of abuse and trauma and increased rates of help-seeking for social and health problems. SAM educators have documented promising examples in which men have pursued employment or substance abuse treatment following their participation in the program. However the current evaluation capability of ECAV is constrained by a lack of funding.

The cost effectiveness of the SAM program is a complex issue. Given that a clear funding line has not been received by the Program for some years, it is not possible to review past expenditure easily. ECAV have managed to survive by drawing from different short term funds. It is important to remember that this prevention activity involves multiple interventions beyond the young Aboriginal men and boys meeting in workshops. As described above, extensive consultation work is conducted over a number of weeks or may require multiple visits over time to ensure that the men and the wider community are ready to embark on the program. This means that a program budget requires flexibility as the need to allocate resources can vary between communities. In addition, consultation during and post workshops is needed with the Elders and the wider community to ensure accountability.

5.2 CASE STUDY 2 - EVALUATION OF THE NATIONAL RUGBY LEAGUE RESPECTFUL RELATIONSHIPS SEX & ETHICS PROGRAM

In many regards, whole of organisation approaches are the institutional equivalent to community development approaches. Just as community development seeks to affect change at the community level, whole of organisation approaches seek change at the organisational or institutional level. There are a number of exemplary whole of organisation VAW prevention projects being implemented in Australia, some of which were discussed in Section 3. These include the VicHealth funded *Y Respect Gender* program based in YMCA in Victoria, which is an organisational prevention initiative that aims to promote equal and respectful gender relations in the workforce. Educational prevention approaches are increasingly utilising the whole of organisation approach, such as the CASA House Sexual Assault Prevention Program for Secondary Schools (SAPPSS), which utilises a whole-of school approach to the

prevention of SV. *Y Respect Gender* is currently being evaluated and the CASA program has undertaken a number of evaluations and refined the program in response to these.

A high profile example of a whole of organisation approach to prevention has been the Respectful Relationships program initiated by the National Rugby League (NRL). This program has been selected for a summative evaluation in order to emphasise how the principles of whole of organisation prevention have been implemented by an institution such as the NRL which has considerable reach and influence in the Australian community. This approach integrated whole of organisation strategies with bystander and respectful relationships programs in a comprehensive response to an institutionalised problem of sexism and VAW. As such it represented an innovative response to the institutional challenge of preventing VAW. Moreover, the potential impact of this prevention arguably extends beyond the NRL to the Australian community due to the well-publicised nature of the intervention and the high status of the NRL in social life. The successful implementation of this program by the NRL is widely known and could enable similar approaches to be replicated in other sporting codes and clubs.

The following section provides a summative evaluation of the of the findings of the NRL Pilot Respectful Relationships *Sex & Ethics Program* conducted in Queensland with 37 young men across 4 groups in 2009/2010. This evaluation included a rigorous evaluation including data collected on: the documentation of program process and implementation; participant surveys gathered at one week, six weeks and six months after the delivery of the program; and, outcome data gathered one week pre-program and six weeks post-program. The findings of the evaluation were published in 2010 and are summarised below.

5.2.1 BACKGROUND AND CONTEXT TO THE PROGRAM

The NRL Respectful Relationships Sex & Ethics Program was delivered for the first time in 2009. This occurred as part of an ongoing commitment by the NRL to take an organisation-wide approach to preventing VAW. A suite of activities fall under the umbrella of Respectful Relationships, which began as part of a research project commissioned in 2004. The project brought expert educators together to identify and respond to problems in players' off-field behaviour.

The research was initiated after disturbing allegations that a group of players had sexually assaulted a woman. Research team members included Professor Catharine Lumby (Macquarie University), Dr Kath Albury (UNSW) and Wendy McCarthy (McCarthy Mentoring). The research was used to design a new education program that would support players to behave ethically and respectfully in everyday life and social situations. A recently released education manual on the suite of programs undertaken by the NRL indicates the ongoing commitment of the organisation to build respectful relationships across all parts of the league:

The Respectful Relationships education program began in 2005 and continues annually, with all NRL players taking part. The program is evaluated each year and refined. In 2010, further research was undertaken to test the effectiveness of the program. The results were extremely positive, indicating that the majority of players were making more ethical decisions in their lives off the field (NRL 2014 p.6).

The NRL's commitment also extends its work with Aboriginal men who make up 12% of players in the League. Sport provides a vital role in the lives of many Aboriginal boys and men. Successful Aboriginal NRL players act as role models in their communities, and NRL can provide a pathway to future education and a career in sport. This commitment to Aboriginal men is extended to include specific work on engaging men in conversation and activities around IPV. For example:

In 2013, the National Rugby League in partnership with the Mudgin-Gal Aboriginal Corporation produced 'Voice Against Violence' – an anti-violence program created to educate and create conversations with men in the Rugby League family on domestic violence and the impact it has on our society. Voice Against Violence is grounded in the NRL's belief that, in order to reduce violence against women, men need to be involved in the solutions – Voice Against Violence gives men in League an opportunity to do this (NRL 2014 p.6).

NRL are also active participants in White Ribbon campaigns and many players have become ambassadors speaking out against VAW.

The Respectful Relationship suite of activities sits within a broader Welfare and Education Program that supports players to make wise, healthy and ethical decisions on and off the field. Education programs cover the following areas:

Relationships

- Alcohol and illicit drugs
- Gambling
- Sexual assault and violence prevention
- Career transition
- Money management
- Social media
- Cultural awareness

5.2.2 STRUCTURE OF THE NRL RESPECTFUL RELATIONSHIPS SEX & ETHICS PROGRAM

This Program has been specifically adapted from the *Sex & Ethics Program* (Carmody 2009) developed for both women and men aged 16-25 years of age. Its focus is to enhance the skills of young people in negotiating casual and ongoing sexual relationships from an ethical stance that values mutuality, respect and negotiation. It also includes teaching young people skills in intervening safely as bystanders to challenge sexual and physical violence in dating contexts. The following evaluation is drawn from multiple sources: publications and records from the NRL, the formal outcome evaluation of the program produced for the former Australian Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) in 2010, written and verbal feedback from senior and junior players and an on location review of program sessions as they were rolled out by two independent educators (Dr Kath Albury and Dr Clif Evers from UNSW).

5.2.3 CONTEXT EVALUATION: WERE IMPORTANT NEEDS ADDRESSED?

At the request of the NRL, the Program was refined specifically and implemented for the first time with sportsmen as the target. The male only group of footballers and 17 current and former male footballers were trained to deliver the 6 week Program to male trainee footballers 16-18 years of age from two teams .The Titans on the Gold Coast (3 groups) and the Broncos from Brisbane (1 group). Men at this age are known to be at risk of performing hypermasculine practices and are likely to be forming their first intimate relationships. The development of a successful intervention for these men, which takes place before violence occurs and instils supportive attitudes and practices, would constitute good practice in primary prevention.

