



Artwork by J

# Re-Claim Research Project Report– Preventing Violence Against Women 2011-12

---

## *Themes and Recommendations*

Commissioned by MonashLink. Researched and written by Dr Tracy Castelino  
(Consultant, PVAW)





# MonashLink Re-Claim Project 2011-12. Themes and Recommendations Report

---

## Table of Contents

<b>1. INTRODUCTION - BROADER CONTEXT</b>	<b>4</b>
<b>2. LOCAL CONTEXT</b>	<b>5</b>
<b>3. PROJECT METHOD</b>	<b>6</b>
<b>3.1 THE PROJECT DATA</b>	<b>7</b>
<b>4. FINDINGS-DISCOVERIES WITH RECOMMENDATIONS</b>	<b>9</b>
<b>4.1 THEME: TERMS AND UNDERSTANDINGS</b>	<b>9</b>
<b>4.1.2 RECOMMENDATION:</b>	<b>12</b>
<b>4.2 THEME: PROFILING THE CLIENT GROUP - WAYS TO ADDRESS EQUALITY IN GENERIC PROJECTS/PROGRAMS</b>	<b>13</b>
<b>4.2.1 RECOMMENDATIONS:</b>	<b>13</b>
<b>4.2.2 A FURTHER CONSIDERATION:</b>	<b>14</b>
<b>4.3 THEME: NAMING MONASHLINK'S POSITION GENDER EQUALITY AND VIOLENCE AGAINST WOMEN</b>	<b>14</b>
<b>4.3.1 RECOMMENDATION: STRENGTHENING MONASHLINK'S ACTIONS ON VIOLENCE AGAINST WOMEN</b>	<b>15</b>
<b>4.4 THEME: THE BUSINESS CASE - THE EFFECTS OF VIOLENCE AGAINST WOMEN TO THE WORKPLACE</b>	<b>16</b>
<b>4.4.1 RECOMMENDATION: "WHAT AFFECTS THE EMPLOYEE – AFFECTS THE EMPLOYER" (BRODERICK, 2011)</b>	<b>18</b>
<b>4.5 THEME – COLLEAGIAL SUPPORT AND CAPACITY BUILDING</b>	<b>18</b>
<b>4.5.1 RECOMMENDATIONS:</b>	<b>19</b>
<b>4.6 THEME - ENGAGING WOMEN AND MEN IN THE PROCESS OF CHANGE</b>	<b>19</b>
<b>4.6.1 RECOMMENDATIONS:</b>	<b>21</b>
<b>4.7 THEMES – MAKING MEANINGFUL POLICIES</b>	<b>22</b>
<b>4.7.1 INTERNALLY RELEVANT POLICIES</b>	<b>23</b>
<b>4.7.2 RECOMMENDATIONS:</b>	<b>24</b>
<b>4.8 SELECTED RECOMMENDATIONS FOR ACTIONS</b>	<b>25</b>
<b>4.9 CONCLUSION</b>	<b>26</b>
<b>APPENDIX 1 - INTERVIEW QUESTIONS FOR FOCUS GROUPS</b>	<b>27</b>
<b>APPENDIX 2 – A SAMPLE OF THE ASU FAMILY VIOLENCE CLAUSE FOR A LOCAL GOVERNMENT COUNCIL.</b>	<b>28</b>
<b>APPENDIX 3 - MALE CHAMPIONS OF CHANGE CHARTER 2011</b>	<b>30</b>
<b>APPENDIX 4 - GUIDELINES FOR THE DEVELOPMENT OF A <i>POLICY OR PROGRAM CHECKLIST</i> FOR MONASHLINK</b>	<b>31</b>
<b>REFERENCES</b>	<b>32</b>



Gender-Based Violence (GBV) is one of the most widespread human rights abuses and public health problems in the world today, affecting as many as one out of every three women. It is also an extreme manifestation of gender inequity, targeting women and girls because of their subordinate social status in society. The consequences of GBV are often devastating and long-term, affecting women's and girls' physical health and mental well-being. At the same time, its ripple effects compromise the social development of other children in the household, the family as a unit, the communities where the individuals live, and society as a whole.  
(Pan-American Health Organisation, 2003)

## 1. INTRODUCTION - BROADER CONTEXT

Globally there has been a vision to reduce violence against women by creating safer communities through multiple intervention and prevention strategies (World Health Organisation, 2002, 2004). Preventing violence, protecting women and meting out justice to offenders and creating safer communities, demands a collaborative effort from all levels of government in conjunction with community organisations (The National Plan, 2011). Reports by the World Health Organisation (2002, 2004) and by VicHealth (2004, 2007) have indicated the importance of gender equality for the building and sustaining of safe and respectful communities for all citizens. One of the key determinants of violence against women has been identified as gender inequality and disrespectful attitudes and behaviors to women and girls (VicHealth, 2007, OWP, 2009; The National Plan, 2011). The analysis of gender in organisations, partnerships, policies and programs has become more widespread over the last 10 years due to the influence of global and local violence prevention research.

Violence against women is still one of the major obstacles on the way to human well-being and safety. Violence, in all its forms, occurs across the individual's life span and has significant detrimental effects on all aspects of health, well-being, and sense of security. The community sector has a mandate to enhance the health and well being of the communities they serve, therefore can take a critical role in preventing and reducing violence against women and family violence.

The current influence of the public health approach in preventing violence against women lays the foundation for the community health sector to play a key role in local policy making, partnerships and program development. Community health services can address violence against women in many ways, from position statements in strategic plans and policies to service delivery (maternal and child health, youth services, aged and diversity, children's services), and through community advocacy and education. By fostering partnerships, promoting integration and advocating to national and state governments and

the community sector, community health services can make a difference to the safety and wellbeing of women.

The National Plan focuses on developing respectful relationships and ensuring communities are safe and free from violence as key strategies to address the underlying causes of violence against women, promote gender equality and women's enjoyment of their human rights.

## 2. LOCAL CONTEXT

The Re-Claim Research Project is progressive and exciting as it seeks to engage and empower staff, and the organisation as a whole in developing a more effective and respectful response to violence against women and family violence. This research paper demonstrates MonashLink's commitment to responding to and reducing violence against women both in the home (family violence) as outlined in the *Annual Report 2009* and the *Health Promotion Strategic Plan 2009-2012* documents. There is a well-established model of service delivery led by the Family Violence Team that provides counselling and support to victims and perpetrators of family violence at the local community level. The research highlights that current policies, programs and services need further support and development in order to provide a comprehensive and consistent organisational position on violence against women and family violence. The research recognises good practice, progress and gaps with regards to the prevention of violence against women at MonashLink.

There are 6 reasons why MonashLink should continue to enhance their work responding to violence against women:

1. The magnitude of the problem means that violence against women affects women in the home, at work and thus affects their communities (WHO, 2002, 2004);
2. It is recognised by the national and state governments as a serious issue for government responsibility;
3. Partnerships between governments and community sectors are seen as effective ways of building community awareness of the detrimental effects of violence against women to all citizens
4. There are promising results from using a public health approach at the local level in raising awareness of, and responding to violence against women and family violence;
5. There is universal access to community health professionals such as social workers, dieticians, physiotherapists, and dental professionals
6. There is a clear business case demonstrating that what affects the employee, also affects the employer (Access Economics, 2004; OWP, 2009; Broderick, 2011)

**Women's workforce participation**

Women make up 45.6% of the total labour force.

