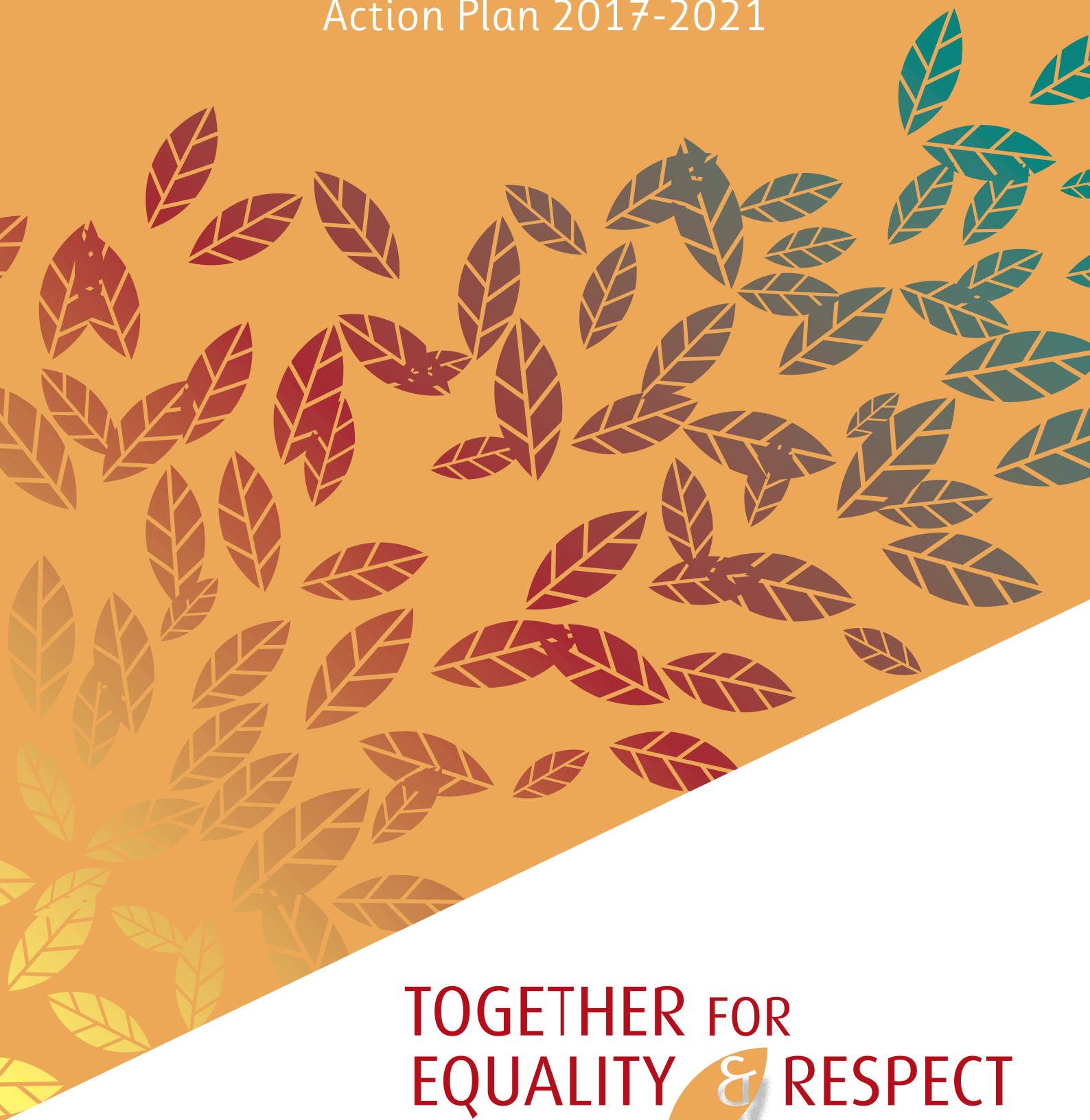


TOGETHER FOR EQUALITY & RESPECT:

Action Plan 2017-2021



TOGETHER FOR
EQUALITY & RESPECT



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Women's Health East would like to acknowledge the contribution of Angela Walsh to the development of this Action Plan, in her role as Together for Equality and Respect Manager 2017-2018



The TFER Partnership proudly acknowledges the Wurundjeri people,
the traditional owners of the land on which we work.

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I am very pleased to be able to share with you the new Together for Equality & Respect Action Plan 2017-2021.

Over the last four years Partners worked together to implement our first Action Plan and during this time the Partnership has grown and developed into a strong regional platform focused on preventing violence against women. Our new Action Plan will continue to direct our collective efforts and provide us with a clear way forward for measuring our shared success.

Experience tells us that by working together we can achieve things we hadn't previously believed possible. Furthermore, if we ensure our way forward is guided by our values of sharing resources, knowledge and practice wisdom, and acting with courage, fairness and equality, our impact will be richer and deeper.

We also know that without the voices of individuals and the broader community as partners in this work we will not achieve our Vision. I am pleased to highlight the stronger commitment in this Action Plan to involving local community as partners in this work.

I invite you to join the combined efforts of the Partnership in bringing this plan to life, and I look forward to celebrating our shared success with you.

Regards,

Jacky Close

Chair, Leadership Group

Together for Equality & Respect

INTRODUCTION TO THE ACTION PLAN

INTRODUCTION TO THE TOGETHER FOR EQUALITY & RESPECT ACTION PLAN:

Together for Equality & Respect (TFER) is a collaborative, cross sector Partnership of organisations in the Eastern Metropolitan Region (EMR) working together for the prevention of violence against women (PVAW) and the advancement of gender equality (GE).

The background, evidence base and further information on the Partnership can be found in the [Strategy 2017-2021](#).

This document is the Action Plan 2017-2021. The overarching purpose of the Action Plan is to coordinate collective action and impact as well as map cross sector activities. This is a working document, which will be updated annually to reflect the work being undertaken by Partners across the EMR for PVAW and GE.

The implementation of actions mapped within the Action Plan will be evaluated according to the [Evaluation Plan](#) currently being developed by the Evaluation Working Group (EWG).

PURPOSE OF THE ACTION PLAN:

Partners clearly identified the purpose of the Action Plan was to:

- **Deepen existing partnerships:** Build on mutually reinforcing actions, activities and approaches.
- **Enable the Social Ecological Approach:** Connect actions and strategies across individual, interpersonal, organisational and societal levels.
- **Create a common and consistent language for PVAW and GE:** Create a shared language for PVAW and GE across settings in the EMR.
- **Identify new areas for action:** Define new and ongoing areas for action.
- **Extend TFER's reach across the EMR:** Extend TFER's reach and messaging into the community and within specific groups.
- **Inform the evaluation:** Review and refine the existing Evaluation Plan for 2017-2021.
- **Focus on shared theories of change:** Continue with current theories of change that underpin TFER.

- **Enable information sharing across the EMR:**

Effectively communicate TFER actions across the EMR to all Partners, building connections and sharing learnings.

EVIDENCE WHICH INFORMS THE ACTION PLAN:

The Action Plan 2017-2021 is guided by:

- The evaluation findings from the TFER Evaluation 2013-2017;
- Evidence from Our Watch, ANROWS and VicHealth;
- Evaluated primary prevention initiatives;
- Free From Violence: Victoria's strategy to prevent family violence and all forms of violence against women;
- Safe and Strong: A Victorian Gender Equality Strategy;
- Recommendations arising from the Victorian Royal Commission into Family Violence; and
- The Victorian Public Health and Wellbeing Plan.

DEVELOPMENT OF THE ACTION PLAN:

TFER implemented a co-design process to inform the underlying values, needs and directions of the 2017-2021 Action Plan.

The TFER co-design process was facilitated by the backbone organisation Women's Health East (WHE), and involved centring the voices of [Partners](#) who would utilise the Action Plan, i.e. the end user of the Action Plan, to ensure that the Action Plan would be applicable to their organisations values and goals.