The program was funded in 2009 as part of the Federal Government's Respectful Relationship Program. The team was headed up by Professor Catharine Lumby, now at Macquarie University who was part of the initial team to work with the NRL on cultural change to address the prevention of VAW. Professor Carmody from the University of Western Sydney was subcontracted to run the training program and to evaluate the impact of the program.

5.2.4 INPUT EVALUATION: WAS A DEFENSIBLE DESIGN EMPLOYED?

The Program offers young men the opportunity to practice and develop or enhance knowledge and skills to realise their potential for ethical and respectful relationships. This is particularly important when sexuality programs provided by schools and parents are found to be lacking in addressing key interpersonal issues such as negotiating consent and how to engage in ethical intimacy (Carmody 2009). The 2- 3 hour per week Program runs for six sessions and locates the individual knowledge and skills young people learn within a broader socio-cultural context of gendered relations. It challenges them to reflect on the gendered expectations of sex in casual and ongoing relationships and ways to actively resist dominant beliefs that promote and condone sexual and other forms of IPV. It provides young men opportunities to engage with 'real life' scenarios and to explore alternative ways of negotiating sexual intimacy. The Program has been rolled out across several states in Australia and New Zealand and continues to be delivered to a wide range of young people in diverse settings outside of the traditional settings for prevention work with young men in schools.

The Program is skills based and involves interactive activities to maximise impact on attitudinal and behavioural change. The following topics are covered:

- Different cultural perspectives on sexual intimacy
- The sexual ethics framework and how to decide what is right for you and the impact on others
- How to handle pressures to be sexual
- Non-verbal communication skills
- Alcohol and drugs and the impact on sexual decision making
- Skills in ethical consent and the law, ethical use of social media
- Negotiating conflicting desires and needs in casual and ongoing relationships

- Recognising the signs of abusive relationships
- Breaking up
- Being an ethical bystander and standing up to sexual violence and other gender-based abuse in your community
 © Carmody, M (2009b)

Best practice research highlights the importance of meeting a number of criteria to enhance program effectiveness and increase attitudinal and behavioural change. The program design meets all of the criteria identified by Nation et al (2003). It is comprehensive, uses varied teaching methods, provides sufficient 'dosage' in a six week format of 2-3 hours per week, has a clearly articulated theoretical underpinning based on sexual ethics and diverse understandings of gender and sexuality. It also emphasises positive ways of being ethical and respectful, is targeted appropriately for the developmental age of the young men and the issues of primary concern to them, is sociocultural relevant, has clear outcome evaluation methods and provides four days of intensive training for senior footballers who will then deliver the program to younger players.

5.2.5 PROCESS EVALUATION: WAS THE DESIGN WELL EXECUTED?

Written and verbal feedback from both senior players and junior players aged 16-18 on the design and delivery of the program was extremely positive. As one young man indicated:

[It] opened my eyes to what can happen from making wrong decisions (Anglo-Australian Male, 17).

The independent reviewers of the sessions being delivered by senior players commented:

It was clear to us that the content learnt by the trainers in the 'Train the Trainers' course had stuck, and they were delivering the content accurately. The key component of the Ethical Framework was emphasised and re-emphasised and if there was any disagreement the trainers were willing to patiently work this through with the participants. It was a very democratic and comfortable atmosphere. The smaller group activities were particularly effective. The participants were forthcoming in their participation and responses to the activities, a lot more than I had expected. The atmosphere was easy going, due in no small part to the excellent trainers who made the young men feel at ease throughout the workshop with practical advice, jokes,

footy talk (as socialising lubricant) and a clear set of guidelines and rules to follow. There was also the productive nature of the respect the young players had for those taking the time to deliver the program and help them out (Evers correspondence to NRL 15 January 2010).

5.2.6 PRODUCT EVALUATION: DID THE EFFORT SUCCEED?

The NRL Respectful Relationship Sex & Ethics Program utilised multiple methods of evaluation to assess the impact of the program on the lives of the young men who took part. **Process evaluations** examine differentials in delivery, participant characteristics and program uptake. Process evaluations are built into the *Sex & Ethics* program, occurring in week 1 and 6 and in the 6 month follow up. **Customer (participant) satisfaction** studies provide an opportunity for participants to give feedback to program developers and presenters about what they did and did not like about the program. Customer satisfaction was included in the *program* at several intervals across the delivery of the program. In addition to this, reflection activities built into the program occurred at the end or beginning of the weekly sessions. These allowed educators to assess how satisfied participants were with the group as it was being developed.

One of the biggest questions that program developers and funders want to know is whether the program achieved it goals. The **Outcome (or impact) evaluation** used with this program involved a three stage evaluation design. For the NRL group, a short survey was administered in Week 1 (pre test), and repeated in Week 6 (post test). These were both administered in the group. An extended version of the survey was completed 6 months after the last group meeting.

This last step is rarely attempted in violence prevention education either in Australia or overseas. While pre and post test results can indicate any change over the life of the program they do not tell you anything about the lasting impact of the program. The six month follow up used in this program is therefore exemplary in trying to find out what the young men were doing six months later and whether any of the program ideas and skills were still being used by them.

A comprehensive research report on the outcome findings was produced in 2010 (Carmody et al 2010). The following section will provide a summary of the main findings.

Profile of participants

A total of 37 young men participated in the first week of the *Sex & Ethics* program across the four NRL sites. The following data is based on 29 young men (mean age 16.6 years) who completed all three parts of the outcome evaluation. All of the young men (100%) identified as heterosexual. The men were culturally diverse: the three largest cultural groups indicated were Anglo Australian (37.9%), Aboriginal (13.8%) and Samoan (6.9%). Similar percentages (3.4%) of participants identified as Fijian, Kiwi, New Zealander and South American. All the young men reporting having previous sexual experience.

Impact of the program

While the sample size was small, statistically significant improvements in understanding their own, and their partner's, needs were found between the pre-test and post test. The larger part of the follow-up survey included a number of open-ended qualitative questions, which asked participants to share what they leant from the program since it ended. Responses indicated that 100% of the participants reported using *skills* learnt in the program six months later. Forty eight per cent (48%) indicated this was "sometimes", 28% indicated "many times" and 24% "a few times". A similar positive response was found in terms of using *ideas* from the program six months later.

The 100% use of ideas and skills, six months post delivery, reported by the young men indicates the high relevance of the program to their needs. Their uptake is somewhat higher than groups of young people who have taken part in other versions of the program. Across all programs run in diverse settings the uptake of skills and ideas varies between 70-85% uptake. This may indicate the importance and impact of using current and former players to deliver the educational input and the single gender group composition.