Women constitute 70.3% of all part-time employees and 35.2% of all full-time employees.

**The gender pay gap**

On average, women working full-time earn 17.2% less than men working full-time.

Female graduates earn \$2,000 per annum less than male graduates on entering the workforce.

(Equal Opportunity for Women in the Workplace Agency (EOWA) Australian Government, 2011)

**MonashLink workforce participation**

MonashLink employs 128 staff, 117 (91.4%) of which are female and 11 (8.6%) males.

	Male	Female	Total	
Full Time	8	36	44	35%
Part Time	3	81	84	65%
	11	117	128	
Management	3	3	6	
Board	4	3	7	

(MonashLink, Human Resources, Feb 2012)

### 3. PROJECT METHOD

This Re-Claim Research Project used a participatory action research model, which is a gender and social justice model of research that aimed to empower staff and the organisation to reflect and review its current policy and practice on responses to violence against women. This research is innovative. This is relatively new work for a community organisation to research and review its internal workings, its staff and policies in relation to gender equality and its efforts in preventing violence against women.

This research is based on the principle that the way we write, and what we say is not arbitrary, it is constructed through our frame of reference. This research examined what MonashLink policies reflect about its organisational practices and beliefs, and it explored how and why particular practices and beliefs are (re)-produced, resisted, changed, and

transformed. This research sought to understand the everyday realities of gender relations and its impact on responding to the issue of preventing violence against women. This research used a participatory action framework, which unites, and determines the relationship between: (a) people's experiences of the organisation; (b) the discursive practices (that is the process involved in creating, writing, speaking, reading, and hearing); and (c) the larger social context that influences policies, work practices and programs developed.

The following components comprised the research design of this project:

- Policy analysis
- Focus group interviews
- Advisory Committee reflective meetings

The Advisory Committee was comprised of Fran James, Carmel Fox, Pauline Kelly, Helen Wirtz, Sheila Eva, Jenny George and Kerryn Super. There was an open invitation to other interested parties. The Advisory Committee met monthly to explore key research issues, co-ordinate and support the focus groups and reflect on data, themes and recommendations developed by the research consultant. These Advisory Committee meetings contributed greatly to this research project as it was a robust and reflective space where commitment to, and expertise on family violence and violence against women allowed for generative discussions. The Advisory Committee considered a selection of key MonashLink policies and a series of focus groups.

The Violence Prevention Gender Audit Tool (VPGAT) was used as a framework for enquiry and analysis of policies and focus groups. The VPGAT was developed by the researcher consultant (Castelino, 2011) to explore how gender is present in organisations, partnerships, policies and practices within the context of violence prevention efforts. The VPGAT provides a thematic framework for collating and analysing a particular issue, an organisational response, policies or programs. I have expanded on the gender audit tools used in the international development arena (Oxfam GB, 2004; Moser, 2005) to investigate violence prevention efforts within the Victorian context. The VPGAT provides a participatory and reflective, rather than prescriptive, enquiry for this relatively new area of gendered violence prevention, building capacity of community organisations to prevent violence against women.

The VPGAT offers four components that scaffold the examination of MonashLink's prevention of violence against women efforts. The four components are: 1) gender issues and gender debates, 2) institutional structures and processes, 3) policies with a built in gender analysis, and 4) partnership relationships. All four are inter-related and contribute to a comprehensive understanding of the materialisation of gendered practices in men's anti-violence efforts.

### **3.1 The Project Data**

These VPGAT thematic components were developed into an enquiry format and used to guide the examination of all the data. The project data was comprised of focus groups and

policy analysis. The enquiry format is presented in Appendix 1 – it shows how the questions are constructed to guide the focus groups and policy analysis.

The following 7 policies and key documents were analysed:

1. Annual Report 2009-10
2. Strategic Plan 2009-12
3. Sick Leave Management Policy and Procedure Sept 2010
4. Bullying Sexual Harassment and Unlawful Discrimination Policy and Procedure Mar 2011
5. Occupational Health Safety Policy Jan 2011
6. Health Promotion Strategic Plan 2009-2012
7. Home Visit Outreach Policy and Procedure 2009 (currently under review)

Initially 5 policies were selected however, during the focus groups staff mentioned the *Health Promotion Strategic Plan 2009-2012* and *Home Visit Outreach Policy and Procedure 2009*; therefore the researcher decided to include these documents in the review.

There were a total of 5 focus groups undertaken with staff at all levels of the organisation and members of the Board of Directors. Focus groups were conducted at Hughesdale, Ashwood, Glen Waverley and Clayton sites. The focus groups were spread across the 4 sites to allow as many staff to attend. These interviews asked questions about the understandings, policies, programs and practices regarding violence against women and family violence within the MonashLink (Appendix 1).

**Table 1 – Focus Group Details**

Focus group type	Female participants	Male participants	Total participants
Senior Managers *	7 **	3 **	10
Board of Directors *	7 (3 staff) **	2 (1 staff) **	9
Clayton	9 **	0	9
Glen Waverley	5	0	5
Hughesdale	11	0	11
<b>Total</b>	<b>36</b>	<b>4</b>	<b>44</b>

\*Both these focus groups had staff participants. The figures in table 1 indicate the actual number of participants attending the focus group

\*\* Each of these focus groups had a staff member who attended 2 groups. Repeat attendance was generally due to the decision to have an Advisory Committee member present at each focus group to present the organisational context. There were 4 participants who attended focus groups twice.

The gendered nature of participation is noteworthy. Given that MonashLink staff is over 90% female, it is not surprising that women were the predominant participants. It might have been useful to offer gendered focus groups to purposefully provide male staff an opportunity to explore gender equality and violence against women in their workplace. As noted in Table 1, three of the five focus groups had no male participants. Questions that remain unanswered: Did this make a difference for female staff members to speak more openly? Would there have been any difference between joint and separate male and female staff focus groups? How do the 10% of male staff understand gender equality and violence against women?

The quality of information and understanding through the focus groups was evident by the depth of themes, comments and issues raised. This method created a discovery space for the organisation where new information and ideas were generated in the focus groups. For instance, at the Hughesdale focus group, a participant mentioned the review of the *Home Visit Outreach Policy and Procedure 2009*. There was enthused discussion of the *...safety issues for workers doing home visits...the policy outlines accounting for people's whereabouts when they are in the community...*

*and*

*...as I am thinking and talking here...I realise that there are differences for me as a woman doing a home visit...some times I am the only other person in the house with a male client....does that matter?...I don't know I haven't thought about it...*

Participants explored whether the policy worked, whether staff felt protected and what else might add value to the policy. Given the gendered nature of the organisation, this group discussed whether there might be particular statements necessary in the review and refinement of the home visit and outreach policy.

Section 4 covers the various themes and issues that were explored in the focus groups and drawn out of analysis of the organisational policies selected. Each thematic issue is explored briefly and then matched with a recommendation. The Advisory Committee has seen drafts of this report and provided feedback on particular issues important to MonashLink's strategic vision and plan.

