

## **Benalla Community Health Service**

# **Mental Health and Wellbeing Prevention of Violence against Women and Children Health Promotion**

## **Collective Impact Report 2013-2017**

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### *Partners*

Benalla Community Health Service is grateful to all partners who have supported the Health Promotion Team:

- Benalla Health and Wellbeing Action Group (incorporating the Benalla Family Violence Prevention Network)
- Benalla Police
- Benalla Rural City Council
- Benalla White Ribbon Supporters
- Central Hume Primary Care Partnership
- Community volunteers
- Tatong Playgroup
- Thoona Playgroup
- Tomorrow Today Foundation
- Waminda Community House
- Women's Health Goulburn North East

We would like to thank Laurie Phillips, Andrew Joyce, Barrie Scott and Helen Haines who shared expert knowledge and experience with us to tailor an evaluation plan to meet the focus of our work.

## Who are we?

Benalla Health's Integrated Health Promotion plan commenced in 2013. Strategies were implemented across Benalla Rural City Council and Mansfield Shire Council.

Mansfield Hospital took over the funding for integrated health promotion and primary health services from Benalla Health in July 2015.

Benalla Health's objectives are:

- To organise and provide health care services in the Benalla district and, in particular, hospital-based services, including regional services and services provided jointly with other agencies in accordance with the Health Services Act, 1988, and all existing or future relevant Acts and Regulations;
- To utilise appropriate physical and personal resources, knowledge and available technologies to promote health and to prevent, treat and alleviate disease, disability, injury and suffering so far as is possible in the prevailing conditions;
- To set and achieve standards consistent with prevailing principles of quality patient care and community health needs;
- To foster continuing improvement in standards through education, research and training.
- To manage and maintain a Community Health Service, for all people, which will provide facilities, personnel, and services to achieve the following aims:
  - promoting health awareness,
  - improving health standards,
  - fostering awareness and prevention of illness and disability,
  - supporting persons in their home environment, and rehabilitation.

## About Benalla Rural City

Benalla Rural City Council is located approximately 180kms north east of Melbourne. The municipality includes the township of Benalla and the communities of Baddaginnie, Devenish, Goorambat, Swanpool, Tatong, Thoona and Winton.



Figure 1- Map - Location of Benalla Rural City Council in Victoria

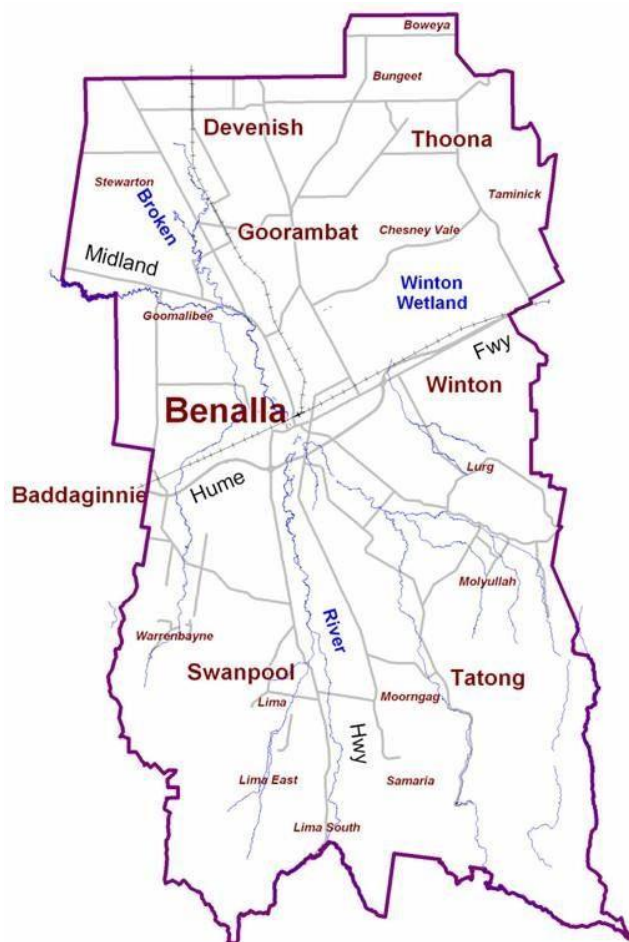


Figure 2 Map – Benalla Rural City Council boundary

### Why is Benalla Health focusing on the Prevention of Violence against Women and Children?

Benalla has a higher than average aged population and has a high level of socio-economic disadvantage. These factors are both risk factors for isolation and mental health. Benalla’s suicide, crime, family incidents and child protection substantiations were all higher than statewide averages. Family fragmentation, dysfunction and child neglect are all risk factors for mental health issues. Those with mental health issues may be subject to discrimination and isolation due to their illness, further contributing to their condition.

The presence of these risk factors has contributed to the selection of relevant interventions for the Benalla community. Interventions were also informed by participation of both agency and community members on the Benalla Health & Wellbeing Group of the Benalla Taskforce, convened to identify and address mental and physical health issues in Benalla Rural City.