More information about the co-design process can be found in [Appendix 1: Co-design Process](#).

TFER looks forward to seeing Partners utilise a community focused co-design approach. This approach will centre the voices of community members who will be involved in community level projects and programs i.e. the end user of the project or program, to ensure that they are applicable to community members' values and goals.

THE VISION AND VALUES WHICH UNDERPIN THE ACTION PLAN

THE VISION:

"A society where women live free from men's violence – where every girl and boy grows up to be equally valued, heard and respected, with equal access to opportunities."

CORE VALUES OF THE PARTNERSHIP

The Partnership encourages the following values across our prevention practice: sharing, courage, fairness and equality. The Partnership identifies the following actions which demonstrate these core values.

	SHARING	COURAGE	FAIRNESS AND EQUALITY
PARTNERSHIP VALUES	TFER Partners share work, resources, evaluation data, and learnings, for shared outcomes and shared impact.	TFER Partners aspire to say what needs to be said, speak out, challenge others, and admit when their own behaviours are not consistent with TFER values.	TFER uses accessible language, models equitable decision-making, and enables and embeds an intersectional and inclusive approach.
PARTNERSHIP ACTIONS	TFER Partners: <ul style="list-style-type: none"> • Clearly identify TFER in organisational plans. • Commit resources. • Contribute to implementing and sharing the Evaluation Plan. • Contribute to implementing and sharing the Communications Plan. 	TFER Partners: <ul style="list-style-type: none"> • Ask curious questions. • Seek understanding when differences occur. • Regularly practice critical reflection in meetings and Community of Practice (COP). • Ensure communications are respectful in all meetings. 	TFER Partners: <ul style="list-style-type: none"> • Practice critical reflection on the broader fairness and equality of partnerships work. • Acknowledge power and privilege. • Visualise positive futures. • Use TFER as a tool for advocacy.



PRACTICE EMBEDDED IN ACTION

INTERSECTIONAL PRACTICE

TFER recognises the importance of taking an intersectional approach that considers and analyses dynamics of power and social inequality. Intersectionality recognises how different and interacting inequalities influence peoples' experiences and their access to resources, services and opportunities. In the context of PVAW and advancing GE, TFER recognises how gender inequality interacts with other forms of discrimination such as those based on class, Indigeneity, race, ethnicity, disability, sexuality, gender identity, religion, geographical location and age. The intersecting discriminations mean that some women have less access to power, resources and opportunities than others, and gender inequality is not experienced in the same way for all women. Although violence against women occurs in all cultures and socio-economic groups, the evidence demonstrates that the prevalence, severity and frequency of violence is often more profound among women who face multiple layers of disadvantage and discrimination.

Reflecting on the evaluation findings from 2013-2017, the Strategy 2017-2021 recommends greater focus on intersectionality or the 'intersecting forms of discrimination and disadvantage' across focus areas identified in the Action Plan. Taking this approach to prevention means that, while gender inequality remains the central focus of prevention action, we need to also focus on the social conditions, structures, norms and practices which allow other intersecting forms of discrimination to be perpetrated and address these. Hence, in 2017-2021 there will be continued emphasis on building capacity in the EMR to take an intersectional approach to PVAW. Intersectional practice for PVAW includes working more closely with communities to understand women's lived experiences of gender inequality, tailoring action to ensure relevance and reach to all in our community, and building a focus on addressing other forms of discrimination into our gender equality action.

EVIDENCE INFORMED PRACTICE

In order to maintain the quality of prevention work outlined within this Action Plan, it is imperative partner actions be informed by evidence. Evidence informed practice means program planning is guided by reports, frameworks and articles which outline the benefits, enablers and challenges of similar work that has been previously implemented in comparable settings. Frameworks and data to consider using include those from reputable organisations such as Our Watch, ANROWS and VicHealth. Sharing platforms such as [The Well](#) should be referred to for learnings from previous work within the sector. For further research purposes, platforms such as university databases should be considered.

RIGOROUS EVALUATION

In order for TFER to contribute to the evidence base for PVAW, it is important that this Action Plan, and the subsequent projects within, continue to be rigorously evaluated over the 2017-2021 phase. The results of the evaluation will be disseminated to Partner organisations, relevant networks and government departments. It will also be used to promote the work of the EMR and to inform others who may be working in PVAW. With combined effort through mutually reinforcing activities, genuine progress towards ending violence against women in the EMR will be achieved.

TOGETHER FOR EQUALITY & RESPECT ACTION PLAN 2017-2021

DEFINITION OF TERMS IN THE ACTION PLAN:



STRATEGIC DIRECTION

A course of action that leads to the achievement of the Vision. TFER has four strategic directions.



GOAL

Each strategic direction has a goal which identifies the contribution, by Partners, to the course of action.



FOCUS AREA

Each focus area provides a brief description of the type of work under each goal.



OUTCOMES

The outcomes under each strategic direction show the change TFER wants to see for that particular focus area.



MUTUALLY REINFORCING ACTIVITIES

Mutually reinforcing activities are not developed collectively, nor are they the same action. Mutually reinforcing activities in this Action Plan are simply activities that are supported by the actions of the broader Partnership to achieve the vision and outcomes.¹



More terms can be found in [Appendix 3: Common Language](#)

SUMMARY OF THE ACTION PLAN: OUTCOMES

STRATEGIC DIRECTION 	GOAL 	FOCUS AREA 	OUTCOME 
LEAD AND ACHIEVE CHANGE	Organisations will lead initiatives that work with the community to enable equality and, equal and respectful relationships.	Work with the EMR community across all settings.	People in the EMR have high support for and take action on gender equality and gender equity.
		Work with diverse community groups within the EMR.	All community groups in the EMR are engaged in gender equity and prevention of violence against women.
ADOPT AND CONTRIBUTE TO THE EVIDENCE BASE	Organisations will adopt evidence informed primary prevention action and evaluation to prevent men's violence against women, and contribute to the evidence base.	Contribute to the evidence base.	The evidence base for prevention of violence against women includes findings from TFER and TFER Partners.
BUILD ORGANISATION AND WORKFORCE EXCELLENCE	Organisations will invest in building their capacity, and that of their workforce, to address men's violence against women.	Organisational change.	Organisations in the EMR have established systems that promote and enable gender equality.
		Workforce capacity.	The TFER Partner workforce has the capacity to support, lead and participate in gender equity initiatives.
STRENGTHEN PARTNERSHIPS	Organisations will work in partnership to prevent men's violence against women and to reinforce prevention initiatives.	TFER Partnership.	TFER enhances the partnerships created and outcomes achieved towards prevention of violence against women in the EMR.