The young men were asked to comment on what they had learnt about negotiating sex within relationships. For example, one young man suggested that the program had improved his ability to communicate with his partner:

Communication: making sure you talk through what about to happen and to get consent (Aboriginal male, 21).

Similarly, other participants indicated that the program had helped them with 'communicating honestly' and that they felt 'more comfortable' speaking to their partners:

(I learnt) how to talk about sex openly with my partner (Anglo-Australian Male, 17.)

A number of participants suggested that the *Sex & Ethics* Program had taught them about the importance of 'always asking questions' about sex and what their partners might want from the sexual relationship. Recognising the importance of paying attention to non-verbal communication was also seen as important: 'Reading the signs. Making sure the girls feel good about themselves'. Others spoke about using the skills he had learned to communicate with his partner about sex:

When my girlfriend didn't want to have sex, I respected that and talked to her about it. I felt like I was doing the right thing (Aboriginal Male, 17).

For a number of young men in this group, the examples raised in their follow-up underlined the issue of consent, and 'making sure' it was established before they engaged in casual sex or sex with their regular partners. For example, one participant indicated they he decided not to have sex because his partner 'was too drunk'. For other young men, the examples focused on the importance of 'negotiating sex' when their partners 'were ready' and 'making sure (they) both agreed'.

Participants were asked to comment on the three most important things they had learnt about SV. They underlined the importance of *consent* as a means of avoiding legal outcomes, as demonstrated in the following responses: 'As soon as either party says stop you must stop or it's rape'; 'Have to be awake'; 'Ask questions'; 'Don't assume'; 'Consent is crucial'; and 'Comes after one bad decision.'

The young men in this group also indicated that SV covered a range of aspects. This included an increased understanding of the law surrounding SV and *legal consequences*, as shown in the following responses from participants: 'What the law states'; 'It can wreck your life';

'Stop you from getting jobs'; 'Not accepted and is illegal'; 'Go to jail'; 'It's rape most times'; 'It's not right' and 'it's wrong'.

A number of participants suggested the program increased their understanding of the *impact* of SV and that responsibility for the crime did not rest with the victim. Not surprisingly, a number of responses focused on the importance of 'not being involved' in SV and the direct impact of legal proceedings on 'the club': 'Don't get involved with silly situations'; 'It's irresponsible'; 'Don't be involved in it'; '(It) can have a massive affect not just on you but others'; 'Think about how it will affect family, friends, and the club'; 'It can most definitely be avoided'; and 'Bad publicity'.

However, a smaller number of participants also reported on the complexity of sexual assault. As the following responses suggest: 'Not only women get sexually assaulted'; 'There are many forms of sexual assault'; and 'The effect it can have on women'; and 'Treat women with respect'. The young men also reported that they had learnt some skills about *how to help* a friend or someone else if they are in a risky situation or if they are assaulted. As one young man indicated: 'If you see something you think is wrong assess the situation and do something.'

In Section 3.1.2 of this report, the increasing efficacy of using bystander intervention approaches as a prevention strategy was discussed. In particular this approach has been found to be very useful in engaging men and boys as allies in challenging gender based and other forms of violence. The process of teaching participants to be an ethical bystander builds on the skills taught in the early weeks of the *Sex & Ethics* program, particularly concerning ethical reflection and decision-making in sexual relationships.

Throughout the program the gendered context in which these decisions are made provides a backdrop to group discussions and questions. This is achieved by presenting real-life scenarios to encourage participants to reflect on how gender may impact on how people think, feel and act. For example, participants are encouraged to extend their ethical concerns to others and to realise that they can contribute to challenging sexual violence in all its forms in their friendship and community networks. As the sexual ethics framework focuses on care of the self and care of the other, this is not a big leap for many of them to make. The final

session of the program teaches young people skills for safely intervening in a range of potentially risky situations.

Twenty one (66%) young men indicated in their follow-up survey that they had used ethical bystander skills that they had learned from the *Sex & Ethics* Program since the groups finished

The young men in this sample who indicated that they had engaged in ethical bystander skills often gave examples of where they intervened in risky situations, or in social contexts which involved alcohol. Many of the examples provided by participants focused on how they had used the skills to assist their friends who had been drinking to avoid potentially 'getting into a fight' or 'hooking up' with girls who were intoxicated.

A number of the young men also indicated that the skills they learnt in the program were helpful in situations where their friends were making bad decisions. For example, one young man indicated that he intervened when his friend was 'tak(ing) advantage' of a young woman who was intoxicated:

One of my mates was trying to take advantage of a drunk girl and my girlfriend and I put the drunk girl in a cab and sent her home (Male, 17).

And:

(My) mate trying to get with really drunk, barely standing up chick. I told him off and paid for her taxi home (New Zealand Male, 17).

The above responses indicate that the young men were willing to intervene in existing situations which could have very poor outcomes for the people involved. They also suggest that young men can and did develop a sense of community responsibility for preventing violence.

Ongoing impact within the NRL

Following the success of this small pilot of the 6 week program, the ethical framework which underpins all the program activities has been incorporated into framing the overall Respectful

Relationships strategy within the NRL. This is a reduced prevention activity compared to the full six week *Sex & Ethics Program*. However, it serves as an introduction to key principles of violence prevention and was used in their induction program for 240 newly-contracted players in late 2010 and will be retained as a core component of the future Induction Camps for new players.

5.3 CONCLUSION OF NRL EVALUATION

The statistical analysis of the quantitative and qualitative data demonstrates significant improvements in participants' knowledge and skills in negotiating ethical relationships following their completion of the program. The qualitative data, collected 6 months after the program ended, provided specific examples of the ways that participants were able to utilise the knowledge and skills gained from the program in their daily lives. Importantly, participant responses to open-ended questions illustrate how their 'thinking' about important decisions, and application of valuable skills gained from the program, were able to enhance their opportunities for ethical and respectful relationships. The qualitative data also offers explicit examples of how participant engagement with the program content, including skills in ethical decision making, influenced their personal safety and ability to negotiate with partners. The young people demonstrated an increased understanding of the complexity of sexual assault and how they can assist others. The young men's accounts of using their skills as ethical bystanders suggest that they were also able to use knowledge and skills gained from the program to challenge risky situations in their immediate environment. The development of the young men's sense of community responsibility is not only integral to changing social norms which maintain violence, it is also encourages and supports the movement toward long-term change through primary prevention.

The findings of this evaluation indicate that the program was effective in achieving its goals and that significant change in personal and group behaviour is achievable for younger players before their careers have fully taken off. As such this is an important contribution to early intervention and prevention and is one important strategy in the NRL's commitment to improving the cultures of respect towards women across the whole organisation. With enhanced investment to run the *Sex & Ethics Program*, the NRL would be able to extend the leadership skills of current and former players and increase prevention work with adult player and community clubs.