## **4. FINDINGS-DISCOVERIES WITH RECOMMENDATIONS**

### **4.1 Theme: Terms And Understandings**

Words have power. Words are never neutral. Words in policies and in conversation convey how values, principles and the priorities of the organisation are understood and represented. There is power in the meanings attached to words and therefore this merits analysis as it impacts on workplaces and practices. Understandings and representations of family violence, violence against women and gender equality were important terms to explore for the Re-Claim Research Project.

There was a range of understandings of the key definitions and terms: *violence against women* and *gender in/equality*. Whilst the term violence against women was understood, the term gender equality was identified as a new concept and requiring further explanation. In the focus groups the following comments were common:

Violence against women:

- *Violence is about power and control*
- *Violence encompasses a big umbrella of things, not just physical...covers financial, dominating, emotional, verbal abuse....*
- *Violence is explosive and visible...violence against women covers more than just what's visible...*
- *1 in 3 women experience violence and we are a predominantly women workforce...has me thinking about the safety of our staff and what I have missed...*

These comments were contrasted with:

- *Men experience violence too*
- *Women can perpetrate violence against men*
- *Harder for men to speak out about violence*
- *Shouldn't exclude men from any policies on violence*

Whilst the initial comments seemed to locate violence against women within a social and political context of power and control, statements about men's experiences of violence were located in individual stories and personal anecdotes. The exploration of the next term *gender equality* indicates a lack of general knowledge on the topic of violence against women, the various theoretical understandings, the literature on gender inequality as a key cause and current government policies and advancements.

**Table 2 – Gender of Perpetrators of Physical Assault (ABS, 2006)**

Perpetrator of physical assault in past 12 months	Male stranger	Female stranger	Male current or previous partner	Female current or previous partner
<b>Male victims</b>	65%	3%	-	4%
<b>Female victims</b>	15%	9%	30%	-

*Source: Australian Bureau of Statistics 2006 Personal Safety Survey Australia, ABS.*

With an in-depth analysis of the data, of all males physically assaulted in the previous 12 months, only 3% were assaulted by a female stranger and 4% by a current or previous female partner. This is important data as it provides a basic gendered breakdown of men's experiences of violence. Of the 485,400 men in Australia who were physically assaulted in the last 12 months, 89% were assaulted by other males (ABS 2006). Acknowledging that there is an under-reporting of all forms of violence, by both women and men, women are still clearly noted in local and global surveys, as the main victims of violence at the hands of men in their homes.

Locally and internationally the terms *violence against women* and *gender equality* have been noted as inextricably linked: gender inequality causing violence against women. Gender equality entails that women and men are free to develop their personal abilities and make choices without the limitations set by stereotypes, rigid gender roles and prejudices. Gender equality means that the different behaviour, aspirations and needs of women and men are considered, valued and favoured equally. It does not mean that women and men have to become the same, but that their rights, responsibilities and opportunities will not depend on whether they are born male or female. The Australian Government (The National plan, 2011) identified key areas for achieving gender equality: advancing equal access to gender-responsive health and education services; increasing women's voice in decision-making and leadership; empowering women economically; and ending violence against women and girls at home, in their communities.

Participants were asked to explain and explore the concept of *gender equality*. The concept proved difficult for participants to explain. Participants asked for definitions for the term *gender equality*. It was not a well-understood term, however participants shared relevant examples of gender inequality with their clients and with colleagues. Three examples follow:

***A mother brings her children in to the dentist...makes an appointment for her husband but her own teeth and health care is neglected....***

***and***

***When two women colleagues have a conflict, a male manager is less likely to take it seriously and manage it...saying it's just a spat...but when it is an issue between male colleagues, a meeting is set up and the matter is sorted professionally...***

***and***

***It is a female dominated staff group...we are all the worker bees...and management is mainly male...***

These quotes expose a few critical issues and areas for further work in the organisation. Firstly, if workers know that women clients tend to ignore their health and prioritise other family members, they can proactively enquire about women's health and well being needs. Further to this point, it would be interesting to undertake a service audit, disaggregating data according to gender, culture, age.

- How many women and men see the dietitian service or home visits or support groups?
- What questions does the service co-ordination ask at intake? Is there a gender lens overlay of all intake proformas?
- Could MonashLink develop a series of questions that proactively engage with gender in/equality in service use?

**Gender equality** refers to the equal valuing of the roles and responsibilities of women and men. It works to overcome the barriers of stereotypes and prejudices so that both sexes are able to equally contribute to and benefit from economic, social, cultural and political developments within society. When women and men have relative equality, economies grow faster and there is less corruption. When women are healthy and educated, their families, communities and nations benefit.

**Gender inequality** describes how women and men's physical differences are interpreted through particular social, economic, political and legal lenses that lead to inequality between them.

(WHO, 2009)

The selected MonashLink policies were examined to understand how these key terms, violence against women and gender equality were articulated and represented. A key finding was the invisibility of MonashLink's position on violence against women. The policies used the term *family violence*, rather than *violence against women*. MonashLink is clearly committed to responding to family violence in their community. The main focus has been the provision of a solid service through the Family Violence Team<sup>1</sup>. More recently, through the Health Promotion unit, and with consultation and collaboration with the Family Violence Team, there has been a development of new organisational objectives around family violence and its prevention. In the *Health Promotion Strategic Plan 2009-2012* and the *Annual Report 2009-2010*, the prevention of violence against women by the Re-Claim Project is highlighted as a key organisational objective.

*To develop training and education for MonashLink staff to help them recognise signs of family violence and raise the issue of their concern (Annual Report, 2009, p19).*

According to the focus groups and the Advisory Committee, this training is yet to be undertaken. The second objective named in relation to family violence was the employment of a health promotion officer and action plan. This research is the successful achievement of that objective. Clearly, with the impetus of this research and the current government engagement of the issue through a public health framework, it is an opportune time for MonashLink to build in training and assessment.

#### **4.1.2 Recommendation:**

A strong recommendation resulting from this research is the development of a comprehensive package of training on family violence, violence against women and its relationship to gender equality. There is basic and advanced training as part of the family violence systems reform (called the Comprehensive Risk Assessment Framework or CRAF), which is supported by the state and regional family violence structure. CRAF is useful for direct service workers who require an understanding of family violence and assessment of risk.

---

<sup>1</sup> The term "Family Violence Team" is used throughout this report, as that is how the participants referred to members of the Counselling Team. The "Family Violence Team" is actually a sub-set of the Counselling Team.

It is suggested that a more comprehensive organisational training package is necessary to build MonashLink's position and practice on zero tolerance of violence against women. The training program is provided to all staff, executive and board members as a key strategy for building capacity to stand against violence against women.

## 4.2 Theme: Profiling the client group - ways to address equality in generic projects/programs

There were beginning discussions about providing clients with better services to meet their needs. Participants spoke about some client/community groups being under-represented in MonashLink's service data on family violence. There were also comments on the lack of understanding of family violence therefore "a lack of skills in managing disclosures". Some comments include:

*the issue of domestic violence is still shameful therefore they would never speak about it*

*or*

*there are some communities, cultures who still feel such shame...it is kept private because women...for example, older women...feel embarrassed and humiliated... and*

*we notice bruises or trauma when we do an intake or physical assessment....but we don't know what to do....*

*and*

*it is easier to respond to signs of physical violence but other issues, like controlling a woman's clothes or what she spends....I wouldn't know whether that is domestic violence or just a couple's way...*

### 4.2.1 Recommendations:

Two recommendations are suggested with regard to enhancing responses to clients. First, these comments indicate that there is a requirement of more training and support for workers to understand the complexities around intimate partner violence. Training and in-house education on gender equality and violence against women is a repeating research theme.