SUMMARY OF THE ACTION PLAN: INDICATORS OF SUCCESS

FOCUS AREA	INDICATORS OF SUCCESS
WORK WITH THE EMR COMMUNITY ACROSS ALL SETTINGS	<ol style="list-style-type: none"> 1. Community members are increasingly aware of the issue of gender equality and equity. 2. Community members report more support for gender equality and equity. 3. Community members report increased capacity to engage in gender equality and equity initiatives. 4. Community members increasingly take action for gender equality and equity.
WORKING WITH DIVERSE COMMUNITY GROUPS WITHIN THE EMR	<ol style="list-style-type: none"> 1. There is an increase in the number and types of groups and communities who are involved in working to progress gender equality. <p>*Previous indicators also apply.</p>
CONTRIBUTE TO THE EVIDENCE BASE	<ol style="list-style-type: none"> 1. An increasing proportion of Partners embed the shared measures in design, implementation and evaluation of projects. 2. An increasing proportion of Partners share data with the Collective Impact evaluation. 3. An increasing number of Partners report utilising the evidence base to inform their PVAW/GE work. 4. An increasing proportion of Partners share learnings and findings via opportunities within TFER such as Community of Practice or The Well.
ORGANISATIONAL CHANGE	<ol style="list-style-type: none"> 1. Partners have improved the quality of their internal gender equality work as determined by the 12 audit criteria. 2. Partners PVAW/GE work is increasingly aligned with the Strategy and Action Plan. 3. An increased proportion of Partner organisations' leaders are women. 4. An increased proportion of Partner organisations have identified and enable gender equality champions.
WORKFORCE CAPACITY	<ol style="list-style-type: none"> 1. An increasing proportion of Partners have an established whole of organisation training schedule for GE/PVAW. 2. An increasing proportion of employees who participate in formal training report the importance of GE/PVAW in their work. 3. An increasing proportion of Partner organisation staff are reached by informal capacity building and/or awareness raising. 4. An increasing proportion of Partner organisation prevention practitioners demonstrate strong application of key concepts for preventing violence against women.
TFER PARTNERSHIP	<ol style="list-style-type: none"> 1. An increasing proportion of partners demonstrate a strong understanding of their organisations role in the Partnership. 2. An increasing proportion of Partners report that being a TFER Partner adds value to their PVAW/GE work. 3. An increasing percentage of Partners PVAW/GE activities are done in partnership with other TFER Partners. 4. An increasing number of Partners report feeling that their contribution to TFER is recognised and valued.

PARTNER ACTIONS INCLUDED IN THE ACTION PLAN

Partners each have a variety of priorities and types of work that they contribute to. The Action Plan is not intended to capture all actions across the EMR in response to the complex issue of violence against women. TFER acknowledges that in order to stop violence against women and family violence there is a multitude of work that is happening across the EMR in primary, secondary and tertiary prevention.

TFER coordinates the primary prevention work for PVAW and GE across the EMR.

TFER aims to promote integration and collaboration of aligned activities. Therefore, TFER has identified the following criteria for actions that are included in the Action Plan.

The Action Plan includes Partner actions that are:

- A** Primary prevention actions; and
- B** Actions which contribute to the shared Vision and measures.

These actions can be either:

- A** Implemented in Partnership with at least 1 other Partner; or
- B** The implementation of a common independent activity e.g. Gender Equity Audit.

The Action Plan 2017-2021 includes projects/programs which are being designed, implemented and/or evaluated during July 2017 to June 2021.





STRATEGIC DIRECTION: Lead and achieve change

Strategic direction goal: Organisations will lead initiatives that work with the community to enable equality, and equal and respectful relationships.

FOCUS AREA 1: WORK WITH THE EMR COMMUNITY ACROSS ALL SETTINGS

Outcome: People in the EMR have high support for and take action on gender equality and gender equity.

Why do we need to do this?

Settings are places in our society where people live, learn, work and play. Each setting has opportunities for significant influence over the norms, practices and structures that need to change to shift the drivers of violence against women in Australia.²

This focus area specifically categorises Partner activities by the setting within which they are being implemented. The intent of the focus area is to ensure that TFER collectively reaches all settings in the EMR. Settings that are identified as not being engaged through Partner consultations will be noted in the ‘recommendations for practice’ section.

There may be repetition of noted activities with other focus areas.

Partner actions 2017-2021

Mutually Reinforcing Activities		What is happening?	Who is doing it?
Mutually reinforcing activities have been identified by settings in the EMR.	Education and care settings for young people.	Respectful relationships critical friends	DET supported by: <ul style="list-style-type: none"> • WHE • Link HC • Monash CC • EDVOS • Inspiro • Eastern Health • EACH
		iMatter program -schools	<ul style="list-style-type: none"> • Doncare
		No limitations training for early years educators	<ul style="list-style-type: none"> • WHE • Manningham CC • Access HC
		Gender equity booklist project	<ul style="list-style-type: none"> • WHE • Maroondah CC • Eastern Regional Libraries • Yarra Ranges Council • Knox CC • EACH

Mutually Reinforcing		What is happening?	Who is doing it?
Mutually reinforcing activities have been identified by settings in the EMR. (continued)	Education and care settings for young people. (continued)	Gender equity story time	<ul style="list-style-type: none"> • Whitehorse CC • Manningham CC • Monash CC • Monash CC • Whitehorse/Manningham Libraries • MIC
		Students from newly arrived refuge and migrant backgrounds in EAL classes exploring PVAW and GE in an Australian context	<ul style="list-style-type: none"> • MIC • The Human Development Workshop • TESSA inc
		Presenting at early years networks	<ul style="list-style-type: none"> • EACH • WHE • Carrington Health
		Free to be me	<ul style="list-style-type: none"> • Access HC • WHE
		Gender equity early years working group	Yarra Ranges Council with: <ul style="list-style-type: none"> • INSPIRO • EDVOS • ERL • Eastern Health • Play Group Victoria • Box Hill Institute
		Ambassadors for gender equality and respect	<ul style="list-style-type: none"> • Inspiro • EDVOS • Yarra Ranges Council • WHE • Eastern Health • Local Schools
		Level playground	<ul style="list-style-type: none"> • EDVOS
	The media.	Speaking out: media advocacy project	WHE supported by: <ul style="list-style-type: none"> • EDVOS • ECASA
		Busting the myths	<ul style="list-style-type: none"> • OEPCP • EDVOS • WHE
		16 DoA	<ul style="list-style-type: none"> • WHE with: • Link HC, Carrington Health, Manningham CC, MIC, EACH, IEPCP, Knox Pledge, Monash CC, OEPCP, Whitehorse CC, Access HC, Yarra Ranges Council, EDVOS, Maroondah Council, Yarra Valley Water, Eastern Health, Doncare, The Basin Neighbourhood House, and Inspiro
		Inspiring women in Yarra Ranges: sharing stories and profiling local women	<ul style="list-style-type: none"> • Yarra Ranges Council
		Guidelines for messages and images in relation to gender equality	<ul style="list-style-type: none"> • Maroondah CC • Whitehorse CC • Yarra Ranges CC

Mutually Reinforcing Activities		What is happening?	Who is doing it?
<p>Mutually reinforcing activities have been identified by settings in the EMR.</p> <p>(continued)</p>	Sports, recreation, social and leisure spaces.	Creating space for women in sport: gender equity self-assessment tool	<p>developed by:</p> <ul style="list-style-type: none"> ● Yarra Ranges Council ● Inspiro ● EACH <p>Implementation:</p> <ul style="list-style-type: none"> ● Whitehorse CC ● Knox CC ● Monash CC
		Equality is the game	<ul style="list-style-type: none"> ● Yarra Ranges Council ● Maroondah CC ● Knox CC ● DET ● Inspiro
		Safe and inclusive sporting clubs project	<ul style="list-style-type: none"> ● Access HC ● Manningham CC ● Boroondara CC ● WHE
		Clubs community leaders united by sport	<ul style="list-style-type: none"> ● Monash CC ● Monash University ● Link HC
		Choose tap sponsorship	<ul style="list-style-type: none"> ● Yarra Valley Water with AFL Yarra Ranges and VFLW
		Leading the change	<p>Eastern Health with:</p> <ul style="list-style-type: none"> ● Yarra Ranges Council ● Yarra Valley Water ● AFL ● SALT
		iMatter -Sport	<ul style="list-style-type: none"> ● Doncare
		Empowering women through sport	<ul style="list-style-type: none"> ● Whitehorse
	Popular culture, advertising and entertainment	Technology Skills and Empowerment Workshops	<ul style="list-style-type: none"> ● WHE ● Girl Geek Academy
		Women Online: Intersection of Gender, Technology and Sexism - Paper	<ul style="list-style-type: none"> ● WHE
	Health, family and community services	Baby makes 3 - maternal and child health, anti-natal	<ul style="list-style-type: none"> ● Carrington Health ● Yarra Ranges Council
	Community mobilisation	Bayswater and Boronia Equality in our community (SASA!)	<ul style="list-style-type: none"> ● EACH ● The Basin Neighbourhood House ● Knox Pledge
		International Women's Day	<ul style="list-style-type: none"> ● WHE ● Monash CC ● Yarra Ranges Council ● EDVOS
		Gender Equity working Group	<ul style="list-style-type: none"> ● Lead by: Manningham CC

Mutually Reinforcing Activities		What is happening?	Who is doing it?
Mutually reinforcing activities have been identified by settings in the EMR. (continued)	Faith based contexts	Inner Eastern Region Faith Communities Unite for Safety and Respect Project	<ul style="list-style-type: none"> • Monash CC with: • Manningham CC • Whitehorse CC • Boroondara CC

How will we know what we are doing is working?