Benalla Health commenced work in Family Violence prevention in 2010. There was a steady increase of reports to the Police after this time. The reporting trends showed a brief plateau in 2013-2014 where we wondered if we had reached the “statistical

norm” for our community. This proved not to be the case with a further sharp increase in the subsequent years through to 2016. The Benalla Family Violence Unit at Benalla Police have advised that the most recent increase in reports (32%) was due to an increase in non-physical forms of family violence now being reported to the Police. There was no similar trend when compared with our neighbouring communities of Wangaratta and Shepparton. The Police attribute this difference to the significant efforts by Benalla Health and their partners to educate the community about Family Violence and support and empower victims to report incidents to the Police.

### Comparisons 2011 to 2016

A comparison of the status of Benalla Rural City residents from 2011 until 2016 ([www.censusdata.abs.gov.au](http://www.censusdata.abs.gov.au), [www.communityindicators.net.au](http://www.communityindicators.net.au), [www.aedc.gov.au](http://www.aedc.gov.au))

	2011	2016
Population	13647	13861
Median age	46	49
% population over 65 years	21.5% (Victorian average 14.2%)	26% (Victorian average 15.6%)
Average weekly household income	\$827 (Victorian average \$1216)	\$936 (Victorian average \$1419)
Family violence incidents reported to Police	4 <sup>th</sup> highest number of reports out of 79 LGAs	5 <sup>th</sup> highest number of reports out of 79 LGAs
Child protection substantiations	10.5 per 1000 (Victorian average 4.4 per 1000)	23.2 per 1000 (Victorian average 11.4)
Socially vulnerable children	18.5% (Victorian average 8.1%)	17.2% (Victorian average 8.7%)
Emotionally vulnerable children	17.4% (Victorian average 7.2%)	18.9% (Victorian average 8.1%)

# Collective Impact

## 1. Leadership

Benalla Health is working toward the *Collective Impact* model.

Collective Impact is a framework to tackle deeply entrenched and complex social problems. It is an innovative and structured approach to making collaboration work across government, business, philanthropy, non-profit organisations and citizens to achieve significant and lasting social change.

John Kania & Mark Kramer first wrote about collective impact in the Stanford Social Innovation Review in 2011 and identified five key elements:



1. All participants have a **common agenda** for change including a shared understanding of the problem and a joint approach to solving it through agreed upon actions.
2. Collecting data and **measuring results consistently** across all the participants ensures shared measurement for alignment and accountability.
3. A plan of action that outlines and coordinates **mutually reinforcing activities** for each participant.
4. Open and **continuous communication** is needed across the many players to build trust, assure mutual objectives, and create common motivation.
5. A **backbone organisation(s)** with staff and specific set of skills to serve the entire initiative and coordinate participating organisations and agencies.  
([www.collaborationforimpact.org](http://www.collaborationforimpact.org))

Benalla Health has demonstrated their work within a Collective Impact model through the following Critical Success Factors:

## 2. Inspiring Leadership

This has been provided through the leadership of the Director Community Health who is a White Ribbon Ambassador and Chair of the Benalla Family Violence Prevention Network and Chair of the Victorian White Ribbon Committee and NE



*Photo 1 – staff from Smith Dosser Accountants with their White Ribbon Supporter certificate*

Victoria White Ribbon Committee.

His leadership has provided the drive and catalyst for community engagement, participation and cultural change. The Director has presented to numerous groups and has engaged individuals and workplaces to improve their awareness of family violence and their own capacity to impact behaviour change.

This leadership has extended through the Benalla Family Violence Prevention Network which includes over 18 separate

agencies (as listed in Appendix 2 - P.59).

## 3. Shared Vision

From 2010 the Benalla Family Violence Prevention Network have articulated a clear vision which has been taken up by the local community. In simple terms this is:

1. Skills Development
2. Empowering and Supporting victims and at Risk Groups
3. Educating our Community;
4. Supporting Community Action;
5. Developing Community Leadership;

When the 2013-2017 Health Promotion Plan was developed, these primary prevention strategies and themes were incorporated into the plan.

## 4. Long term thinking

Whilst the current Health Promotion plan is written over a four year period (2013/2017), the actual strategies and approaches are long term, looking at and providing cultural change in the community. This long term approach is built around strategies aimed at parents of young children, fathers, school aged children and young people forming relationships and families.



## **5. Finding & developing indicators that will measure change**

Through the life of the plan there have been a number of indicators that have been identified. Some of the measures are quantitative, demographic but also include qualitative measures. The results listed in point five is one such indicator. Others include number of *Benalla White Ribbon Day Supporter* organisations. Number of people impacted within those organisations. Number of education sessions held, number of people in attendance and pre/post indicators of increased knowledge in family violence related issues. Number of White Ribbon events held throughout the year as well as the maquis event on or around White Ribbon Day. Increases in number of people, business, organisations, agencies and community groups attending these events and numbers of individuals attending those events. Number of people who have taken the oath each year and cumulatively over seven years.

These measures require further refinement and improvement. Developing / expanding our relationship with Melbourne University or Deakin University would assist in this area.

## **6. Capacity for shared measurement**

Initial work in this area has been achieved as shown in the *Measuring Collective Impact* section. Developing / expanding our relationship with Melbourne University or Deakin University would further enhance the scope and quality of shared measurement in the community.

## **7. Discipline – stay focused on outcomes**

From 2010 to the present, through the leadership of the Director Community Health Benalla Health and the partners in the Benalla Family Violence Prevention Network have remained steadfast in its commitment to reducing / preventing family violence in our community.