Second, in order to prevent discrimination, to recognise gender and diversity complexities and to provide opportunities for people from all different groups to fulfil their potential the development of cross-disciplinary and multi-sector partnerships is considered an effective strategy. Possible strategies include:

- Targeting groups or individuals that are under-represented, socially excluded or disadvantaged and that traditionally have not benefited from such investment – this may involve researching and understanding their particular needs
- Providing integrated and "joined up" delivery to ensure that a project's activities link with other initiatives aimed at the same groups and individuals (such as an

- integrated service delivery model for intake and assessment, include the drug and alcohol team, counselling services and children's team).
- Providing easily accessible and sometimes non-traditional support to help overcome particular barriers for certain groups perhaps by developing partnerships with key organisations in the area that are involved with, represent or have access to seldom heard or socially excluded groups
  - Considering transport needs associated with projects – the correlation between social exclusion and lack of access to transport is high and projects should consider how this can be addressed in development and planning
  - Providing facilities and opportunities which are flexible and allow access at different times/ways to fit with a variety of lifestyles or working patterns, such as considering childcare provision for parents who work
  - Monitoring on-going use of facilities to identify any groups that may be under-represented and actively target those groups where possible

#### 4.2.2 A further consideration:

An under-developed area of consideration in Australia has been a response to transgender issues. Overseas, particularly the UK and the European Union have developed policies and procedures to respectfully attend to the needs of transgender people. If MonashLink wanted to review this issue some considerations are:

- Making workplaces safe, comfortable and welcoming to men, women and people undergoing gender reassignment
- Consideration of gender identity issues (transgender) – such as toilet facilities, policies in place, awareness of managers, open and accepting working environment
- Other barriers and opportunities that may be related to gender issues

#### 4.3 Theme: Naming MonashLink's position gender equality and violence against women

A key finding was the lack of clarity about MonashLink's position on the prevention of violence against women and family violence. Focus group participants spoke about the good reputation of the Family Violence Team and MonashLink both internally and externally. There were many, many positive and proud comments about the Family Violence Team and their expertise and generosity of collegial support (through formal and informal consultations and chats). The Family Violence Team was the central point for all efforts on family violence. Participants reflected that as an organisation, there was a sense of pride with MonashLink's work on family violence:

***MonashLink takes family violence and preventing violence against women seriously...we are known for it...***

*and*

*MonashLink's Family Violence Team has a good reputation in the community, with other agencies and with staff...I have just had informal consultations with one of the team members...they have always been helpful...*

*and*

*we did have activities last year and we have posters on preventing violence against women on all sites*

*and*

*last year we did a forum for White Ribbon Day...some men spoke for the staff...it was a good day...it was important to hear men taking responsibility...*

A common discussion point in all focus groups was the commitment of MonashLink to responding to and preventing violence against women. The discussion noted that the rhetoric was good however, actions internally and in partnership with external stakeholders was limited. Participants offered suggestions about how to better support clients and create an environment that was safe and welcoming for those who experience violence against women.

#### **4.3.1 Recommendation: Strengthening MonashLink's actions on violence against women**

The development of a prevention of violence against women and family violence position statement or framework will be achieved through adopting core guiding principles and a shared understanding of the meaning, nature and dynamics of violence against women and family violence.

Suggested strategies:

- The organisation develops a position statement on zero tolerance of violence against women. This statement could be on the website, in posters, in the annual report
- Strengthen their regard for the *National Plan to Reduce Violence Against Women and their Children* (The National Plan, 2011) report and any supporting material in relation to violence against women and family violence laws;
- Benefit from aligning policies with the Victorian government's position on violence against women and family; and
- Partner with other local community services to ensure the solutions identified are lead by local community priorities and knowledge.
- The Orientation Program includes training and information on family violence and violence against women and risk indicators and assessments and key questions to identify, offer support and referrals.
- Organisational forums to build staff knowledge on family violence and violence against women
- Organisational forums and events on the 16 days of activism to eliminate violence against women and the White Ribbon Day.

Violence against women and girls is often perceived as an individual problem and as isolated incidents. However, empirical evidence demonstrates an alarming public health issue. A groundbreaking VicHealth Report (2004) estimates that intimate partner violence against women is the leading contributor to death, disability and illness in Victorian women aged 15 to 44. Viewed in this light violence against women represents one of the most critical public health challenges.

#### **4.4 Theme: the Business Case - the effects of violence against women to the workplace**

It is estimated that in 2002–2003 the total number of Australian victims of domestic violence may have been of the order of 408,100, of which 87% were women. It is also estimated that there were a similar number of perpetrators of domestic violence, 98% of which were male (Access Economics, 2004). This figure represents instances where employees reported their absence from work as resulting from a family violence incident. The cost to employers includes: loss of employees and lost productivity; to the victim, medical and court costs, energy and time in sourcing resources and services required by the victim and affected family members.

Due to under-reporting of incidents of violence by both victims and perpetrators, the real cost to employers is likely to be much higher. Elizabeth Broderick, Sex Discrimination Commissioner, has argued for better workplace responses to domestic and family violence to ensure that women can stay attached to the workforce (ADFVC, 2010).

A major breakthrough for workplace reform is the Australian Services Union (ASU) and Victorian Surf Coast Shire's agreement in 2010 to the country's first domestic violence paid leave clause. Shire employees will have access to up to twenty days paid leave annually if they are victims of domestic violence. A domestic violence clause was also included in the general staff agreement passed at the University of New South Wales (UNSW) in October 2010, granting a worker experiencing domestic violence access to sick, carer's and compassionate leave.

The anxiety and stress associated with domestic violence and family violence impacts on women's financial security, attachment to workplace and colleagues and the decisions victims make about how to handle their safety.

Workplace responses to domestic violence/family violence are new terrain for Australian organisations. There are many organisational considerations and several of these were

mentioned in the interviews with staff. MonashLink had a diversity of responses regarding their organisational responses to gender equality and violence against women. The following quotes illustrate a few perspectives:

*There are tensions between what MonashLink says....its policies,...its intention to take care of staff and the everyday realities of staff....*

*and*

*“There is predominantly women staff – what does this mean for an organisation? Are there particular issues given most of the workforce is female?”*

*and*

*It is a flexible organisation...good with negotiating part-time work...good culture...*

*and*

*We use the standard line that the organisation conforms to government gender equality policies...what does this actually mean? I don’t know where these policies are....*

*and*

*We don’t know about the remuneration policy and the different salary packages...it is quiet....it would be good to be transparent...do people at the higher levels negotiate salaries? Can we negotiate salaries?...I guess men and women negotiate their salaries and positions and promotions differently...*

*and*

*We can use EAP....it is a very good service...confidential and the organisation asks no questions...*

and a salient comment that represents a growing staff awareness of the issues

*I guess I am not very good at noticing things because if there are 1 in 3 women experiencing violence and we have over 90% women staff – what does this mean for us?*

This sample of responses indicates the range of perspectives on workplace responsibilities for the prevention of violence against women and the links to gender equality and safety and security in the workplace. There seemed to be a lack of understanding of the organisation’s position and responsibilities with regards to family violence, with some comments suggesting that special leave could occur on an individual negotiation basis. Some questions to consider:

- What could MonashLink do to enhance the safety and well being of women who experience domestic violence?
- What framework and understanding do the EAP use to support domestic violence and violence against women?
- How does MonashLink consider gender in/equality and its various manifestations in the organisation? What actions can it take to be a proactive gender equality employer?