Indicators of success

- 1 Community members are increasingly aware of the issue of gender equality and equity.
- 2 Community members express more support for gender equality and equity.
- 3 Community members report increased capacity to engage in gender equality and equity initiatives.
- 4 Community members increasingly take action for gender equality and equity.

RECOMMENDATIONS FOR PRACTICE:

The following 'gaps' highlight areas of work which are:

- New to the region, and there are few Partners currently working in this space;
- Require more research to inform best practice; or
- Those which are not yet being implemented at all in the EMR.

Gaps in settings being reached by activities outlined in this Action Plan:

- Universities, TAFEs and other tertiary education institutions;
- The arts;
- Public spaces, transport, infrastructure and facilities; and
- Legal, justice, and corrections contexts.

(How to Change the Story²)

Identified gaps in settings as noted by Partners:

- Respectful relationships programs should be implemented in settings other than education.

Recommendations for practice from the Evaluation 2013-2017:

- Partners should ensure implemented projects are supported by evaluation and reporting practices.
- Partners should provide access to data to support shared understanding of achievements across the region.

(TFER Evaluation³)

Additional recommendations from the Leadership Group:

- When working in all settings, Partners should consider intersectional experiences.



FOCUS AREA 2: WORK WITH DIVERSE COMMUNITY GROUPS WITHIN THE EMR

Outcome: All community groups in the EMR are engaged in gender equity and the prevention of violence against women.

Why do we need to do this?

To prevent violence against all women, and leave no women behind as we progress gender equality, Partners must ensure that prevention activities reach all community groups in the EMR.

This focus area specifically categorises Partner activities, which have been tailored for a specific target community group. The intent of the focus area is ensuring that TFER collectively reach all community groups in the EMR. Community groups that are identified as not being engaged through Partner consultations will be noted in the 'recommendations for practice' section.

There may be repetition of noted activities with other focus areas.

Partner actions 2017-2021

Mutually Reinforcing Activities		What is happening?	Who is doing it?
Mutually reinforcing activities have been identified by community groups in the EMR.	Aboriginal and Torres Strait Islander communities.	Liwurruk's (Sisters) in the hood	Boondawan Willam Aboriginal Healing Centre supported by: <ul style="list-style-type: none"> • WHE • Eastern Health • HICSA
		<i>Baby makes 3</i> Balit Booboop Narkwarren	<ul style="list-style-type: none"> • Carrington Health • HICSA • Mullum Mullum • Boondawan Willam Aboriginal Healing Centre
	LGBTIQ communities.	LGBTIQ young people respectful relationships project	<ul style="list-style-type: none"> • WHE • Melbourne University
	Iranian communities.	Financial literacy and leadership workshops for women	<ul style="list-style-type: none"> • MIC • WHE
	Ethnic minority groups from Burma	Financial literacy and leadership workshops for women	<ul style="list-style-type: none"> • MIC • WHE
	Chinese background communities.	Exploring primary prevention	<ul style="list-style-type: none"> • Whitehorse CC • Carrington Health
	Young people from newly arrived refugee and migrant backgrounds	Students from newly arrived refugee and migrant backgrounds in EAL classes exploring GE and PVAW in an Australian Context	<ul style="list-style-type: none"> • Mic • The Human Development Workshop • TESSA inc
		Young men's and womens groups promoting GE/PVAW	<ul style="list-style-type: none"> • MIC
Older people.	Eastern Elder Abuse Network	<ul style="list-style-type: none"> • ECLC • IEPCP • with other TFER Partners 	

Mutually Reinforcing Activities		What is happening?	Who is doing it?
Mutually reinforcing activities have been identified by community groups in the EMR. (continued)	Women with disabilities.	Enabling women	<ul style="list-style-type: none"> • Knox CC with: • WWDV • Yarra Ranges Council • WHE • The Len
		A right to respect: violence against women with disabilities program partnership	<ul style="list-style-type: none"> • Manningham CC • WWDV
	Engaging women for leadership.	Young women's leadership program	Monash CC supported by: <ul style="list-style-type: none"> • South East Community Links
		Empowering women for local government	<ul style="list-style-type: none"> • Voices of Women • Yarra Ranges Council • Eastern Health
	Engaging men.	Supporting male community leaders and champions to promote gender equality	<ul style="list-style-type: none"> • Eastern Health
		Engaging fathers	<ul style="list-style-type: none"> • Eastern Health
		Men's action group	<ul style="list-style-type: none"> • Whitehorse CC

How will we know what we are doing is working?

Indicators of success

- 1 Community members are increasingly aware of the issue of gender equality and equity.
- 2 Community members express more support for gender equality and equity.
- 3 Community members report increased capacity to engage in gender equality and equity initiatives.
- 4 Community members increasingly take action for gender equality and equity.
- 5 There is an increase in the number and types of groups and communities who are involved in working to progress gender equality.

RECOMMENDATIONS FOR PRACTICE:

The following 'gaps' highlight areas of work which are:

- New to the region, and there re few Partners currently working in this space;
- Require more research to inform best practice; or
- Those which are not yet being implemented at all in the EMR.

Gaps in community groups being reached by activities outlined in this Action Plan:

- Older people
- Culturally and Linguistically Diverse communities
 - Chinese communities⁴
 - Greek communities⁴
 - Indian communities⁴
 - Italian communities⁵
- LGBTIQ communities
- Rural communities within the EMR
- People with Disabilities
(Family Violence Prevention⁶)

Identified gaps in community groups as noted by Partners:

- Women in the sex industry.

Recommendations from the Evaluation 2013-2017:

- Partners should continue to build partnerships with communities and organisations working with diverse communities.
- When implementing activities and events, Partners should consider prioritising not only engaging specific communities, but including these communities in the design and implementation of activities.

Additional recommendations from the Leadership Group:

- When working with community groups, Partners should consider the intersectionality of multiple interwoven experiences of diversity for all projects/programs.



STRATEGIC DIRECTION: Adopt and contribute to the evidence base

Strategic direction goal: Organisations will adopt evidence informed primary prevention action and evaluation to prevent men’s violence against women, and contribute to the evidence base.

FOCUS AREA 3: ADOPT AND CONTRIBUTE TO THE EVIDENCE BASE

Outcome: The evidence base for PVAW includes findings from TFER and TFER Partners.

Why do we need to do this?

In order to maintain the quality of prevention work outlined within this Action Plan, it is imperative partner actions be informed by evidence. Evidence informed practice means program planning is guided by reports, frameworks and articles which outline the benefits, enablers and challenges of similar work that has been previously implemented in comparable settings. Frameworks and data to consider using include those from reputable organisations such as Our Watch, ANROWS and VicHealth. Sharing platforms such as The Well should be referred to for learnings from previous work within the sector. For further research purposes, platforms such as Google Scholar should be considered.

This focus area specifically categorises how Partners commit to contributing to the evidence base of PVAW. At the conception of TFER in 2013 there was limited knowledge in regard to proven PVAW practice. Still today there is a need for continued contribution by all Partners to further expand the evidence base for PVAW. Contributing to the evidence base is not only done through publishing journal articles and participating in formal research, but also by sharing learnings and reflections from projects/programs within TFER such as via Communities of Practice.

The activities outlined within this section are not project specific, but various ways in which Partners can commit to contributing to the PVAW evidence base, within and beyond TFER.