## **8. Acceptance**

From 2010, the commitment and persistence to the task has resulted in growing and measureable community engagement, acceptance and involvement in the strategies within the plan.

## **9. Professional Communication**

High level communication has been established between partner agencies, within Benalla Health and to the community as whole. This has been undertaken through a variety of means:

- Major events
- Group sessions
- Written
  - Email

- Newsletters
- Flyers
- Online
  - Social Media (Facebook; Twitter)
  - Websites
  - YouTube
- Media
  - Benalla Ensign
  - Wangaratta Chronicle
  - ABC Local Radio
  - Southern Cross Weeknights
  - WINTV

## **10. Backbone organisation**

Benalla Health has provided the backbone for this work going right back to the commencement of the Family Violence Prevention initiatives in 2010.

## **Primary Preventative Strategies**

The strategies within this plan aim to increase protective factors of individuals, families and communities and will continue to focus on:

### **1. Skills Development**

To enhance and support the development of:

- parenting skills with an aim to increase respectful relationships between parent-parent and parent-child/children;
- respectful relationships in schools;
- men as positive role models and mentors to young men growing up;

### **2. Empowering and Supporting victims and at Risk Groups**

- empowering victims to be able to deal with family violence in their own circumstance;
- resilience and empowerment of girls and women at risk of family violence;

### **3. Educating our Community:**

- what is family violence;
- what are the underlying causes of family violence;
- how to support victims of family violence and where to refer and seek assistance for those experiencing family violence;
- how bystanders can take action when witnessing family violence in the community;

#### 4. Support community action:

- White Ribbon Day and other public awareness activities;
- White Ribbon “Breaking the Silence” programs in local schools;
- Community groups, agencies and workplaces signing up as Benalla White Ribbon Day Supporters and holding their own White Ribbon events during the year;

#### 5. Developing Community Leadership



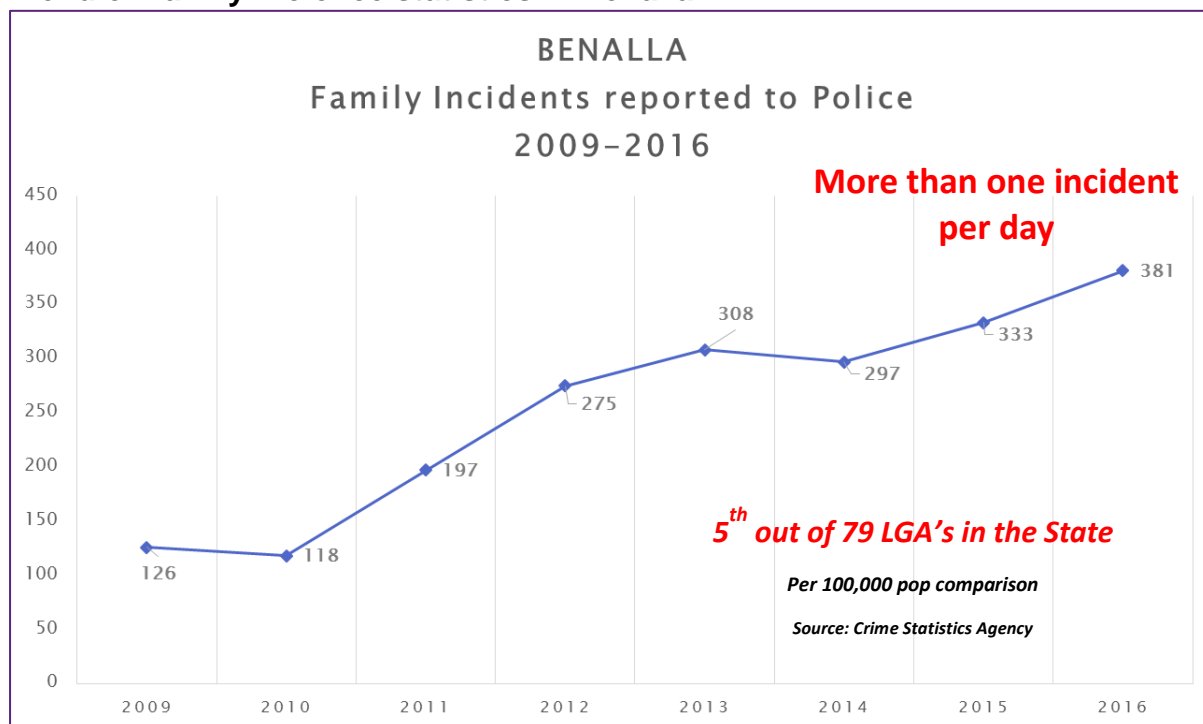
Following on from the leadership provided by the Director Community Health and supported by the members of the Benalla Family Violence Prevention Network, the plan has developed a community leadership model around the “Benalla White Ribbon Day Supporters” program.

Current membership includes the following local agencies, community groups, businesses and sporting clubs (see Appendix 1 for the full list).

See below for a full list of “Community Champions” who have emerged as leaders within the community to promote the *Family Violence Prevention* message.