#### 4.4.1 Recommendation: “what affects the employee – affects the employer” (Broderick, 2011)

From this perspective MonashLink should consider:

- An organisational response/position on the prevention of violence against women and family violence
- Consideration of supports and resources for those employees who present as victims of violence
- Provision of education and training for all employees on gender equality and violence against women
- Develop an action plan with practical steps to support the design and construction of a positive and supportive work environment
- Use a gender equality checklist to design, develop and review all policies and programs.

If a project or organisation embraces equality it can achieve many business advantages. Incorporating the principles of equality and diversity can ensure that there are many employment benefits such as improved motivation and morale, increased productivity, creativity and new ideas. Additionally it can reduce costly and unpredictable employee turnover by motivating employees with fair and inclusive recruitment and employment policies and practices, thereby increasing employee loyalty. See Appendix 2 for a sample of a family violence clause in an enterprise bargaining agreement (EBA).

#### **A NEW WAY FORWARD**

A new EBA clause negotiated between the Surf Coast Shire and the Australian Services Union (ASU) gives employees up to 20 days paid leave a year in a bid to ensure their employment is secure. The council recognises employees sometimes face violence in their personal life which might affect their work attendance or performance.

#### 4.5 Theme – Collegial Support and Capacity Building

**If you suspected a colleague to be experiencing violence in the home, what would you do?**

This question was asked of 4 of the 5 focus groups (including the Board). Participants consistently stated that they would want to offer support to colleagues but wouldn't know what to do. Some of the following quotes indicate the dilemmas for participants:

*I don't want to ever be put in that position....as I don't know what I'd do...it would be good to have some guidelines...some organisational guide of possible steps or ways of approaching a colleague and taking care...*

*and*

*It's hard because if it is physical...and you can see the bruise...it is easier to say something...but you don't know when it is emotional...financial...conflict...these feel like moral issues...individual to the relationship...*

*and*

*I don't know whether it's my place to intervene with a colleague...depends on how well I know her...*

*and*

*You could just check in...ask how they are ...use the mental health first aid training....this was a very good training course....*

*and*

*I would want to do something....but wouldn't want to make it worse...it would be great if there was a guide...if the organisation provided clear procedures and steps....this is not my area...*

#### **4.5.1 Recommendations:**

There are three recommendations that would build capacity of staff across the organisation:

- MonashLink develop an organisational statement on zero tolerance of violence against women.
- MonashLink develop a procedure, a guideline for appropriate responses colleagues who may be experiencing stress and trauma, in particular issues and responses to domestic violence.
- MonashLink to provide basic and advance training on domestic violence and validating and helpful responses.

#### **4.6 Theme - Engaging women and men in the process of change**

A question was asked in all focus groups about “Who needs to be engaged in the process of change? And are different strategies required?” this questions seeks to explore participants’ understanding of the gendered nature of violence and the differential responsibilities and perspectives of women and men. Clearly the research indicates that different groups need to be targeted differently and men can take a leadership role in actively speaking about ways of respecting women and gender equality (Kaufman, 2003; VicHealth, 2007; Pease, 2008; The National Plan, 2011).

Participants agreed that there were different attention and strategies would be necessary given that there would be different motivation for change.

One participant commented:

*If 1 in 3 women are victims of domestic violence...then 1 in 3 men are perpetrators....then strategies need to be different...women need support, safety....for men there needs to be an emphasis that all forms of violence and abuse are wrong...hurt women...hurt children...men need to know they can change....*

Another comment:

*All men are capable of this type of violence against women and all women are vulnerable to this abuse....therefore as men we need to do something different... and another comment:*

*Our CEO is a white ribbon ambassador...so he is doing something about the issue...he spoke at an organisational event last year....it was moving...*

*and*

*It is important for men to do something about violence against women....it meant something that our CEO became a white ribbon ambassador....*

As the quotes demonstrate a different engagement process was identified as necessary but ideas for action were vague. A strong positive response from all focus groups named the importance of the CEO's role as white ribbon ambassador. Some participants spoke about its symbolic importance, many were affected by the White Ribbon event and the CEO's leadership, others wanted to harness this energy and leadership in order to progress the organisation's education and awareness of violence against women. Whilst there was a strong positive and meaningful experiences associated with the White Ribbon Campaign and white ribbon ambassadors, there was little knowledge about its history and meaning.

The White Ribbon Campaign (WRC) is now a popular activity in Victoria and Australia, advancing men's role and responsibility for standing against violence against women. The story behind the White Ribbon Campaign is about a purposeful massacre of women students in Montreal, simply because they were women. This public trauma led to a group of men joining together as men to change their ways and educate other men. Historically the WRC is a male developed, male led and male managed event. Leadership by men of this campaign is one way that they can be accountable and ethically responsive to violence against women in their communities. The WRC is a critical space for men to do men's work. Men are given new options for relating to women as equals and leaders worthy of respect and love. The White Ribbon Campaign is a now an opportunity to educate and engage men and boys to join together to end men's violence against women and embrace alternative masculinities.

- MonashLink has begun this work and it has had a meaningful impact on staff. How might they progress it further? How might they link duties and responsibilities with the role of white ribbon ambassador?
- How might MonashLink be a community/health sector leader in developing a similar initiative like the Male Champions of Change?

#### 4.6.1 Recommendations:

There are three suggested actions for MonashLink's continued work in preventing violence against women and with the WRC more specifically:

- 1) MonashLink staff need to know the history and development of 16 Days of Activism and White Ribbon Day (see Boxes 1 and 2)
- 2) White ribbon ambassadors need to grow the WRC internally and for the community they serve. MonashLink can be a leader in developing duties and actions that go beyond wearing the white ribbon symbolically.
- 3) The Male Champions of Change (Australian Human Rights Commission, 2011) is a collaborative initiative of corporate and institutional leaders convened by Elizabeth Broderick, Sex Discrimination Commissioner, Australian Human Rights Commission. This collaboration has developed a Male Champions of Change Charter that could be adapted to the community sector (see Appendix 3). MonashLink could take a leadership role in building a Male Champions for Change Charter for the Community Sector.

#### **BOX 1 - 16 Days Of Activism Against Gender Violence**

##### **16 DAYS OF ACTIVISM AGAINST GENDER VIOLENCE**

The 16 Days of Activism Against Gender Violence originated from the first Women's Global Leadership Institute held at the Center for Women's Global Leadership (CWGL) in 1991. The 16 Days Campaign runs annually from November 25th (International Day for the Elimination of Violence Against Women) through December 10th (International Human Rights Day) to make the symbolic statement that violence against women is a human rights issue.