6. RESEARCH STUDY CONCLUSION

Violence against women is a costly personal and social issue that has far reaching and long term impacts across the whole Australian community. Men continue to be over-represented as perpetrators in all forms of intimate partner violence and sexual assault against women, their children and other men. Primary prevention takes these factors seriously and aims to intervene to prevent IPV and SV before they occur.

Our research found considerable interest at a state and national level in engaging men and boys in VAW primary prevention. The study findings indicate that VAW primary prevention is still in the early stages of development both in Australia and internationally. Effective intervention is acknowledged as more likely to occur if actions are taken at multiple levels within the community. This requires action at policy levels as well as within communities or organisations and at the local level of service provision. Victoria currently has the most developed framework of prevention activity from the leadership provided by the Victorian Health Promotion Foundation (VicHealth). It is hoped that the relatively recently formed National Research Organisation for Women's Safety (ANROWS) and the National Foundation for the Prevention of Violence against Women and their Children will provide national leadership on primary prevention.

Our survey of prevention agencies and programs found a significant clustering of prevention efforts in Victoria and NSW with work also being undertaken in Queensland. Students at high school and university were the most common targets of primary prevention efforts, with adolescence and early adulthood recognised as key periods for VAW perpetration and victimisation. Other programs identified in our study worked specifically with Indigenous communities, CALD communities and sports organisations. Most stakeholders described their programs as underpinned by a gendered, ecological model of VAW that understands violence as a product of gender inequality and gender norms.

The data collected from surveys and interviews and our earlier review of best practice international research, indicates that a coherent and identifiable field of prevention practice focused specifically on men and boys has yet to emerge in Australia. Activities in the field are piecemeal, ad hoc and dispersed. There is no peak organisation that provides support to areas

of emerging practice except in relation to men's behaviour change programs (i.e. perpetrator programs). Primary prevention activities are scarce as well as programs focused on boys or men specific activities. For example school based anti-violence education is most often provided in mixed gender contexts despite educators' experience that this is often quite problematic for both female and male students.

Despite these findings, there are areas of prevention activity focusing on men and boys that indicate promising practice. These include programs and activities such as: respectful relationships education, bystander strategies, community development approaches, whole of organisation approaches, infant and parenting programs and social marketing.

The strongest finding emerging from our research is that best practice in engaging men and boys occurs in two key areas of primary prevention:

- Community strengthening and development; and,
- Organisational and workforce development.

Section 5 of the report provides a detailed evaluation of 2 programs that demonstrate these approaches. They are the Strong Aboriginal Men Program (SAM) and the NRL Respectful Relationship Sex & Ethics Program. These two programs share the primary prevention goal of preventing violence before it occurs as well as other important similarities, in particular:

- They are underpinned by a gendered analysis of VAW;
- They involve working specifically or mainly with men;
- They emerge from and are supported by organisations with significant experience and expertise in VAW; and,
- They engage men in multi-systemic change including at the community or organisational level.

While both programs have been developed in response to men and boys in specific settings they are potentially adaptable and replicable in other settings. The knowledge gained from the design and implementation of the SAM program could be applied well to working with CALD communities and emerging refugee settings. The NRL program has many key features that can be used by diverse sporting codes and with other male workforce based programs. Both programs therefore demonstrate a potential for reach and influence beyond their immediate program base. This is important for enhancing further primary prevention activities

and in addressing issues related long-term cost-effectiveness. It highlights the potential for different funding models which could attract opportunities for investment. It is important to consider that primary prevention is both a short and long term investment in challenging deep seated practices. Without a clear commitment and investment in policies and programs focused on intervening before violence occurs, personal and financial costs will continue to impact alongside increased expenditure in tertiary prevention.

There are significant opportunities identified by this study to build on the good will of the many people in the sector committed to violence prevention. However, leadership is needed at national and state levels as well as within organisations and across our diverse communities to promote policies and practices that build on existing international evidence to actively engage men and boys in challenging VAW.

7. REFERENCES

Aaltonen, M., Kivivuori, J., Martikainen, P. and Salmi, V. (2012). Socio-economic status and criminality as predictors of male violence. Does victim's gender or place of occurrence matter? *British Journal of Criminology*, 52, 1192-1211.

Abbey, A., McAuslan, P., Zawacki, T., Clinton, A. M., & Buck, P. O. (2001). Attitudinal, experiential, and situational predictors of sexual assault perpetration. *Journal of Interpersonal Violence*, *16*, 784–807.

Abramsky, T., Watts, C., Garcia-Moreno, C., Devries, K., Kiss, L., Ellsberg, M., Jansen, H. and Heise, L. (2011). What factors are associated with recent intimate partner violence? findings from the WHO multi-country study on women's health and domestic violence. *BMC Public Health*, 11, 109.

ACCESS Economics. (2004). The cost of domestic violence to the Australian economy. Canberra:

Australian Government, Office of the Status of Women. Available from:

 $http://www.fahcsia.gov.au/sa/women/pubs/violence/cost_violence_economy_2004/Pages/default.aspx.\\$

Antai, D. (2011). Controlling behavior, power relations within intimate relationships and intimate partner physical and sexual violence against women in Nigeria. *BMC public health*, 11, 511.

Aosved, A. and Long, P. (2006). Co-occurrence of Rape Myth Acceptance, Sexism, Racism, Homophobia, Ageism, Classism, and Religious Intolerance. *Sex Roles* 55, 481-492.

Australian Bureau of Statistics (2012) Personal Safety Survey, ABS cat no. 4906.0, Canberra: ABS.

Anderson, V. N., Simpson-Taylor, D., & Herrmann, D. J. (2004). Gender, age, and rape-supportive rules. *Sex Roles*, 50(1-2), 77-90.

Atherton-Zeman, B. (2009). Minimizing the damage: Male accountability in stopping men's violence against women. *The Voice: The Journal of the Bettered Women's Movement*, spring 2009, 8-13.

Bailey WC and Peterson RD. (1995). Gender inequality and violence against women: The case of murder. In: Hagan, J. and Peterson, R.D. (eds.) *Crime and inequality*. Stanford: Stanford University Press, 174-205.

Babu, B. V. and Kar, S. K. (2010). Domestic violence in Eastern India: Factors associated with victimization and perpetration. *Public Health*, 124, 136-148.

Bahun- Radunovic, S. and Rajan, V.G.J. (Eds.). (2008). *Violence and gender in the globalized world: The intimate and the extimate*. Aldershot, England: Ashgate.

Banyard, V. L. (2013). Go big or go home: reaching for a more integrated view of violence prevention. *Psychology of violence*, *3*(2), 115.

Banyard, V. L. (2008). Measurement and correlates of prosocial bystander behavior: The case of interpersonal violence. *Violence and Victims*, 23(1), 83-97.