## Measuring Collective Impact in Benalla

### Trend of Family Violence statistics in Benalla



Benalla Health commenced work in Family Violence prevention in 2010. There is a steady increase of reports to the Police after this time. Reporting has plateaued in 2013-2015 but has increased in 2015/2016 by 32%. The Benalla Family Violence Unit at Benalla Police have advised that the majority of this increased reporting was due to an increase in *non-physical* forms of family violence now being reported to the Police. This is a strong indication of the effectiveness of the education campaign over the long term where the local community understands that family violence is more than physical. The education that has been undertaken includes:

- The local community wide White Ribbon campaign
- Education and encouragement to report matters of FV
- Family Violence Code of Practice
- Increase in funding to support programs
- Creation of specialist units (i.e.; FVU) to deal with recidivism (both Affected Family Member (AFM) and Respondent)
- Increased support from Court (penalties)
- Increased support from other agencies and access to same
- Increase in public confidence that matters of FV will be investigated thoroughly and appropriately dealt with through the judicial system

(See Measuring Collective Impact in Benalla)

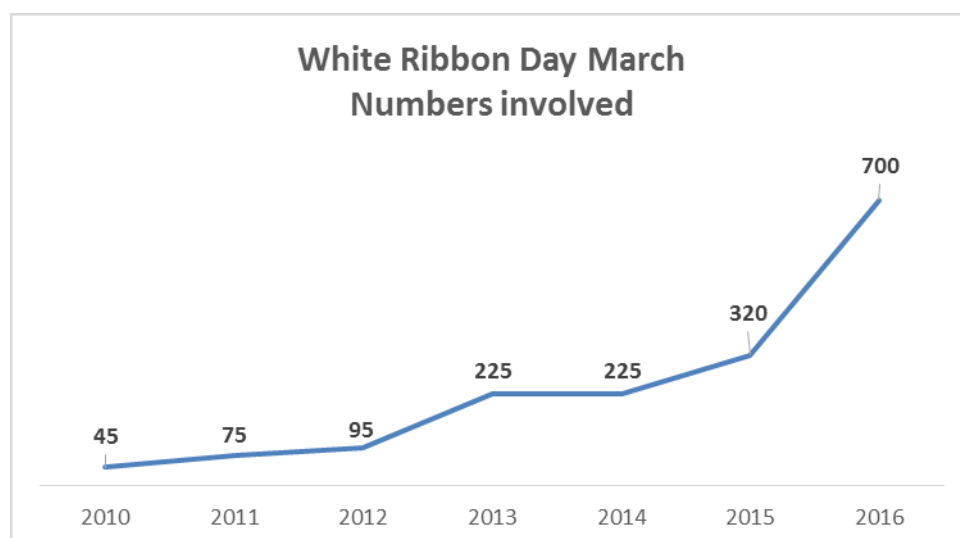
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## Community Leadership

### Community Champions

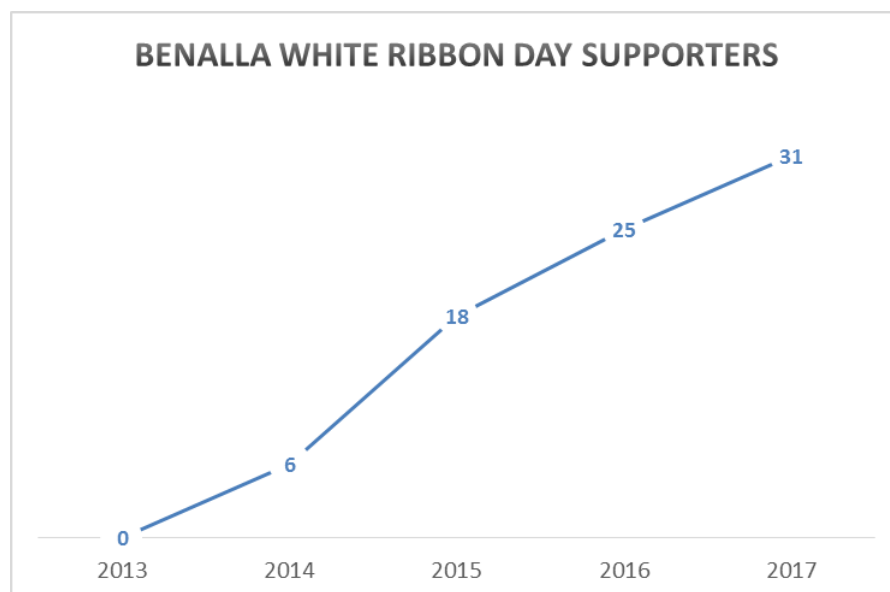
Agency / Business / Group	Position	Name	Year Commenced
Benalla Health	Director Community Health	Neil Stott	2009
Benalla Rural City	Manager Community Services	Deb Randich	2010
Benalla Health	Community Health Staff	Various	2010
Benalla Rural City	Community Services Staff	Various	2010
Benalla Health	Executive Leadership	CEO, DCS, Business Manager	2010
Benalla Rural City	Leadership	Various	2011
FV Prevention Network	Various	Various	2011
Benalla Police	Family Violence Liaison Officers	Sergeant Harry Verbaken Sergeant Di Smith Various Others	2011
Benalla P-12	Senior Leaders	Barb O'Brien Paul Challis	2011 2012
FCJ College	Senior Leaders	Joe Mount David Leslie Joanne Rock	2012 2012 2016
Department of Environment, Land, Water and Planning	Team Leader Finance Officer	David Donehue Susan Pinkerton	2015
GoTAFE	Student	Janet Symes	2015
Georgina's Restaurant	Co-owner	Jade Kirk	2016