The 16 Days Campaign is a mobilising tool for activists to raise awareness at the local, national, regional and international levels; strengthen and link local and global work to end violence against women; provide a forum for dialogue and strategy-sharing; pressure Governments to implement commitments made in national and international legal instruments; and demonstrate the solidarity of activists around the world to end violence against women.

## BOX 2 - History of the White Ribbon Campaign

### HISTORY OF THE WHITE RIBBON CAMPAIGN

On the afternoon of 6 December 1989, a man walked into the Ecole Polytechnique University in Montreal and massacred 14 of his female classmates. The man demanded that all the male students leave and stated that he was killing the women. His actions traumatised a nation and brought the issue of violence against women to the forefront of our collective consciousness.

Two years later a handful of men in Toronto decided they had a responsibility to speak out about and work to stop, men's violence against women. As a result, the White Ribbon Campaign in Canada became an annual awareness-raising event held between 25 November and 6 December.

In 1999, the United Nations General Assembly declared 25 November as the International Day for the Elimination of Violence against Women, with a white ribbon as its iconic symbol.

White Ribbon began in Australia in 2003 as part of UNIFEM (now UN Women). It formally became a Foundation in 2007. White Ribbon is Australia's only national male-led violence prevention campaign.

The White Ribbon Campaign is now the largest global male-led movement to stop men's violence against women.

## 4.7 Themes – Making Meaningful Policies

National and state policy documents stress that the integration of gender into health policies and actions is critical to violence prevention as gender inequality impinges on women's health and access to opportunities and resources (VicHealth, 2007; OWP, 2009; The National Plan, 2011). Primary prevention targets the whole of community using a public health framework that articulates that a multi-level and multi-sectoral approach is required to work towards the elimination of violence against women. The public health approach is very relevant to the community health sector as it makes a concerted effort to address social and physical health, wellbeing and targeted health promotion within local communities. Key primary prevention strategies for addressing family violence are outlined in MonashLink's *Health Promotion Strategic Plan 2009-2012* (2009, p19-20). MonashLink has a strong articulated commitment to working on the prevention and elimination of violence against women in their communities.

Policy documents construct an image of the communities they serve with the language used and data and profiles presented. General terms of *community*, *partnerships* and *people* play a central role in MonashLink's *Health Promotion Strategic Plan 2009-2012*,

*Strategic Plan 2009 and the Annual Report 2009*. Building community is considered a more effective way of preventing violence and crime and promoting community safety in both the public and private spheres therefore the use of these terms in key organisational documents is powerful. Targeting those with particular vulnerabilities, in addition to enhancing universal services for key priority areas, is seen as a sound method for supporting the overall wellbeing of the community.

Policy documents use these terms assuming that gender neutral term provides universal coverage to all constituents equally. For example, the concept of *community* implies benign intention, impartiality, and inclusion of everyone with additional support for those who require it. These gender neutral terms are worthwhile exploring in detail with disaggregated data and evidence to show the range of varying experiences and needs of women and men, girls and boys when considering service delivery priority areas for development. It is a problematic to implement broad policy responses that represent the health and well being issues for all community members equally and inclusively. There is a flawed assumption that everyone is equal and included with general terms of *community* and *everyone*. There is clearly not a level playing field of accessibility and confidence in seeking and using community services.

The following comments indicate participants' awareness and recognition that there is a differential service and response by clients:

- *...lack of care women have with their own health...dental care...dietary options...*
- *...shame for women to come in and speak about their experiences of violence by their husband/partner....*
- *...MonashLink can play an important role, a general community health service, could offer women another pathway of support and safety from violent partners...they could say that they were coming to the physiotherapist or dietitian....*

If MonashLink recognised that there are gendered responses to health care, safety and well being, then policy and program development could actively focus on those neglected, eg mothers, young women with eating disorder, older women who are experiencing long term intimate partner violence. Noticing gender differences in accessing and using community health services allows for review, re-focus and target service delivery to vulnerable populations.

#### **4.7.1 Internally relevant policies**

The policies that covered internal issues pertaining to the staff of the organisation, such as *Sick Leave Management Policy and Procedure Sept 2010, Bullying Sexual Harassment and Unlawful Discrimination Policy and Procedure Mar 2011 and Occupational Health Safety Policy Jan 2011*, again applied the same gender neutral language. Analysing the policies through a gender lens it is evident that there are limitations in MonashLink's current documents: if the workforce is predominantly female there are particular issues and needs that could be better named and covered in policies. For instance consider the following:

- The different experience for women and men working late at the office

- Differing safety issues for women and men undertaking home visits
- Special needs and support women require when experiencing violence in their home

MonashLink has the opportunity to move beyond eliminating individual discrimination, important as this remains, to a new organisational culture where we think positively about how we can create a workplace and community where all women and men have the opportunity to fulfil their potential.

For policies to be effectively gender sensitive they need a specific framework of questions that determine the needs of those most disadvantaged and marginalised by structural inequalities. MonashLink needs to review and refine its philosophical framework and processes for policy development. One strategy for gender sensitive policies is to collect and analyse equalities data using gender disaggregation to provide a robust basis for all policies and the impact analyses that we make. In taking this gender equality publicly forward, account will also be taken of equalities-related partnerships and programs.

- Could MonashLink consider a special EBA clause with the relevant union (ASU and HSU)?
- Could MonashLink consider a family violence policy statement?
- What would it mean for a predominantly female workforce to know that their organisation accepts that domestic violence/family violence impacts on women's work lives?

#### 4.7.2 Recommendations:

The MonashLink Re-Claim Research has explored gender equality expectations and possibilities for the organisation. An equality (and diversity) policy is an important statement of an organisation's attitude to equality in the services it offers and in its management framework. By drawing up an official policy MonashLink would be making a commitment to ensuring that all service users and staff receive fair and equal treatment. An effective policy and any relevant action plan that results will state values and how the organisation intends to put them into practice, shows clients that the organisation is serious about fairness in the way it provides services, helps people understand what they can expect of all projects/programs and build a more productive and supportive workplace for staff. A sample of a *Gender Equality Policy Checklist* is presented in Appendix 4.

There are two recommendations suggested for reviewing and revising MonashLink's policies. The first option is to integrate disaggregated data in each policy and program frame and rationale with a statement of gender equality. The second option proposes the development of an organisational *Gender Equality Policy* or a *Gender Equality Policy Checklist* (see Appendix 4).

This gender equality policy must therefore be implemented in all parts of the policy/project cycle based on the following principles:

- This policy is an integrated part of all policy adopted by MonashLink and the organisation will thereby be committed to include gender equality assessment as an important decision criterion.
- The gender equality checklist is to be integrated into the organisational workplace and orientation manual in order to be used in each policy and program appraisal. This way the recommendation will be based on gender equality and social justice principles. The organisational workplace and orientation manual is a public document on the MonashLink website.
- The checklist shall also be referred to in the external project and partnership development and monitoring processes by using the same criteria in order for consistency and sustainability.
- The gender equality policy guide/checklist will be presented to all staff and thoroughly discussed with all the focal points. Changing organisational culture is contingent on understanding, valuing and embracing gender equality principles as a key way of building a healthy, respectful and successful workplace.