Banyard, V. L., Plante, E., & Moynihand, M. M. (2004). Bystander education: Bringing a broader community perspective to sexual violence prevention. *Journal of Community Psychology*, 32(1), 61-79.

Banyard, V. L., Moynihan, M. M., & Plante, E. G. (2007). Sexual violence prevention through bystander education: an experimental evaluation. *Journal of Community Psychology*, *35*(4), 463-481.

Bartels, L. (2010). *Emerging Issues in Domestic*. Family Violence Research. Criminology Research Council, No. 10, April.

Berkowitz, A. D. (2010). Fostering healthy norms to prevent violence and abuse: The social norms approach. *The prevention of sexual violence: A practitioner's sourcebook*, 147-171.

Berkowitz, A. D. (2004). The social norms approach: Theory, research and annotated bibliography. Higher Education Center for Alcohol and Other Drug Abuse and Violence Prevention. US Department of Education.

Berkowitz, A. D. (2002). Fostering men's responsibility for preventing sexual assault. In Schewe, Paul A. (Ed),. Preventing violence in relationships: Interventions across the life span., (pp. 163-196). Washington, DC: American Psychological Association.

Berkowitz, A.D. (2001). Critical elements of sexual assault prevention and risk reduction programs. In C. Kilmartin (Ed.), *Sexual assault in context: Teaching college men about gender*. Holmes Beach, FL: Learning Publications, 75-96.

Beyer, K., Wallis, A. B. and Hamberger, L. K. (2013). Neighborhood Environment and Intimate Partner Violence: A Systematic Review. *Trauma, Violence, & Abuse*.

Boeringer, S.B. (1996). Influences of Fraternity Membership, Athletics, and Male Living Arrangements on Sexual Aggression. *Violence Against Women*, 2, 134-147.

Bouma, M. (2012). Baby makes 3: Educating new parents about equal relationships. *DVRCV Quarterly*(1), 1.

Boyle, M. H., Georgiades, K., Cullen, J. and Racine, Y. (2009). Community influences on intimate partner violence in India: Women's education, attitudes towards mistreatment and standards of living. *Social Science & Medicine*, 69, 691-697.

Breckenridge, J., & Salter, M. (2012). Gender, use and abuse: Sexually abused women in alcohol and drug treatment. In J. Nakray (Ed.), *Gender-based violence and public health: International perspectives on budgets and policies*. London & New York: Routledge.

Brecklin, L. R., & Forde, D. R. (2001). A meta-analysis of rape education programs. *Violence and victims*, 16(3), 303-321.

Breitenbecher, K. H. (2001). Sexual assault on college campuses: Is an ounce of prevention enough?. *Applied and Preventive Psychology*, *9*(1), 23-52.

Bryant, C. & Willis, M. (2008). *Risk factors in Indigenous violent victimisation*, Australian Institute of Criminology.

Bryant S and Spencer G. (2003). University Students' Attitudes About Attributing Blame in Domestic Violence. *Journal of Family Violence* 18, 369-376.

Burgess, G. H. (2007). Assessment of rape-supportive attitudes and beliefs in college men: Development, reliability, and validity of the Rape Attitudes and Beliefs Scale. *Journal of Interpersonal Violence*, 22, 973-993.

Butchart, A., Phinney, A., Check, P., & Villaveces, A. (2004). *Preventing violence: A guide to implementing the recommendations of the world report on violence and health*. Geneva: Department of Injuries and Violence Prevention, World Health Organisation.

Carmody, M. (2009). Conceptualising the prevention of sexual assault and the role of education: Australian Centre for the Study of Sexual Assault, Australian Institute of Family Studies.

Carmody, M. (2009). Sex and ethics: Young people and ethical sex. Melbourne: Palgrave Macmillan.

Carmody, M. (2003). Sexual ethics and violence prevention. *Social & Legal Studies: An International Journal*, 12(2), 199-216.

Carmody, M., & Carrington, K. (2000). Preventing sexual violence? *Australian and New Zealand Journal of Criminology* 33(3), 341-361.

Carmody, M., Evans, S., Krogh, C., Flood, M., Heenan, M., & Ovenden, G. (2009). Framing best practice: National Standards for the primary prevention of sexual assault through education, National Sexual Assault Prevention Education Project for NASASV. University of Western Sydney, Australia.

Carmody, M., Krogh, C., Ovenden, G., & Hoffman, A. (2010). *Sex and Ethics: Violence Prevention Education Program: Final Report on the NSW Implementation 2009*. Centre for Educational Research, University of Western Sydney.

Carmody, M., & Ovenden, G. (2013). Putting ethical sex into practice: sexual negotiation, gender and citizenship in the lives of young women and men. *Journal of Youth Studies*, *16*(6), 792-807. doi: http://dx.doi.org/10.1080/13676261.2013.763916

Casey, E. A., Carlson, J., Fraguela-Rios, C., Kimball, E., Neugut, T. B., Tolman, R. M., & Edleson, J. L. (2013). Context, Challenges, and Tensions in Global Efforts to Engage Men in the Prevention of Violence against Women An Ecological Analysis. *Men and Masculinities*, *16*(2), 228-251.

Casey, E.A., & Lindhorst, T.P. (2009). Toward a multi-level, ecological approach to the primary prevention of sexual assault prevention in peer and community contexts. *Trauma, Violence, & Abuse,* 10(2), 91-114.

Casey, E., & Smith, T. (2010). "How Can I Not?": Men's Pathways to Involvement in Anti-Violence Against Women Work. *Violence against women*, 16(8), 953-973.

Centers for Disease Control and Prevention. (2004). *Sexual violence prevention: Beginning the dialogue*. Atlanta, G.A: Centres for Disease Control and Prevention.

Chung, D., Zufferey, C., & Powell, A. (2012). Preventing Violence Against Women in the Workplace. Melbourne: VicHealth.

Clinton-Sherrod, A. M., Morgan-Lopez, A. A., Gibbs, D., Hawkins, S. R., Hart, L., Ball, B., & Littler, N. (2009). Factors contributing to the effectiveness of four school-based sexual violence interventions. *Health Promotion Practice*, *10*(1 suppl), 19S-28S. doi: 10.1177/1524839908319593

Cockburn, C. (2010). "Militarism, masculinity and men". In J. d. Vries & I. Gueskens (Eds.), *Together for transformation: Men, masculinities and peacebuilding*). The Hague, Netherlands: Women Peacemakers Program, 24–30.

Coker, A. L., Cook-Craig, P. G., Williams, C. M., Fisher, B. S., Clear, E. R., Garcia, L. S., & Hegge, L. M. (2011). Evaluation of green dot: an active bystander intervention to reduce sexual violence on college campuses. *Violence Against Women*, 17(6), 777-796.

Commonwealth of Australia (2009) *Time for Action: The National Council's Plan for Australia to Reduce Violence against Women and their Children, 2009 – 2021*, Canberra.