## Community Involvement



## **Business, agencies, community group involvement**

### *Benalla White Ribbon Day Supporters Program*



### *Events Held*

<b>Program</b>	<b>No. of events</b>	<b>No. of participants</b>
Benalla White Ribbon Supporters' Program	31	3153
Brief Mental Health Awareness Program	7	70
Bringing Up Great Kids	5	39
Family Violence Forum	2	185
International Women's Day	4	533
Live 4 Life	3	149
Parent-Child Mother Goose	98	69*
Parents Early Education Partnership	192	78*
Real Men Make Great Dads	4	24
Rock and Water for girls and women	132	34
Rosie Batty Forum	1	165
Vulnerable Families Literature Review	3	35
White Ribbon Day	4	1470
Youth Mental Health First Aid	2	36
Youth Mental Health Forum	2	183
<b>Totals</b>	<b>490</b>	<b>6023</b>

\*Families

## Health Promotion Implementation and Evaluation

The goal of Benalla Community Health Service's Health Promotion Plan has been

“To promote positive mental health in the Benalla community by creating environments that prevent violence against women and children”

To meet this goal, the organisation set 3 objectives:

Objective 1 – Increase parental skills and competence through increased participation of vulnerable families in a range of relevant programs that promote equal and respectful relationships by August 2017.

Objective 2 – Increase knowledge and awareness about the prevention of violence against women and their children, including where to obtain support services by August 2017

Objective 3 – Promote community awareness and action to prevent violence against women and children and to increase gender equity and respectful relationships by August 2017.

Primary Prevention activities undertaken by Benalla Community Health Service will be reported on under 3 headings:

- Skill Development – parental skills and supporting victims
- Community Education
- Community Action

The activities that were delivered are listed in the table below.

Skills Development	Educating our Community	Community Action
Real Men Make Great Dads	Youth Mental Health First Aid	White Ribbon Day
Parent-Child Mother Goose	Youth Mental Health Forum	Benalla White Ribbon Supporters' Program
Bringing Up Great Kids	Family Violence Forum	White Ribbon Rounds (football / netball)
Parents Early Education Partnership	Brief Mental Health Awareness Program	Fund raising activities
Vulnerable Families Literature Review	Live 4 Life	
Rock and Water for girls and women	International Women's Day	

Health promotion activity was evaluated using a variety of methods:

- Pre and post program evaluation measures. The tools used were a combination of validated assessments and questions developed specifically to relate to our goal and objectives.
- 3 month post program phone interviews. These were developed by Benalla Health staff, based on questions asked in the original post-program surveys and those developed specifically to relate to our goal and objectives.
- Collation of incidental responses regarding the programs. These add to the narrative of the impact of attending program sessions.
- Follow up surveys with program participants up to 24 months post participation. The questions to be asked were devised with the assistance of the University of Melbourne.



## Part 1 - Skills Development

### *Real Men Make Great Dads*



As there were no parenting programs were being offered specifically for fathers in Benalla, Benalla Health chose to implement Real Men Make Great Dads (RMMGD). This evidence based program is facilitated by men, for men and has been run successfully in the Goulburn Valley area for several years. This area has similar demographics to Benalla.

Male family violence is a barrier to equal and respectful relationships. Every act of violent and controlling behaviour is an act of disrespect. Men's use of violence against family members breaks trust and communication, and harms relationships. Male family violence stops other issues being dealt with. Issues or problems in relationships can only be addressed when there is trust and positive communication. As such, men who use violence need to change their behaviour before they can address any problems in their relationship (No To Violence, 2005)

The 6 RMMGD sessions allow participants to understand their child as they grow, discuss their relationship with their child, discuss their relationship with their child's mother, learn how to deal with behavioural issues and improve their communication with their child.

The program was offered 6 times and ran on 4 occasions (2 programs cancelled due to insufficient numbers). 24 fathers completed the program; 17 were considered vulnerable due to being single parents or being mandated to complete the program by the Department of Health and Human Services.

Three months after the completion of the program, participants were invited to complete a follow up phone survey. The following results relate directly to the objective "increase parental skills and competence through increased participation of vulnerable families in a range of programs that promote equal and respectful relationships":

- 70% reported having a better understanding of their child's behaviour
- 50% reported that the way they discipline their child had changed
- 50% reported experiencing less stress when managing day to day issues with their child
- 60% reported improved communication skills between themselves and their child's mother

An ongoing issue in running Real Men Make Great Dads has been sourcing a male facilitator to deliver the program. The program manual suggests there should be a facilitator and co-facilitator, at least one should be a male.

## **Evaluation Results**

### **What is the most important thing you learnt?**

- To not give hollow threats. Only threaten punishment if you can go through with it.
- Try not to yell – explain the problem/situation
- How to deal with situations a lot better than before in regards to my children playing up and being upset
- Dealing with my kids better
- How to approach challenging situations thoughtfully
- How to access good resources and get further support (e.g.) [raisingchildren.com.au](http://raisingchildren.com.au)
- Communication

## **Parent-Child Mother Goose (P-CMG)**



Benalla Health chose the evidence based P-CMG program to offer an opportunity to increase parent-child bonding. The Benalla Township ran several playgroups each week. These playgroups encouraged free and structured play between children and parents and children and their same aged peers. There were no structured parenting programs engaging both parent and child being offered in Benalla when P-CMG commenced.