#### **4.8 SELECTED RECOMMENDATIONS FOR ACTIONS**

This research used participatory action methods and thus each conversation provided opportunity for reflection and exploration of issues about gender equality, violence against women and MonashLink's understanding, capacity and commitment to respond to experiences of violation and abuse in the home. MonashLink staff is unmistakably interested in learning and responding to this issue in better, more comprehensive and skilled ways. The selected recommendations underscore the definite interest and commitment by staff and the Board in continuing to grow MonashLink's reputation of care and competence for those (predominantly women) who experience violence and abuse. The recommendations below have been nominated as being in line with MonashLink's Strategic Plan and thus able to be implemented over the next 12 months.

1. Develop a domestic violence policy and procedure including an EBA clause for special leave consideration for workers experiencing FV. Refer to practice and policy examples from University of New South Wales, Surf Coast Shire, Women's Health East and Brimbank Council.
2. Develop an organisational statement on MonashLink's position - zero tolerance of violence against women in public and private spaces.
3. Provide education and training for all employees on gender equality and PVAW through a variety of events and forums.
4. Provide an organisational advocacy response to PVAW through combined actions on the 16 Days of Action to Eliminate Violence Against Women and White Ribbon Day.
5. Develop and implement a Gender Equality Policy checklist to be applied across units and programs

6. Improve procedures and guidelines for appropriate responses/support by managers and colleagues to staff experiencing stress and trauma (including FV).
7. Establish the issue of violence against women as a health promotion priority with dedicated positions and resources.

## 4.9 CONCLUSION

One of the strongest messages of this report is that social perceptions of women and traditional gender norms matter: these perceptions are present in organisations through policies, missions, programs, collegial relationships and external partnerships. Only with significant reflection and review of work policies and practices will transformation of gender inequality be possible. This report underscores the critical role that MonashLink is playing by undertaking organisational research. The Re-Claim Research Project is innovative: it provides recommendations for MonashLink, and as a leading community health service it provides foundational tenets for other community sector organisations who are interested in responding to the prevention of violence against women.

This Re-Claim Research Project provides clear directions for organisations by acknowledging that what affects the employee, affects the employer and what affects the employer, affects the community. Eliminating and preventing violence against women can start with an individual organisation, at the very local level – MonashLink is prioritising this issue.

## APPENDIX 1 - INTERVIEW QUESTIONS FOR FOCUS GROUPS

1. What is your understanding of the following terms
  - Violence against women
  - Gender equality
  - Community safety and well being
2. How did you develop these ideas and understandings?
3. How do you think your organisation understands the current issues on gender and violence? How does your organisation show commitment to preventing violence against women?
4. How is gender equality or violence against women noted in policy documents?
5. How is gender equality or violence against women noted in programs?
6. How is the seriousness of the issue reflected in the allocation of resources to programs?
7. What do you think your organisation does well with regards to gender issues and gender and violence prevention?
8. If you suspected a colleague was experiencing family violence what would you do?
9. Who do you think needs to be engaged in the process of change for violence prevention efforts?
10. Do you think women and men need to be engaged differently in the process of change?
11. Do you have questions for me?

## **APPENDIX 2 – A Sample Of The ASU Family Violence Clause for a local government council.**

### **XX.0 FAMILY VIOLENCE**

#### **XX.1 General Principle**

This Council/shire recognises that employees sometimes face situations of violence or abuse in their personal life that may affect their attendance or performance at work. Therefore, the Council/shire is committed to providing support to staff that experience family violence.

#### **XX.2 Definition of Family Violence**

This Council/shire accepts the definition of Family violence as stipulated in the *Family Violence Protection Act 2008 (Vic)*. And the definition of family violence includes physical, sexual, financial, verbal or emotional abuse by a family member.

#### **XX.3 General Measures**

- (a) Proof of family violence may be required and can be in the form an agreed document issued by the Police Service, a Court, a Doctor, district nurse, maternal and child health care nurse a Family Violence Support Service or Lawyer.
- (b) All personal information concerning family violence will be kept confidential in line with Council/shire Policy and relevant legislation. No information will be kept on an employee's personnel file without their express written permission.
- (c) No adverse action will be taken against an employee if their attendance or performance at work suffers as a result of experiencing family violence.
- (e) The council/shire will identify a contact in Human Resources who will be trained in family violence and privacy issues for example training in family violence risk assessment and risk management. The council/shire will advertise the name of the contact within the Council/shire.
- (f) An employee experiencing family violence may raise the issue with their immediate supervisor or the Human Resources contact. The supervisor may seek advice from Human Resources if the employee chooses not to see the Human Resources contact.
- (g) Where requested by an employee, the Human Resources contact will liaise with the employee's supervisor on the employee's behalf, and will make a recommendation on the most appropriate form of support to provide in accordance with sub clauses 4 and 5.
- (h) The Council/shire will develop guidelines to supplement this clause and which details the appropriate action to be taken in the event that an employee reports family violence.

#### **XX.4 Leave**

- (a) An employee experiencing family violence will have access to 20 days per year of paid special leave for medical appointments, legal proceedings and other activities related to family violence. This leave will be in addition to existing leave entitlements and may be taken as consecutive or single days or as a fraction of a day and can be taken without prior approval.

(b) An employee who supports a person experiencing family violence may take carer's leave to accompany them to court, to hospital, or to mind children.

### **XX.5 Individual Support**

(a) In order to provide support to an employee experiencing family violence and to provide a safe work environment to all employees, the Council/Shire will approve any reasonable request from an employee experiencing family violence for:

- (i) changes to their span of hours or pattern or hours and/or shift patterns;
- (ii) job redesign or changes to duties;
- (iii) relocation to suitable employment within the Council/shire;
- (iv) a change to their telephone number or email address to avoid harassing contact;
- (v) any other appropriate measure including those available under existing provisions for family friendly and flexible work arrangements.

(b) An employee experiencing family violence will be referred to the Employee Assistance Program (EAP) and/or other local resources. The EAP shall include professionals trained specifically in family violence.

An employee that discloses to HR or their supervisor that they are experience family violence will be given a resource pack of information regarding support services.

## **APPENDIX 3 - Male Champions of Change Charter 2011**

From: Australian Human Rights Commission (2011, p34) *Our experiences in elevating the representation of women in leadership- A letter from business leaders*

As Male Champions of Change, we commit to actively advancing gender equality across our business and to acting as public advocates. This includes:

### **Business leadership**

- Building gender equality into the strategy of the company operations, driven by the CEO and leadership team.
- Changing workplace culture and mindset and empowering both women and men to advance gender equality in the company.
- Adopting and implementing employment policies and practices that eliminate gender discrimination in areas such as recruitment, hiring, pay, and promotion.
- Committing to increasing women on our boards, executive committee and line management.

### **Recruitment of talent**

- Recruiting, developing and retaining diverse candidates as a priority.
- Health, safety and freedom from violence
- Prohibiting all forms of violence in the workplace, including verbal, physical, or sexual harassment.

### **Work and family**

- Developing mechanisms to foster balance between work and family life for women and men.