Partner actions 2017-2021

Mutually Reinforcing Activities		What is happening?	Who is doing it?
Mutually reinforcing activities have been identified by ways in which Partners can contribute to the evidence base for PVAW.	Contribute to the regional Collective Impact evaluation.	Sharing organisational data with EWG	<ul style="list-style-type: none"> • WHE • LINK HC • DET • Carrington Health • Manningham CC • MIC • Doncare • IEPCP • Knox Pledge • Monash CC • Whitehorse CC • EDVOS • Inspiro • Eastern Health • EACH • The Basin Neighbourhood House

Mutually Reinforcing Activities		What is happening?	Who is doing it?	
Mutually reinforcing activities have been identified by ways in which Partners can contribute to the evidence base for PVAW. (continued)	Contribute to the regional Collective Impact evaluation. (continued)	Development and implementation of the Evaluation Plan by the EWG	<ul style="list-style-type: none"> • WHE • OEPCP • IEPCP • EACH • Access HC • Whitehorse CC 	
	Evaluation is embedded within all organisational PVAW/GE work i.e. both for internal projects and external projects.	Commitment to allocating resources to external evaluation	<ul style="list-style-type: none"> • WHE • LINK HC • Carrington Health • Manningham CC • MIC • EACH • IEPCP • Yarra Ranges Council • Monash CC • Whitehorse CC • Access HC • EDVOS • Inspiro • Eastern Health • Doncare 	
	Partners commit to sharing learning's and reflections with the Partnership.	Present at Community of Practice where relevant; as occur		
		Publishing evaluation reports (TFER e-news and TFER website)		<ul style="list-style-type: none"> • WHE • Carrington Health • EACH • IEPCP • Knox Pledge • OEPCP • Whitehorse CC • Maroondah CC • Inspiro • Eastern Health • Doncare
		Presenting at local events; as occur		<ul style="list-style-type: none"> • WHE • EACH • Monash CC • EDVOS • Inspiro • Carrington Health • OEPCP
Partners commit to sharing learning's and reflections beyond the Partnership.	Publishing evaluation reports (newsletters and journals); as occur		<ul style="list-style-type: none"> • WHE • Carrington Health • EACH • IEPCP • Monash CC • OEPCP • EDVOS • Doncare 	

Mutually Reinforcing Activities		What is happening?	Who is doing it?
Mutually reinforcing activities have been identified by ways in which Partners can contribute to the evidence base for PVAW. (continued)	Partners commit to sharing learning's and reflections beyond the Partnership. (continued)	Presenting at conferences and events; as occur	<ul style="list-style-type: none"> • WHE • Carrington Health • IEPCP • OEPCP • EDVOS

How will we know what we are doing is working?

Indicators of success

- 1 An increasing proportion of Partners embed the shared measures in design, implementation and evaluation of projects.
- 2 An increasing proportion of Partners share data with the collective impact evaluation.
- 3 An increasing number of Partners report utilising the evidence base to inform their PVAW/GE work.
- 4 An increasing proportion of Partners share learnings and findings via opportunities within TFER such Community of Practice or The Well.

RECOMMENDATIONS FOR PRACTICE:

The following 'gaps' highlight areas of work which are:

- New to the region, and there are few Partners currently working in this space;
- Require more research to inform best practice; or
- Those which are not yet being implemented at all in the EMR.

Gaps in evaluation activities outlined by Partners:

- Uptake of shared measures by Partners within their own projects/programs.⁷
- Intersectional data collection by Partners: breaking down data collected about women's experiences by further demographic or identity characteristics.⁸

Identified gaps in evaluation as noted by Partners:

- None reported.

Recommendations from the Evaluation 2013-2017:

- Partners should agree to make a minimum contribution to the TFER evaluation by sharing information at regular intervals and committing resources to the TFER evaluation.
- Partners develop interventions which include resourcing evaluation and the dissemination of findings through peer-reviewed processes so that impact is consistently captured.
- Senior leadership at Partner organisations should give authority for reporting as part of practice and allocate resourcing and time to make this happen.



STRATEGIC DIRECTION: Build organisation and workforce excellence

Strategic direction goal: Organisations will invest in building their capacity and that of their workforce to address men's violence against women.

FOCUS AREA 4: ORGANISATIONAL CHANGE

Outcome: Organisations in the EMR have established systems that promote and enable gender equality.

Why do we need to do this?

“There are significant benefits to workplaces that promote gender equality. Respectful and equitable workplaces see strong staff morale, performance and commitment, reduced sick leave and are more likely to attract and retain quality staff. Organisations with fair and equitable policies stand to benefit from greater employee retention and reputation.”²

The activities outlined within this section can be specific projects or varying ways in which Partners can commit to contributing to their own, and others, organisational change to progress gender equality.

Partner actions 2017-2021

Mutually Reinforcing Activities		What is happening?	Who is doing it?
Mutually reinforcing activities have been identified by ways in which Partners can achieve organisational change for PVAW.	Develop internal systems to promote GE in your organisation.	Phase 1: GE audit (including being redone following phase 3)	<ul style="list-style-type: none"> • WHE (re-audit) • Link HC (re-audit) • Carrington Health (re-audit) • EACH (re-audit) • Monash CC (re-audit) • Yarra Ranges Council (re-audit) • EDVOS (re-audit) • Inspiro (re-audit) • Yarra Valley Water
		Phase 2: GE action plan	<ul style="list-style-type: none"> • WHE • Link HC • Carrington Health • EACH • Monash CC • Access HC • EDVOS • Inspiro • Yarra Ranged Council

Mutually Reinforcing Activities		What is happening?	Who is doing it?
Mutually reinforcing activities have been identified by ways in which Partners can achieve organisational change for PVAW. (continued)	Develop internal systems to promote GE in your organisation. (continued)	Phase 3: Fulfilling action plan commitments i.e. GE policy	<ul style="list-style-type: none"> • WHE • Link HC • Carrington Health • Monash CC • EDVOS • Yarra Valley Water • EACH
		Phase 4: Embedding GE across organisational policies	<ul style="list-style-type: none"> • WHE • Link HC • EACH • Yarra Ranges Council • EDVOS • Yarra Valley Water • Carrington Health
		Independent actions i.e. not part of audit process	<ul style="list-style-type: none"> • Manningham CC • Maroondah CC
		Collection of sex disaggregated data	<ul style="list-style-type: none"> • Carrington Health • Yarra Ranges Council
		Gender lens across grants criteria or projects or programs	<ul style="list-style-type: none"> • Manningham CC • MIC • Yarra Ranges Council • Monash CC
	Internal workforce research.	Keys to diversity: Melbourne University research project	<ul style="list-style-type: none"> • EACH • WHE • ECLC • Monash CC • Melbourne University
	Supporting development of internal systems to promote GE in other organisations.	Gender equity audit tool review	<ul style="list-style-type: none"> • WHE
		Thriving communities partnership	<ul style="list-style-type: none"> • Yarra Valley Water and other corporate entities
		Building organisational and workforce excellence in Knox	<ul style="list-style-type: none"> • EACH • The Basin Neighbourhood House • Knox Pledge
	Enabling women from all backgrounds in leadership.	Local government listen, learn and lead gender equity program	<ul style="list-style-type: none"> • Monash CC • Whitehorse CC
Empowering women for local government		<ul style="list-style-type: none"> • Voices of Women • Yarra Ranges Council • VLGA 	

How will we know what we are doing is working?

Indicators of success

- 1 Partners have improved the quality of their internal gender equality work as determined by the 12 audit criteria.
- 2 Partners PVAW/GE work is increasingly aligned with the Strategy and Action Plan.
- 3 An increased proportion of Partner organisations leaders are women.
- 4 An increased proportion of Partner organisations have identified and enable gender equality champions.

RECOMMENDATIONS FOR PRACTICE:

The following 'gaps' highlight areas of work which are:

- New to the region, and there are few Partners currently working in this space
- Require more research to inform best practice; or
- Those which are not yet being implemented at all in the EMR.