In a study by Scharfe (2011), mothers attending P-CMG had higher levels of parenting efficacy and were more likely to judge their children as being secure than those in a control group. Terrett et al (2013) found that children attending P-CMG improved more in their language abilities and parents had a reduction in perception of child demandingness than those in a control group.

P-CMG targets the parents and allows parents to share the joy of songs, rhymes and stories with their child. Material is chosen to assist families in soothing children, establishing behavioural routines and teaching specific language concepts. The program was delivered in partnership with staff from Benalla Rural City Council's Family and Children's Service team.

Benalla Health staff developed song, rhyme and story resources for use in the program. Copies of these were offered to parents to enable them to implement the taught skills at home.

Between September 2013 – December 2014, 98 sessions ran across Benalla Rural City (Benalla Township, Tatong, Thoona). Up to 2 sessions were run in Benalla each week during school terms. Sixty nine (69) different families attended the program. Comments made about the impact of the program on families (gathered at the end of each program year):

- "Good confidence builder for children and for me"
- "Social time with children"
- "I started coming at 6 months - we used the skills to settle my child when she was a baby. We now come to the preschool group and I see this as a regular time aside with my child. I know there is that 1 hour a week available without distraction for us to do something together."
- "It's good to see how other parents interact with their kids"
- "It's a supportive environment"
- "My child takes away songs and prompts me to sing them at home"
- "I have more tools to use"
- "I listen more to my child"
- "Children and parents get to spend quality time together"

- “I use the songs at home for distraction, parenting, and getting things done”
- “As soon as I start singing, it distracts my child from arguing with me”
- “The skills taught help me interact and play with my child
- "We have been blown away by the words and songs that our daughter shares. Mother Goose has been a wonderful experience for all of us. At only 2 years old, our daughter has benefited significantly from the program. We will continue to come with all of our future children! Thank you!"

The comments made by participants reflect those reported in the above studies.

## **Parents Early Education Partnership (PEEP)**



In 2012, Benalla was engaged in the Advancing Country Towns project. This project investigated appropriate programs for disadvantaged communities to adopt to reach their most vulnerable citizens. Parents Early Education Partnership (PEEP) was identified by the Tomorrow Today Foundation and the Department of Early Education and Childhood Development as an ideal program for Benalla. The Tomorrow Today Foundation and Benalla Rural City Council were assisted by the Advancing Country Towns initiative to visit the UK city of Oxford, where PEEP was developed. UK trainers then came to Benalla to teach local providers.

PEEP provided a new venue for parents to seek support for themselves and their child's/children's development. This format proved to be extremely popular as it provided parent education using adult learning principles. P-CMG did not offer this as part of the program.

Many parents who were attending P-CMG were attracted to PEEP. This resulted in:

- Parents asking why a regular chat time with selected topics couldn't become part of P-CMG.
- A large decrease in attendances at P-CMG.

Reflecting on the above, P-CMG was ceased in Benalla and the Benalla Health employed P-CMG facilitators were upskilled to co-facilitate PEEP.

PEEP has been evaluated by five independent research studies by the Universities of Oxford and Warwick. These show that PEEP:

- successfully reaches isolated families and engages them in their children's learning
- helps parents become more aware of their children's development and how to foster it
- helps children develop good foundations for literacy and strong self-esteem
- enables practitioners from a wide range of professions develop new skills and fresh approaches to unlock parents' potential rather than focus on their problems. ([www.peeple.org.uk](http://www.peeple.org.uk), 2017)

PEEP is broken up into two sections. The first section involves parents and children together in play, rhymes, songs and reading. The children are then taken into a separate room with child carers while a parent education session is offered.

The PEEP facilitators have created a suite of lesson plans that cover a range of topics such as setting boundaries with children, the importance of music in development, encouraging literacy/numeracy development and family violence. These lesson plans are scripted and designed to be picked up by any trained PEEP facilitator to implement. This is an invaluable resource for running the program into the future.

Since the beginning of 2015, Benalla Health staff co-facilitated 192 PEEP sessions with staff from the Tomorrow Today Foundation. 78 different families and 128 different children have attended these sessions. 28% of these families are considered vulnerable as they are experiencing 2 or more of these features – single parent, parent under 25, self-identified parenting issues, self-identified social isolation, history of mental health issues in the family, low formal education of one or both parents (year 9 or lower), living in public housing. Utilising the Family Assessment Measures (developed by the University of Melbourne in partnership with the Tomorrow Today Foundation), the following impact measures have been reported that relate to the objective of improved parenting skills and respectful relationships:

- improvement in their engagement with their child (7% significant improvement, 67% some increase)
- improvement in their parenting confidence (19% significant improvement, 47% some improvement)
- improvement in their ability to manage their child's behaviour (10% significant improvement, 52% some improvement)
- improvement in supporting their child's independent play (18% significant improvement, 37% some improvement)
- positively manages child's behaviour – 17% showed significant improvement, 28% showed some improvement



Photo 2 – song time in the PEEP room

## ***Bringing Up Great Kids (BUGK)***



Benalla Health selected BUGK to implement with vulnerable families in our community. The program was chosen due to its strong evidence base and its focus on respectful relationships.