### **Public advocacy**

- Through the Male Champions of Change network, sharing experiences and strategies for advancing gender equality within Australia's corporate sector.
- Creating a catalogue of best practices for achieving gender equality.
- Being spokespersons for the promotion of gender equality, both individually and collectively.

### **Build the CEO Champion network**

- Work together to increase the dialogue among our peers—and create peer pressure—to build our network of CEO Champions, including a 'plus one' strategy for next year's Women's Forum (each CEO to bring one or more of their peers).

## **APPENDIX 4 - GUIDELINES FOR THE DEVELOPMENT OF A *POLICY OR PROGRAM*** **CHECKLIST FOR MONASHLINK**

In the frame of National and State legislation, which obliges organisations to actively combat discrimination against women, this series of questions can act as a reflection and assessment guide for the development of policies, programs and partnerships, to reduce inequalities between women and men. It can be used

- to collect gender specific information on the context where resources are allocated
- to mainstream gender systematically from the very beginning of planning processes of any intervention,
- to accountability reports on gender equality performance and preventing violence against women.

The following areas provided areas of focus and then questions to critically enquire about any policy or program development.

### **Rationale of Project: Promoting gender equality and/or combating discrimination against women as explicit goals of the intervention**

- Is the promotion of gender equality reflected and explained in the objectives, justification or rationale of the policy or program?
- Is combating discrimination against/exclusion of women reflected and explained in the objectives, the justification or rationale of the intervention?

### **Design and Planning: The points refer to gender analysis or gendered assessment of context and stakeholders**

- Were gender issues identified as a part of the planning and design of the policy or program?
- Does the baseline of the policy/program give information about gender inequalities in access to resources, roles, needs, and control over assets?
- Are the data used for the design of the activity disaggregated by sex?

### **Monitoring/Evaluation – the monitoring systems are gender responsive**

- Have output indicators been developed that refer to gender equality and equity?
- Have outcome indicators been established that refer to gender equality and equity?
- Is there a reference to the gender specific information in the baseline that enables the measurement of the outputs / outcomes of the intervention for women and men separately?
- Is gender integrated into the evaluation according to the baseline and indicators?

### **Gender equality organisation compliance**

- Have institutional mechanisms been reviewed to facilitate and monitor implementation of gender equality across all aspects of the organisation?
- Are women's NGOs, community based organisations, gender experts involved in the planning and implementation of the policy or program? Is gender training part of it?
- Does the reporting system incorporate information on the monitoring of gender equality?
- Has a budget been assigned to ensure the implementation of gender-specific components/actions?
- Are there terms of reference and budget for gender equality and preventing of violence against women responsibilities?

## REFERENCES

Australian Human Rights Commission. (2011) *Our experiences in elevating the representation of women in leadership - A letter from business leaders*. This report is an initiative of the Male Champions of Change which is convened by Elizabeth Broderick, Sex Discrimination Commissioner, Australian Human Rights Commission.

Broderick, Elizabeth. (2011) 'The Hidden Business Problem : Domestic Violence', Vincent Fairfax Speaker Series, presentation given on 24/10/2011.

Castelino, Tracy. (2011). *The influence of gender discourses on local government violence prevention efforts*. PhD thesis, Faculty of Architecture, Building and Planning, The University of Melbourne.

Council of Australian Governments (COAG) (2011). *National Plan to Reduce Violence Against Women and their Children*, Commonwealth Government, Canberra.

Equal Opportunity for Women in the Workplace (EOWA) (2011). *Gender Stats at a Glance*. Commonwealth Government of Australia.

Kaufman, Michael. (2003) *The AIM Framework Addressing and Involving Men and Boys To Promote Gender Equality and End Gender Discrimination and Violence*, UNICEF

*MonashLink Annual Report 2009-10* (2009) MonashLink

*MonashLink Strategic Plan 2009-12* (2009) MonashLink

*MonashLink Sick Leave Management Policy and Procedure Sept 2010* (2010) MonashLink

*MonashLink Bullying Sexual Harassment and Unlawful Discrimination Policy and Procedure Mar 2011* (2011) MonashLink

*MonashLink Occupational Health Safety Policy Jan 2011* (2011) MonashLink

*MonashLink Health Promotion Strategic Plan 2009-2012* (2009) MonashLink

*MonashLink Home Visit Outreach Policy and Procedure 2009 (currently under review)* (2009) MonashLink

Moser, Caroline. (2005). *An introduction to gender audit methodology: Its design and implementation in DFID Malawi*. London: Overseas Development Institute.

Office of Women's Policy. (2009). *A Right to Respect: Victoria's Plan to Prevent Violence against Women 2010-2020*. Melbourne: Office of Women's Policy.

Office of Women's Policy. (2010). *A Right to Safety and Justice: Strategic Framework to Guide Continuing Family Violence Reform in Victoria 2010–2020*. Melbourne: Office of Women's Policy.

Pan American Health Organisation. (Eds) Velzeboer, Marijke , Ellsberg, Mary, Clavel Arcas, Carmen & García-Moreno, Claudia (2003). *Violence against women: The health sector responds*. Pan American Health Organisation (PAHO). Washington, D.C.

Pease, Bob. (2008). Engaging men in men's violence prevention: Exploring the tensions, dilemmas and possibilities. *Australian Domestic and Family Violence Clearinghouse* (17), 1-20.

UN-Women (2010) *National Accountability Framework to End Violence against Women: 10-Point Checklist*, UN-Women Headquarters

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

VicHealth, 2007. *Preventing violence before it occurs. A framework and background paper to guide the primary prevention of violence against women in Victoria*. Victorian Health Promotion Foundation, Carlton South

World Health Organisation, (2002) *World report on violence and health: Summary*. Geneva, Switzerland: World Health Organisation.

World Health Organisation (2004) *Handbook for the Documentation of Interpersonal Violence Prevention Programmes*, Department of Injuries & Violence Prevention, WHO, Geneva

### **Additional reading**

Rees. Susan, et al. 'Lifetime Prevalence of Gender-Based Violence in Women and the Relationship with Mental Disorders and Psychosocial Function'. *JAMA*, August 3, 2011; 306(5):513-521

VicHealth, (2005) *A Plan for Action 2005-2007: Promoting Mental Health and Wellbeing*. Melbourne: Victorian Health Promotion Foundation.

VicHealth, (2006) *Two Steps Forward, One Step Back: community attitudes to violence against women*. Melbourne: Victorian Health Promotion Foundation.

VicHealth, (2008) *Respect, responsibility and equality, preventing violence against women program*. Melbourne: Victorian Health Promotion Foundation.

Victoria Police, (2009) *Living free from violence -Upholding the right: Victoria Police Strategy to reduce Violence Against Women and Children 2009-2014*. Melbourne: Victoria Police.

World Health Organisation (2007) *Third milestones of a global campaign for violence prevention report*, WHO, Geneva

World Health Organisation (2009). *Violence Prevention The Evidence: Promoting Gender Equality To Prevent Violence Against Women*, World Health Organisation, Geneva.

World Health Organisation/London School of Hygiene and Tropical Medicine. *Preventing intimate partner and sexual violence against women: taking action and generating evidence*. Geneva, World Health Organisation, 2010.