Gaps in organisational change activities outlined in this Action Plan:

- Enabling women from all backgrounds in leadership.⁹

Identified gaps in organisational change as noted by Partners:

- Engaging leaders in local government i.e. councillors.
- Enabling women in leadership, especially women from diverse backgrounds.
- Ongoing support for women in male dominated professions.

Recommendations for practice from the Evaluation 2013-2017:

- Senior leaders of Partner organisations should show commitment on gender issues publicly to enable organisational culture change i.e. speaking out about gender equity and equal rights.
- Partner organisations should foster and support GE champions (key enabler for culture change).
- Partner organisations need to ensure that GE remains a permanent staff portfolio, with extra commitment made over the course of the organisational change journey as the needs arise.
- Partner organisations should support leadership training and opportunities for all women.
- Partner organisations should support training in recognising unconscious bias for Human Resources personnel.

Additional recommendations for practice from Leadership Group:

- Partner organisations should consider intersectional experiences to ensure systems to promote GE in organisations support all women.

FOCUS AREA 5: WORKFORCE CAPACITY

Outcome: The TFER Partner workforce has the capacity to support, lead and participate in gender equity initiatives.

Why do we need to do this?

Workplaces provide an opportunity to reach large populations as they have almost universal reach across all employed people in the EMR.²

The activities outlined within this section can be specific projects or varying ways in which TFER Partners can commit to contributing to their own, and others, workforce development.

Partner actions 2017-2021

Mutually Reinforcing Activities		What is happening?	Who is doing it?
Mutually reinforcing activities have been identified by ways in which Partners can develop workforce capacity.	Increasing workforce understanding of GE/PVAW.	Formal GE/PVAW training in organisations workforce	<ul style="list-style-type: none"> • Link HC • Carrington Health • Whitehorse CC • Yarra Ranges Council • Monash CC • EDVOS • Inspiro • Yarra Valley Water • EACH
		Informal GE/PVAW capacity building in organisations i.e. attending meetings and talking about importance of GE in work	<ul style="list-style-type: none"> • Knox Pledge • Whitehorse CC • EDVOS • Maroondah CC • Doncare • Yarra Ranges Council • Carrington Health • Manningham CC
		Bystander training (Gender inequality)	<ul style="list-style-type: none"> • WHE • Carrington Health • Whitehorse CC • Eastern Health • Yarra Ranges Council • Manningham CC
		GE/PVAW training for organisational leaders, i.e. managers, councillors	<ul style="list-style-type: none"> • Yarra Ranges Council • Carrington Health
	Awareness raising for GE in organisations.	Promotion of GE internally i.e. newsletters, posters	<ul style="list-style-type: none"> • Access HC • Carrington Health • Yarra Ranges Council • Manningham CC
		16DoA – internal awareness raising	<ul style="list-style-type: none"> • WHE with: Link HC, Whitehorse CC, Access HC, EDVOS, Inspiro, Carrington Health, Yarra Ranges Council, Manningham CC

Mutually Reinforcing Activities		What is happening?	Who is doing it?
Mutually reinforcing activities have been identified by ways in which Partners can develop workforce capacity. (continued)	Increasing capacity of prevention practitioners in the East.	COP and regional forums	• WHE
		Introduction to PVAW training	• WHE
		Connecting community groups and services	• MIC

How will we know what we are doing is working?

Indicators of success

- 1** An increasing proportion of Partners have an established whole of organisation training schedule for GE/PVAW.
- 2** An increasing proportion of employees who participate in formal training report the importance of GE/PVAW in their work.
- 3** An increasing proportion of Partner organisation staff are reached by informal capacity building and/or awareness raising.
- 4** An increasing proportion of Partner organisation prevention practitioners demonstrate strong application of key concepts for preventing violence against women.

RECOMMENDATIONS FOR PRACTICE:

The following 'gaps' highlight areas of work which are:

- New to the region, and there are few Partners currently working in this space;
- Require more research to inform best practice; or
- Those which are not yet being implemented at all in the EMR

Gaps in workforce development activities outlined in this Action Plan:

- None noted at this stage.

Identified gaps in workforce development as noted by Partners:

- GE/PVAW education and training for 'front of house' staff.

Recommendations for practice from the Evaluation 2013-2017:

- Partner organisations GE/PVAW training should be conducted as a part of a commitment to and action on other organisational change approaches.
- Partner organisations should increase opportunities for staff and volunteers to build their knowledge base. This includes strengthening their understanding of the complexity of gender inequality and building capacity in application of GE.

Additional recommendations for practice from Leadership Group:

- Partner organisations embed theory of intersectionality in all training packages.



STRATEGIC DIRECTION: Strengthen partnerships

Strategic direction goal: Organisations will work in partnership to prevent men’s violence against women and to reinforce prevention initiatives.

FOCUS AREA 6: TFER PARTNERSHIP

Outcome: Implementation of the Action Plan enhances the partnerships created and outcomes achieved towards prevention of violence against women in the EMR.

Why do we need this?

The Partnership has an established governance structure that carry out specific activities. This focus area provides transparency to all Partners to see ‘what is happening’, and ‘who is doing it,’ as well as consider additional activities for further enhancing TFER through maintaining, expanding and strengthening the Partnership.

Partner actions 2017-2021

Mutually Reinforcing Activities		What is happening?	Who is doing it?
In this case mutually reinforcing activities have been identified by the governance groups in the Partnerships.	Evaluation Working Group.	Collective Impact evaluation	<ul style="list-style-type: none"> • WHE • OEPCP • IEPCP • EACH • Access HC • Whitehorse CC
	Communications Working Group.	Communications Plan	<ul style="list-style-type: none"> • ECLC • WHE
	Leadership Group.	Information sharing Advocacy Rewarding good practice	<ul style="list-style-type: none"> • IEPCP • OEPCP • WHE • EACH • Monash CC • Inspiro • MIC • ECLC • Knox CC • DHHS • Yarra Ranges Council • DET • Access HC • Doncare • Community Representatives

Mutually Reinforcing Activities		What is happening?	Who is doing it?
In this case mutually reinforcing activities have been identified by ways in which the Partnership can be further enhanced. (continued)	Other working groups.	TBC	TBC
	Maintaining the Partnership.	Active collaboration on shared activities (implementation and planning)	All Partners contribute
	Expanding the Partnership.	Review membership Engaging new Partners	Leadership Group
	Strengthening the Partnership.	Developing new partnerships within TFER	All Partners contribute

How will we know what we are doing is working?

Indicators of success

- 1** An increasing proportion of Partners demonstrate a strong understanding of their organisations role in the Partnership.
- 2** An increasing proportion of Partners report that being a TFER Partner adds value to their PVAW/GE work.
- 3** An increasing percentage of Partners PVAW/GE activities are done in partnership with other TFER Partners.
- 4** An increasing number of Partners report feeling that their contribution to TFER is recognised and valued.

RECOMMENDATIONS FOR PRACTICE:

The following 'gaps' highlight areas of work which are:

- New to the region, and there are few Partners currently working in this space;
- Require more research to inform best practice; or
- Those which are not yet being implemented at all in the EMR.

Gaps in activities aimed at strengthening the Partnership outlined in this Action Plan:

- None noted at this stage.

Identified gaps for strengthening the Partnership as noted by Partners:

- Bringing together common work i.e. working groups for those working in same setting/community group

Recommendations for practice from the Evaluation 2013-2017:

- Partners should communicate and advocate for TFER within networks external to TFER.
- Partners should seek clarity and support to gain understanding where required.
- Partners should assess opportunities for increasing degree of engagement with the TFER Partnership.

Additional recommendations for practice from Leadership Group:

- None noted at this stage.

TFER GOVERNANCE

THE LEADERSHIP GROUP

The Leadership Group (LGp) has overall responsibility for upholding the principles and values of the Partnership.