Hunter and Meredith (2014) evaluated the effectiveness of the Bringing Up Great Kids program. Participants reported having a greater awareness of how their upbringing impacted on their responses and behaviours towards their children. Parents reported positive changes in their lives such as less conflict and greater calmness in their homes and more positive interactions with their children.

This 6 week group parenting program encourages parents to reflect on their role as a parent and teaches the use of mindfulness to help manage the challenges of their role. No other short term parenting programs were offered for this cohort in Benalla during the duration of this plan.

Six programs were offered, from October 2014 until October 2017, with five being completed (one cancelled due to lack of registrations). 39 parents attended the program and 28 were able to be followed up 3 months post program (72% of participants).

- 50% of participants reported they are working hard to improve communication between themselves and their partner and themselves and their child/children.
- 79% of participants reported their household is calmer
- 21% reported they don't yell at each other as much as before attending the program

The results achieved in the programs run by Benalla Health staff, in partnership with Benalla Rural City Council's Family and Children's Service team, indicates an improvement in family dynamics for the participants, which reflects the results from the research by Hunter and Meredith (2014).

## ***Vulnerable Families Literature Review***

The overall aim of this research project is to develop a better understanding of the experience and complex needs of vulnerable families who live in Benalla Rural City (BRC). In the experience of staff at Benalla Community Health Service, these families are often difficult to engage and can be resistant to change. In June 2014, the meeting of the Benalla Community Health, Health Promotion Committee raised these issues:

### **1. Increased referrals to the Counselling/Social Work Team**

Most of these children are at Primary School, are males, have a history of violent physical and verbal behaviours, and come from vulnerable families.

Counselling/Social work interventions are focussed on building resilience in the child, attempting to change unacceptable behaviour and modifying parenting practices.

### **2. Poor recruitment to traditional parenting programs**

Although programs such as Bringing up Great Kids (BUGK) and Rock and Water for Women were widely promoted, recruitment of participants for these programs was low. A Positive Parenting Program- Standard and Enhanced Group Behavioural Family Interventions (Triple-P) was offered to BRC community but there were no recruits.

The Vulnerable Families Literature Review research project considered the best evidence based practice for the delivery of Parenting programs and other community training for disadvantaged communities. The literature review found that most of the effective programs were home-based. All effective treatments were delivered by professionals at the individual level to parents, families or parent-child dyads. Generally, effective programs also involved some delivery to groups.

The results of the review were presented to the Benalla Health and Wellbeing Action Group, Benalla Early Years Network and Benalla Community Health Service's internal health promotion group.

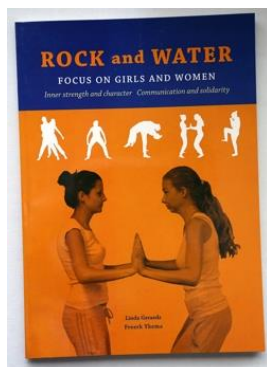
Participants in the presentations made positive comments on how the information could assist forward planning for programs to engage Benalla families. See Appendix 3 for a full listing of comments.

The Tomorrow Today Foundation and Benalla Rural City Council Family Services team are the key service providers for families in Benalla. They have been able to implement the findings of this research and have delivered elements of PEEP, Positive Parenting and Bringing Up Great Kids within the homes of vulnerable families. The delivery of these skills has been on a 1:1 basis (parent and family support worker). This has enabled all Benalla parents to receive access to parenting support in the home rather than a health promotion group setting.



## Part 2 - Empowering and Supporting victims and at Risk Groups

### *Rock and Water for Girls and Women*



The Rock & Water is an evidence based program developed in the Netherlands. It is designed to work with vulnerable women who are being exposed to or are at risk of exposure to physical and/or verbal violence. Benalla Health chose to offer this program to this population group in our community.

The Rock & Water program contributes to the development of positive social skills, more effective strategies in coping with bullying behaviour, as well as more self-control and confidence.

Participants have been shown to have improved introspection skills and this is linked to a decrease in social problems (Ykema, 2012).

The Rock and Water program teaches basic self-defence skills and assertive communication skills. Participants are encouraged to link the physical activities to their emotions and thoughts. There is constant reflection on how our body/mind feels and how the activity can be used in the 'real world'. The development of these skills can better equip women to deal with challenging life situations, physical and verbal (Ykema, 2012).

Several Benalla gyms have offered self-defence classes for women during the last 2 years of this plan. Participants are required to pay to attend and the classes run for a maximum of 4 weeks. The self-defence classes at local gyms offer training in physical skills. There is minimal focus on teaching assertive communication skills and the delivery of information regarding where to seek support. The Rock and Water program is free to attend and runs for 10 weeks with activities gradually increasing in difficulty. Benalla Health has created a set of 10 lesson plans that script each activity and give the rationale for their instruction.

Since September 2013, 132 Rock and Water classes have been offered (30 sessions per year), during the day and the evening, resulting in 34 different individuals participants. Ten of these sessions were offered at Benalla P-12 College to focus on girls in years 10-12.

- 75% of participants live in the most disadvantaged areas of Benalla.
- 70% of participants had experienced family violence.
- 65% had experienced physical violence in their relationship
- 80% had experienced verbal violence in their relationship
- 20% had experienced financial abuse

- 35% had experienced social isolation due to their partner not allowing them to see family and/or friends

The focus Rock and Water was to empower individuals experiencing violence.