Cornelius, T. L., & Resseguie, N. (2007). Primary and secondary prevention programs for dating violence: a review of the literature. *Aggression and Violent Behavior*, *12*(3), 364-375.

Davis, T. L., & Liddell, D. L. (2002). Getting inside the house: The effectiveness of a rape prevention program for college fraternity men. *Journal of College Student Development*, 43, 35-50.

DeGue, S., Holt, M. K., Massetti, G. M., Matjasko, J. L., Tharp, A. T. and Valle, L. A. (2012). Looking ahead toward community-level strategies to prevent sexual violence. *Journal of Women's Health*, 21, 1-3.

DeKeseredy, W. S. and Schwartz, M. D. (2013). *Male peer support and violence against women: The history and verification of a theory*, Northeastern University Press.

Donovan, R. J, Vlais, R. (2005) VicHealth Review of Communication Components of Social Marketing/Public Education Campaigns focusing on Violence against women. Victorian Health Promotion Foundation, Melbourne.

Edwards, K., Mattingly, M., Dixon, K. and Banyard, V. (2014). Community Matters: Intimate Partner Violence Among Rural Young Adults. *American Journal of Community Psychology*, 53, 198-207.

Edwards, R.W., Jumper-Thurman, P., Plested, B.A., Oetting, E.R., & Swanson, L. (2000). Community readiness: Research to practice. *Journal of Community Psychology*, 28(3), 291-307.

Fabiano, P. M., Perkins, H. W., Berkowitz, A., Linkenbach, J., & Stark, C. (2003). Engaging men as social justice allies in ending violence against women: Evidence for a social norms approach. *Journal of American College Health*, *52*, 105-112.

Fergus, L. (2006). An Evaluation of the *Respect, Protect, Connect* program, South Eastern Centre Against Sexual Assault, Melbourne.

Flood, M. (2013). Engaging Men from Diverse Backgrounds in Preventing Men's Violence Against Women. Stand Up! National Conference on Eliminating All Forms of Violence Against CALD Women, April 29-30, Canberra.

Flood, M. (2011a). Involving men in efforts to end violence against women. *Men and Masculinities*, 14,358-377.

Flood, M. (2011b). Building men's commitment to ending sexual violence against women. *Feminism & Psychology*, 21, 1-6.

Flood, M. (2005/2006). Changing men: Best practice in sexual violence education. *Women Against Violence*, 18, 26-36.

Flood, M., & Pease, B. (2009). Factors influencing attitudes to violence against women. *Trauma, violence, & abuse, 10*(2), 125-142.

Flood M and Pease B. (2009). Factors Influencing Attitudes to Violence Against Women. *Trauma, Violence, & Abuse* 10, 125-142.

Flores, S. A., & Hartlaub, M. G. (1998). Reducing Rape-Myth Acceptance in Male College Students: A Meta-Analysis of Intervention Studies. *Journal of College Student Development*, *39*(5), 438-448.

Flory, R. (2012). *Whittlesea CALD communities family violence project: Scoping exercise report.* Melbourne: Whittlesea Community Futures & Whittlesea Community Connections.

Flynn, D. (2011). Baby Makes 3: Project Report. Box Hill, Australia: Whitehorse Community Health Service.

Fortune, M. M. (2006). National Declaration of Religious and Spiritual Leaders Addressing Violence Against Women. *Journal of Religion & Abuse*, 8(2), 71-77.

Fraser-Thomas, J. L., Côté, J., & Deakin, J. (2005). Youth sport programs: an avenue to foster positive youth development. *Physical Education and Sport Pedagogy*, 10(1), 19-40.

García-Moreno, C., Jansen, H. A. F. M., Ellsberg, M., Heise, L., & Watts, C. (2005). WHO multi-country study on women's health and domestic violence against women. Initial results on prevalence, health outcomes and women's responses. Geneva: World Health Organisation.

Gartland D., Hemphill S.A., Hegarty K. & Brown S.J. (2011). Intimate partner violence during pregnancy and the first year postpartum in an Australian pregnancy cohort study. *Maternal & Child Health Journal* 15(5), 570-8.

Gidycz, C. A., Orchowski, L. M., & Berkowitz, A. D. (2011). Preventing sexual aggression among college men: an evaluation of a social norms and bystander intervention program. *Violence Against Women*, 17(6), 720-742.

Gidycz, C. A., Warkentin, J. B., & Orchowski, L. M. (2007). Predictors of perpetration of verbal, physical, and sexual violence: A prospective analysis of college men. *Psychology of Men & Masculinity*, 8(2), 79.

Glanz, K. Rimer, B.K. and Viswanath, K. (eds.) (2008). *Health Behavior and Health Education: Theory, Research, and Practice* (4th ed.). New York: John Wiley & Sons.

Gondolf, E. W. (2007). Culturally-focused batterer counseling for African-American men. *Criminology & Public Policy*, 6(2), 341-366.

Gordon, S (2002). Putting the picture together-Inquiry into response by government agencies to complaints of family violence and child abuse in Aboriginal communities. *Australian Indigenous Law Report*, 7, 49.

Grech, K., Burgess, M. & Wales, N. S. (2011). *Trends and patterns in domestic violence assaults:* 2001 to 2010, NSW Bureau of Crime Statistics and Research.

Grossman, S. F., & Lundy, M. (2007). Domestic violence across race and ethnicity. *Violence Against Women*, *13*(10), 1029-1052.

Gullvag Holter, O. (2013). Masculinities, Gender Equality and Violence. *Masculinities and Social Change*, 2(1), 51-81.

Harvey, A., Garcia-Moreno, C., & Butchart, A. (2007). *Primary prevention of intimate-partner violence and sexual violence: Background paper for WHO expert meeting may 2–3, 2007*: World Health Organization.

Holmes, S. (2012). Northern Interfaith Respectful Relationships : Project Report. Melbourne, Victoria: City of Darebin.

Homel, R., Lincoln, R. & Herd, B. (1999). Risk and Resilience: Crime and Violence Prevention in Aboriginal Communities. *Australian & New Zealand Journal of Criminology*, 32, 182-196.

Human Rights And Equal Opportunity Commission (1997). *Bringing them home: Report of the national inquiry into the separation of Aboriginal and Torres Strait Islander children from their families*. Commonwealth of Australia.

Imbesi, R. (2008). CASA House: Sexual Assault Prevention Program for Secondary Schools (SAPPS) Report, *Centre Against Sexual Assault: The Royal Women's Hospital*, Melbourne.

Imbesi, R., and Lees, N. (2011). Boundaries, better friends and bystanders: Peer Education and the prevention of sexual assault; A Report on the CASA House Peer Educator Pilot Project, *Centre Against Sexual Assault, Royal Women's Hospital*, Melbourne.