The Terms of Reference for this group includes responsibility for the monitoring of the Action Plan implementation to ensure mutually reinforcing actions occur across a range of settings and community groups in the EMR. This includes identification of any gaps in implementation across the EMR. Where gaps are identified, the LGp may address these through offering capacity building opportunities.

The LGp receives reports from working groups including the EWG and Communications Working Group.

The objectives of the LGp as outlined in the Terms of Reference are to:

- Coordinate efforts promoting an integrated approach to PVAW across EMR by:
 - Monitoring the regional Action Plan for TFER;
 - Adopting a structure for implementation, including the identification of appropriate working groups and Terms of Reference for these; and
 - Identifying ongoing opportunities and mechanisms for extending involvement in the Partnership.
- Develop a Communications Plan for the Partnership;
- Provide a regional voice to comment on issues relevant to PVAW within the EMR; and
- Act as a problem-solving forum to address issues that have the potential to hinder the Partnership.

Membership 2018

Jacky Close (Chair) – Outer East Primary Care Partnership

Jayde McBurnie (TFER Manager) – Women’s Health East

Kristine Olaris – Women’s Health East

Catherine D’Arcy - EACH

Tracey Blyth – Inner East Primary Care Partnership

Tracey Egan – Monash City Council

Rachel Messer – Inspiro

Jessica Bishop – MIC

Michael Smith – ECLC

Rosie Tuck – Knox City Council

Annette Worthing – DHHS

Loren Hedger – Yarra Ranges Council

David Towl - Access HC

Doreen Stoves - Doncare

Etty Rosenblum – DET

Judith Drake – Community Representative

Nicole Simpson – Community Representative

THE EVALUATION WORKING GROUP

The Evaluation Working Group (EWG) oversees development and implementation of the Evaluation Plan and the dissemination of key learnings.

The objectives and responsibilities of the Evaluation Working Group are to:

- 🍌 Develop an Evaluation Plan for the Action Plan.
- 🍌 Recommend appropriate evaluation tools and resources for shared use within PVAW initiatives across EMR.
- 🍌 Monitor implementation of the Evaluation Plan.
- 🍌 Analyse findings from the evaluation.
- 🍌 Report to each meeting of the Leadership Group for the duration of the Working Group.
- 🍌 Provide the Leadership Group with:
 - An Evaluation Plan;
 - Progress reports against the Evaluation Plan;
 - Identification of additional requirements to add value such as resourcing;
 - Summary of information collected by the EWG;
 - Summarised analysis of evaluation findings; and
 - Recommendations for dissemination of information.

Membership 2018

Jayde McBurnie (TFER Manager) – Women’s Health East

Autumn Pierce – Women’s Health East

Taylor Nally - Women’s Health East

Sophie Allen – Inner East Primary Care Partnership

Bonnie Coogan– Access HC

Laura Newstead – Outer East Primary Care Partnership

Catherine D’Arcy – EACH

Bronwyn Upston – Whitehorse City Council

COMMUNICATIONS WORKING GROUP:

The LGp are commissioning the development and implementation of a TFER Communications Plan.

Expressions of interest are now open to Partners who could contribute to the Communications Working Group.

TFER WORKING GROUPS

Other working groups may be convened by the LGp where identified.

EXPRESSIONS OF INTEREST FOR GROUPS:

If you are interested in participating in one of these groups or would like further information on working groups please contact Jayde McBurnie TFER Manager on 9851 3700 or jmcburnie@whe.org.au

ABBREVIATIONS

EMR	Eastern Metropolitan Region
TFER	Together for Equality & Respect
PVAW	Prevention of Violence against Women
GE	Gender Equality
EWG	Evaluation Working Group
LGP	Leadership Group
WHE	Women's Health East
IEPCP	Inner East Primary Care Partnership
OEPCP	Outer East Primary Care Partnership
OEHCSA	Outer East Health and Community Support Alliance
RFVP	Regional Family Violence Partnership
DHHS	Department of Health and Human Services
DET	Department of Education and Training
ECASA	Eastern Centre Against Sexual Assault
EMPHN	Eastern Melbourne PHN
PLEDGE	People Linking to Embrace and Develop Gender Equality
ECLC	Eastern Community Legal Centre
MIC	Migrant Information Centre
EDVOS	Eastern Domestic Violence Service
16DOA	16 Days of Activism against Gender-based Violence
CC	City Council
HC	Health and Community Service

APPENDICES



<p>STEP 1</p>	<p>JANUARY – FEBRUARY 2018</p> <p>Survey sent to map Partners current and planned initiatives and actions to enable gender equality and prevention of violence against women.</p> <p>Baseline survey steps:</p> <ul style="list-style-type: none"> • Develop draft questionnaire. • Circulate with WHE & Leadership Group. • Release by 10th of February. • Individual Partner visits between the 10th and 28th of February. • Collate responses by 28th of February. <p>Questions in Survey:</p> <ol style="list-style-type: none"> 1. What are you and your organisations <i>current</i> initiatives and actions that are leading and achieving change to enable gender equality and preventing violence against women across the EMR? 2. What are you and your organisations <i>planned</i> initiatives and actions that will lead and achieve change to enable gender equality and preventing violence against women across the EMR? 3. How are you <i>contributing to the evidence base</i> for the prevention of violence against women across the EMR? What is your capacity and what limits you? 4. What are you doing to <i>build capacity across you workforce</i> to enable gender equality and preventing violence against women across the EMR? What tools / PD do you use? 5. Who are you working in <i>partnerships with</i> change to enable gender equality and preventing violence against women across the EMR? 6. What <i>settings</i> are you currently working in to enable gender equality and preventing violence against women across the EMR?
<p>STEP 2</p>	<p>FEBRUARY 2018</p> <p>WHE ‘Turning Values into Action’ CoP held with all Partners which aimed to establish the following:</p> <ul style="list-style-type: none"> • What are the values that drive our work to enable gender equality and preventing violence against women? • Revisit the Vision: A society where women live free from men’s violence – where every girl and boy grows up to be equally valued, heard and respected, and with equal access to opportunities.



<p>STEP 3</p>	<p>MARCH 2018</p> <p>WHE facilitated 4 x small group workshops with all partners based on settings:</p> <ul style="list-style-type: none"> • Group to develop workshop structure. • Local councils 13th of March. • Health services 22nd of March. • Other organisations 26th of March. <p>In these co-design sessions we explored Partners’ experiences, perspectives, values, challenges and understandings of TFER and aimed to establish:</p> <ul style="list-style-type: none"> • What does it mean to be a Partner? (individually, interpersonally, in our organisation, in our community and across society) • How can each setting connect with other settings? E.g. How do we activate settings to be mutually reinforcing across the social ecology? • What are the expectations of being a Partner (our standards)? • What are your organisational needs for being TFER practitioners (PD, COP etc) • What is TFER’s role from 2017-2021? • What are our priority areas? • What gaps do we want to address? <p>The workshop series was facilitated by Kiri Bear. Kiri Bear is a professional facilitator, trainer and project manager. With 15 years experience in youth, community and government services, Kiri has been at the forefront of the PVAW field. Kiri is also an artist, poet and a storyteller.</p> <p>Settings</p> <ul style="list-style-type: none"> • Local government 2x participants from each LGA. • Health and wellbeing services all staff engaged with TFER from each organisation. • Business. • Others services e.g. NGO’s and government departments all staff engaged with TFER from each organisation.
<p>STEP 3</p>	<p>APRIL 2018</p> <p>WHE facilitated a large group workshop with all previous small group ‘settings’ participants to share the findings from each setting workshops and to establish how to integrate our work more effectively between settings and across the social ecology.</p>
<p>STEP 4</p>	<p>JULY 2018</p> <p>Action Plan in development</p>
<p>STEP 5</p>	<p>AUGUST 2018</p> <p>Release Action Plan for 2017-2021</p>