It Stops Here: Standing together to end domestic and family violence in NSW. (2014). New South Wales, Australia: NSW Government.

Jobes, P. C., Barclay, E., Weinand, H. & Donnermayer, J. F. (2004). A Structural Analysis of Social Disorganisation and Crime in Rural Communities in Australia. *Australian & New Zealand Journal of Criminology*, 37, 114-140.

Katz, J., Heisterkamp, H. A., & Fleming, W. M. (2011). The social justice roots of the Mentors in Violence Prevention model and its application in a high school setting. *Violence Against Women*, *17*, 684–702.

Krug, E. G., Mercy, J. A., Dahlberg, L. L., & Zwi, A. B. (2002). The world report on violence and health. *The Lancet*, 360(9339), 1083-1088.

Landvogt, K., & Ramanathan, R. (2011). Long-term security prevents family violence. *Parity*, 24(8), 16.

Langhinrichsen-Rohling, J., Foubert, J. D., Hill, B., Brasfield, H., & Shelley-Tremblay, S. (2011). The Men's Program: does it impact college men's bystander efficacy and willingness to intervene? *Violence Against Women*, 17(6), 743-759.

Lonsway, K. (2009). *Rape prevention and risk reduction: Review of the research for practitioners*. Harrisburg, PA: VAWnet, a project of the National Resource Center on Domestic Violence/Pennsylvania Coalition Against Domestic Violence. Retrieved from http://www.vawnet.org

Maclean, S. J. & D'abbs, P. H. (2002). Petrol sniffing in Aboriginal communities: a review of interventions. *Drug and Alcohol Review*, 21, 65-72.

Mankowski, E.S. and Maton, K.I. (2010). A community psychology of men and masculinity: Historical and Conceptual Review. *American Journal of Community Psychology* 45 (2010), 73-86.

Mehta, M. and Gopalakrishnan, C. (2007). 'We Can': transforming power in relationships in South Asia. *Gender & Development*, 15, 41-49.

Memmott, P., Stacy, R., Chambers, C., & Keys, C. (2001). *Violence in Indigenous communities*. Crime Prevention Branch, Commonwealth Attorney-General's Department.

McMahon, P. M. (2000). The public health approach to the prevention of sexual violence. *Sexual Abuse: A Journal of Research and Treatment, 12*(1), 27.

Michau, L. (2007). Approaching old problems in new ways: community mobilisation as a primary prevention strategy to combat violence against women. *Gender & Development*, 15, 95-109.

Midford, R., Wayte, K., Catalano, P., Gupta, R. & Chikritzhs, T. (2005). The legacy of a community mobilisation project to reduce alcohol related harm. *Drug and Alcohol Review*, 24, 3-11.

Miller, E., Tancredi, D. J., McCauley, H. L., Decker, M. R., Virata, M. C. D., Anderson, H. A., . . . Silverman, J. G. (2012). "Coaching Boys into Men": a cluster-randomized controlled trial of a dating violence prevention program. *Journal of Adolescent Health*, *51*(5), 431-438.

Minerson, T., Carolo, H., Dinner, T., & Jones, C. (2011). Issue brief: Engaging men and boys to reduce and prevent gender-based violence: Status of Women Canada.

Mouzos, J., & Makkai, T. (2004). Women's experiences of male violence: findings from the Australian component of the International Violence Against Women Survey (IVAWS) (Vol. 56). Canberra: Australian Institute of Criminology.

Morgan, A., & Chadwick, H. (2009) Key issues in domestic violence. Research in Practice no. 7.

Moynihan, M. M., & Banyard, V. L. (2008). Community responsibility for preventing sexual violence: a pilot study with campus greeks and intercollegiate athletes. *Journal of Prevention & Intervention in the Community*, 36(1-2), 23-38.

Moynihan, M. M., Banyard, V. L., Arnold, J. S., Eckstein, R. P., & Stapleton, J. G. (2010). Engaging intercollegiate athletes in preventing and intervening in sexual and intimate partner violence. *Journal of American College Health*, 59(3), 197-204.

Moynihan, M. M., Banyard, V. L., Arnold, J. S., Eckstein, R. P., & Stapleton, J. G. (2011). Sisterhood may be powerful for reducing sexual and intimate partner violence: an evaluation of the bringing in the bystander in-person program with sorority members. *Violence Against Women*, 17(6), 703-719.

Mulroney, J. (2003). Australian prevention programs for young people. *Australian DV & FV Clearinghouse Topic Paper*, 1-21.

Murnen, S. K., Wright, C., & Kaluzny, G. (2002). If "boys will be boys," then girls will be victims? A meta-analytic review of the research that relates masculine ideology to sexual aggression. *Sex Roles*, 46(11-12), 359-375.

Nation, M., Crusto, C., Wandersman, A., Kumpfer, K. L., Seybolt, D., Morrissey-Kane, E., et al. (2003). What works in prevention: Principles of effective prevention programs. *American Psychologist*, 58(6/7), 449-456.

National Rugby League (2014) Respectful Relationships Education Manual. Sydney.

Nayak, M., C. Byrne, M. Martin & A. Abraham (2003). Attitudes towards violence against women: A cross-nation study, *Sex Roles*, 49(7/8), 333–342.

Noonan, R. K., & Charles, D. (2009). Developing teen dating violence prevention strategies: Formative research with middle school youth. *Violence Against Women*, *15*(9), 1087-1105.

O'Mara, P. (2010). Health impacts of the Northern Territory intervention. *The Medical Journal of Australia*, 192, 546-548.

Parker, E., Meiklejohn, B., Patterson, C., Edwards, K., Preece, C., Shuter, P. & Gould, T. (2006). Our games, our health: a cultural asset for promoting health in indigenous communities. *Health Promotion Journal of Australia*, 17, 103-108.

Pease, B. (2008). Engaging men in men's violence prevention: Exploring the tensions, dilemmas and possibilities (Issues Paper No.17). Sydney: Australian Domestic & Family Violence Clearinghouse.

Pease, B., & Rees, S. (2008). Theorising men's violence towards women in refugee families: Towards an intersectional feminist framework. *Just Policy: A Journal of Australian Social Policy*, (47), 39.

Pease, B., & Pringle, K. (Eds.). (2001). A man's world?: changing men's practices in a globalized world. ZED books.

Phillips, R. (2006). Undoing an activist response: feminism and the Australian government's domestic violence policy. *Critical Social Policy*, 26(1), 192-219.

Pierce, R. (2005). Thoughts on interpersonal violence and lessons learned: Fact or fiction. *Journal of Interpersonal Violence*, 20(1), 43-50.

Piggot, R. and Milward, K. (2010). Evaluation of 91314 - NSW Certificate IV in Aboriginal Family Health (Family Violence, Sexual Assault & Child Protection) - final report. Sydney: Write On Consulting.