Together For Equality & Respect Partners 2017-2021

-
- Access Health and Community
 - Boorndawan Willam Aboriginal Healing Service
 - Carrington Health
 - City of Boroondara
 - Department of Education and Training
 - Department of Health and Human Services
 - Doncare
 - EACH
 - Eastern Community Legal Centre
 - Eastern Elder Abuse Network
 - Eastern Health including:
 - Eastern Centre Against Sexual Assault
 - Yarra Valley Community Health
 - Eastern Melbourne Primary Health Network
 - Eastern Migrant Information Centre
 - Eastern Metropolitan Region Regional Family Violence Partnership
 - EDVOS
 - Inner East Primary Care Partnership
 - Inspiro
 - Knox City Council
 - Knox PLEDGE
 - Link Health and Community
 - Manningham City Council
 - Marooondah City Council
 - Monash City Council
 - Outer East Primary Care Partnership
 - Outer East Child Youth Area Partnership
 - The Basin Neighbourhood House
 - Victoria Police
 - Whitehorse City Council
 - Women’s Health East
 - Yarra Ranges Council
 - Yarra Valley Water
-

VIOLENCE AGAINST WOMEN

Any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women including threats of such acts, coercion or arbitrary deprivations of liberty, whether occurring in public or life.¹⁰ This definition encompasses all forms of violence that women experience that are gender-based.

GENDER-BASED VIOLENCE

Violence that is specifically directed against a woman because she is a woman or violence that affects women disproportionately.²

DOMESTIC VIOLENCE

Refers to acts of violence that occur in domestic settings between two people who are, or were, in an intimate relationship. It includes physical, sexual, emotional, psychological and financial abuse. See also family violence.²

INTIMATE PARTNER VIOLENCE

Any behaviour by a man or a woman within an intimate relationship (including current or past marriages, domestic partnerships, familial relations or people who share accommodation) that causes physical, sexual or psychological harm to those in the relationship. This is the most common form of violence against women.²

FAMILY VIOLENCE

Is a broader term than domestic violence, as it refers not only to violence between intimate partners but also for violence between family members. This includes, for example, elder abuse and adolescent violence against parents. Family violence includes violent or threatening behaviour, or any other form of behaviour that coerces or controls a family member or causes that family member to be fearful. In Indigenous communities, family violence is often the preferred term as it encapsulates the broader issue of violence within extended families, kinship networks and community relationships as well as intergenerational issues.²

INTERSECTIONALITY

A theory and approach which recognises and respects that our identities are made up of multiple interrelated attributes (such as race, gender, ability, religion, ethnicity, sexual orientation, sexual identity, and socio-economic status) and understands the intersections at which women, experience individual, cultural and structural oppression, discrimination, violence and disadvantage.²

INCLUSION

Is valuing all individuals, giving equal access and opportunity to all and removing discrimination and other barriers to involvement.¹¹

DIVERSITY

Is the range of human differences, including but not limited to race, ethnicity, gender, gender identity, sexual orientation, age, social class, physical ability or attributes, religious or ethical values system, national origin, and political beliefs.

GENDER EQUALITY

Gender Equality is the equal rights, responsibilities and opportunities of women, men and trans and gender-diverse people. Equality does not mean that women, men and trans and gender-diverse people will become the same but that their rights, responsibilities and opportunities will not depend on their gender.¹²

In this document gender equality is used to describe the outcome being sought.

GENDER EQUITY

Entails the provision of fairness and justice in the distribution of benefits and responsibilities between women and men. The concept recognises that women and men have different needs and power and that these differences should be identified and addressed in a manner that rectifies the imbalances between the sexes.²

In this document gender equity is used to describe the processes that will be adopted to achieve gender equality.



PRIMARY PREVENTION

Primary prevention initiatives are those that seek to prevent violence before it occurs. The focus of a primary prevention approach is on addressing the underlying determinants of violence against women including gender and power inequality between men and women.

SETTINGS

Environments in which people live, work, learn, socialise and play.²

SOCIO-ECOLOGICAL MODEL

Is a feature of public health and is used to demonstrate how violence is a product of multiple, interacting components and social factors. The model conceptualises how the drivers of violence manifest across the personal, community and social level and illustrates the value of implementing multiple mutually reinforcing strategies across these levels.²

SYSTEMS AND STRUCTURES

Are macro-level mechanisms, both formal (reinforced through government, institutions and laws) and informal (social norms), which serve to organise society and create patterns in relation to who has social and political power.²

EVALUATION

Is the systematic collection of information about the activities, outputs and impacts of programs to assess their value to the strategy, improve ongoing implementation and use the knowledge gained to inform future prevention work.²

SYSTEMS THINKING

Is way to make sense of a complex system that gives attention to exploring the relationships, boundaries and perspectives in a system. It is a mental framework that helps us to become better problem solvers. As system thinkers we can find ways to shift or recombine the parts in the system to offer an improved outcome.¹³

COLLABORATIVE PRACTICE

Longer term and more deliberate of organisations and groups to undertake shared planning and take joint responsibility with equal commitment for joint activities and shared vision of the outcomes, with high levels of trust and power sharing based on knowledge and expertise.¹⁴

COLLECTIVE IMPACT

The Collective Impact approach is premised on the belief that no single policy, government department, organisation or program can tackle or solve the increasingly complex social problems we face as a society. The approach calls for multiple organisations or entities from different sectors to abandon their own agenda in favour of a common agenda, shared measurement and alignment of effort.¹

MUTUALLY REINFORCING ACTIVITIES

The efforts and activities must be aligned towards achieving the common agenda and grounded on the initiative's shared measures of success.¹

BACKBONE ORGANISATION

A defining feature of the Collective Impact approach is the role of a backbone organisation – a separate organisation dedicated to coordinating the various dimensions and collaborators involved in the initiative. Supporting backbone infrastructure is essential to ensuring the collective impact effort maintains momentum and facilitates impact.¹

Scoping of areas of interest for future work

The following table is meant as a tool for Partners to connect with others who are seeking to work in a similar setting or with a similar community group.

TFER will seek to bring together potential Communities of Practice or other linking opportunities to facilitate connection in shared areas of interest.

Mutually Reinforcing Activities		Who is considering working in this space?	
Community groups and settings for scoping partnerships on potential activities for partners.	Supporting Aboriginal community led organisations	<ul style="list-style-type: none"> • WHE • EACH 	<ul style="list-style-type: none"> • Knox Pledge
	Older women and elder abuse	<ul style="list-style-type: none"> • WHE • Link HC 	<ul style="list-style-type: none"> • Whitehorse CC
	Women with disabilities	<ul style="list-style-type: none"> • WHE • EACH 	<ul style="list-style-type: none"> • Whitehorse CC • Yarra Ranges Council
	Indian community in Boroondara	<ul style="list-style-type: none"> • MIC 	
	Chinese communities	<ul style="list-style-type: none"> • MIC (newly arrived Chinese community) • Whitehorse CC 	<ul style="list-style-type: none"> • LINK HC
	Universities (international students)	<ul style="list-style-type: none"> • LINK HC • Whitehorse CC 	
	Arabic speaking groups	<ul style="list-style-type: none"> • MIC 	
	Pakistani women	<ul style="list-style-type: none"> • MIC 	
	Respectful relationships: parents/online content	<ul style="list-style-type: none"> • EACH 	
	Ethnic minority groups from Burma	<ul style="list-style-type: none"> • EACH (Maroondah) 	
	Women's leadership in advocacy training	<ul style="list-style-type: none"> • Knox Pledge 	
	Neighbourhood houses	<ul style="list-style-type: none"> • Monash CC 	
Embedding Intersectionality in prevention practice	<ul style="list-style-type: none"> • OEPCP 	<ul style="list-style-type: none"> • WHE 	
Alcohol and PVAW	<ul style="list-style-type: none"> • OEPCP 		
Education setting – unconscious bias training for teachers	<ul style="list-style-type: none"> • Inspiro • EDVOS 		

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