Plested, B. A., Edwards, R. W., & Jumper-Thurman, P. (2006). *Community Readiness: A handbook for successful change*. Fort Collins, CO: Tri-Ethnic Center for Prevention Research.

Powell, A. (2012). More than ready: Bystander action to prevent violence against women in the Victorian community. Melbourne: VicHealth.

Raghavan, C., Mennerich, A. and Sexton, E. (2006) Community Violence and Its Direct, Indirect, and Mediating Effects on Intimate Partner Violence. *Violence Against Women* 12, 1132-1149.

Reed, E., Raj, A., Miller, E., & Silverman, J. G. (2010). Losing the "gender" in gender-based violence: the missteps of research on dating and intimate partner violence. *Violence Against Women*, *16*(3), 348-354.

Renzetti, C. M. (2011). Editor's Introduction. Violence Against Women, 17(8), 967-969.

Ricardo, C., Eads, M., & Barker, G. (2011). *Engaging Boys and Men in the Prevention of Sexual Violence*. Sexual Violence Research Initiative and Promundo. Pretoria, South Africa.

Rich, Marc D., Utley, Ebony A., Janke, Kelly, Moldoveanu, Minodora. (2010). "I'd Rather Be Doing Something Else:" Male Resistance to Rape Prevention Programs. *Journal of Men's Studies*. 18 (3), 268-288.

Rosewater, A. (2003). Promoting prevention targeting teens: An emerging agenda to reduce domestic violence: Family Violence Prevention Fund.

Schewe, P. A. (2002). Guidelines for developing rape prevention and risk reduction interventions. In P. A. Schewe (Ed.), *Prevention violence in relationships: Interventions across the lifespan*. Washington DC: American Psychological Association.

Smothers, M. K., & Smothers, D. B. (2011). A sexual assault primary prevention model with diverse urban youth. *Journal of Child Sexual Abuse*, 20(6), 708-727.

Staggs, S. L., & Schewe, P. A. (2011). Primary prevention of domestic violence. In M. P. Koss, J. W. White & A. E. Kazdin (Eds.), *Violence against women and children, Vol 2: Navigating solutions,* American Psychological Association, 237-257...

Stith, S. M. (2006). Future Directions in Intimate Partner Violence Prevention Research. *Journal of Aggression, Maltreatment & Trauma, 13*(3/4), 229-244.

Stith, S. M., Smith, D. B., Penn, C. E., Ward, D. B., & Tritt, D. (2004). Intimate partner physical abuse perpetration and victimization risk factors: A meta-analytic review. Aggression and Violent Behavior, 10(1), 65-98..

Sweetman, C. (2013). Introduction: Working with men on gender equality. *Gender & Development*, Vol. 21, No. 1, 1-13.

Tharp, A. T., DeGue, S., Lang, K., Valle, L. A., Massetti, G., Holt, M., & Matjasko, J. (2011). Commentary on Foubert, Godin, & Tatum (2010) The evolution of sexual violence prevention and the urgency for effectiveness. *Journal of interpersonal violence*, 26(16), 3383-3392.

Tilbury, C. (2009). The over-representation of indigenous children in the Australian child welfare system. *International Journal of Social Welfare*, 18, 57-64.

True, J. (2012). The political economy of violence against women, Oxford University Press.

Turchik, J. A., & Edwards, K. M. (2012). Myths about male rape: A literature review. *Psychology of Men & Masculinity*, 13(2), 211.

UN General Assembly (2006). In-depth study on all forms of violence against women: Report of the Secretary General, 2006. A/61/122/Add. 1. 6 July.

Urbis Keys Young. (2004). *National framework for sexual assault prevention*. Office of Status of the Women, Federal Government. Canberra, Australia.

Ussher, J. M. (2010). Are We Medicalizing Women's Misery? A Critical Review of Women's Higher Rates of Reported Depression. *Feminism & Psychology*, 20(1), 9-35.

van Mierlo, B. (2012). Community systems strengthening in Afghanistan: A way to reduce domestic violence and to reinforce women's agency. *Intervention: International Journal of Mental Health, Psychosocial Work & Counselling in Areas of Armed Conflict,* 10, 134-145.

VicHealth (2012). More than ready: Bystander action to prevent violence against women in the Victorian community. Victorian Health Promotion Foundation (VicHealth), Carlton, Australia.

VicHealth (2010). National Survey on Community Attitudes to Violence Against Women 2009: Changing cultures, changing attitudes – preventing violence against women. Melbourne: Victorian Health Promotion Foundation (VicHealth).

VicHealth (2007). Preventing violence before it occurs: A framework and background paper to guide the primary prevention of violence against women in Victoria. Carlton, Victoria.

VicHealth (2006). Two steps forward, one step back: Community attitudes to violence against women, VicHealth, Melbourne.

VicHealth (2004). The health costs of violence: Measuring the burden of disease caused by intimate partner violence. Melbourne: Victorian Health Promotion Foundation.

VicHealth. (2012). The Respect, Responsibility and Equality program. A summary report on five projects that build new knowledge to prevent violence against women. Melbourne, Australia: Victorian Health Promotion Foundation.

Wells, L., Lorenzetti, L., Carolo, H., Dinner, T., Jones, C., Minerson, T., & Esina, E. (2013). Engaging men and boys in domestic violence prevention: Opportunities and promising approaches. Calgary, AB: The University of Calgary, Shift: The Project to End Domestic Violence.

Whitaker, D. J., Murphy, C. M., Eckhardt, C. I., Hodges, A. E., & Cowart, M. (2013). Effectiveness of primary prevention efforts for intimate partner violence. *Partner Abuse*, 4(2), 175-195.

Whitfield, C.L., Anda, R.F., Dube, S.R. &, Felitti, V.J. (2003). Violent Childhood Experiences and the Risk of Intimate Partner Violence in Adults: Assessment in a Large Health Maintenance Organization. *Journal of Interpersonal Violence*, 18, 166-185.

Willis, M., (2011). Non-disclosure of violence in Australian Indigenous communities. *Trends and issues in crime and criminal justice*, 1.

Wolfe, D. A., & Jaffe, P. G. (2003). Prevention of domestic violence and sexual assault. *VAWnet 8* (2004).

Women's Health Victoria. (2012). Everyone's business: A guide to developing workplace programs for the primary prevention of violence against women. Women's Health Victoria: Melbourne. Available from:

 $http://www.vichealth.vic.gov.au/\sim/media/ResourceCentre/Publications and Resources/PVAW/guide\%20to\%20equality/Everyones\%20Business\%20Guide.ashx.$

Wright, L. & Carmody, M. (2012). Guidelines for the delivery of the Sex + Ethics Respectful Relationships Program with Indigenous young people. University of Western Sydney, Australia.