### **Individual impacts of the Rock and Water program**

Individual participants learned a range of protective behaviours through increased self-confidence, self-control and more skills to cope in confronting situations.

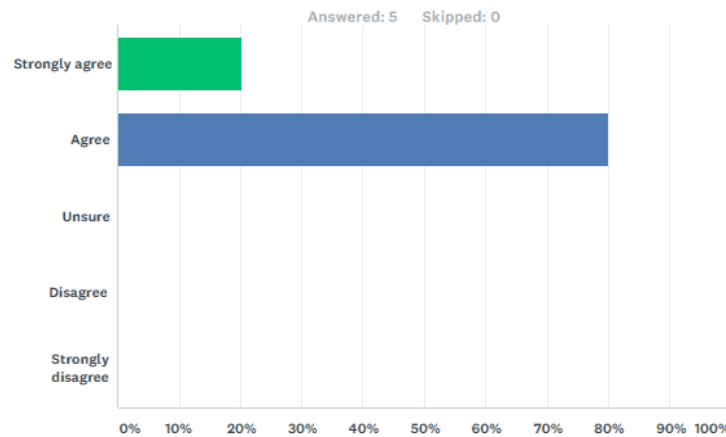
Participants report the following impacts:

- “These are skills we can use straight away”
- “I feel more confident in my body”
- “I feel more confident communicating with people”
- “It is making me more aware of how I come across to other people”
- “I am now aware that I am not the only one who feels like this and that we can work together to find our voice”
- “I have opened up a lot more, and shown an improvement in my self-confidence. I second guess myself a lot less and answer the door and telephone call with a calm and controlled manner (I used to panic and avoid it)”
- “I am more active with my daughter, taking her out shopping and riding her bike. Before starting Rock and Water, this type of activity with her was stressful and confronting; a big challenge for me.”
- “I wish I had have known how to use my voice to take control. I feel great holding my head up and using eye contact and strong body language to let people know I won’t be stepped on”.
- “There was an incident in my office where a worker and a client were engaged in a heated conversation. I used to explode verbally in this situation or leave the room and burst into tears. In this situation, I took several deep breaths and I asked the 2 parties to move to another more private area to sort out their disagreement. There is no way I could have done that before doing Rock and Water”.
- “The program gave me confidence to walk into the Police station and apply for an AVO against my ex-partner”.

Twenty participants who engaged in the community program were asked to comment on the long term impacts of the Rock and Water program. Five participants returned the mailed out survey (25% of participants) and 3 were returned “no longer at this address” (15% of participants).

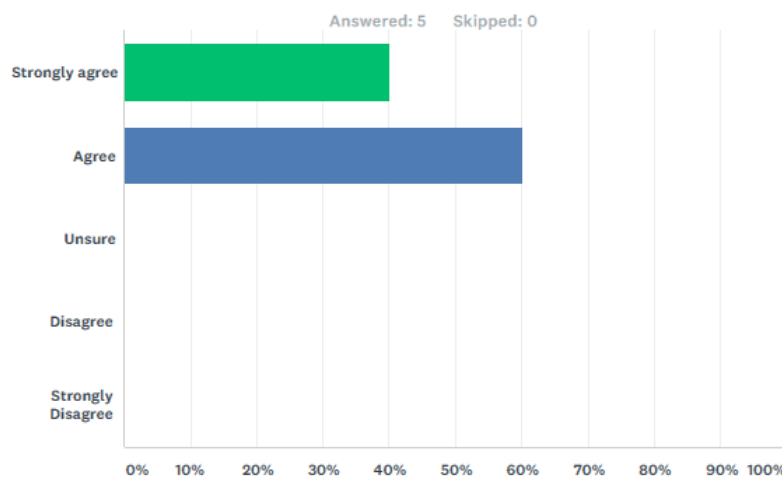
Eighty percent (80%) of participants agreed the Rock and Water training increased their awareness of the messages they send out through their body language.

All participants all agreed (60%) or strongly agreed (40%) completing the Rock and

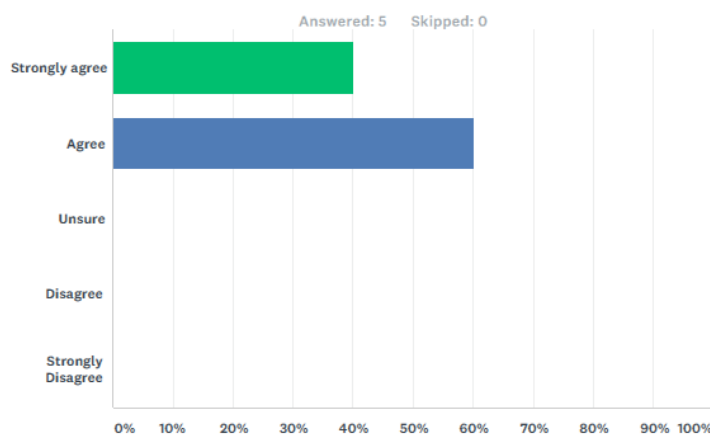


Water program gave them more confidence to cope with challenging situations

All participants agreed (60%) or strongly agreed (40%) they were more aware of the



impacts of family violence on people's mental health after completing the Rock and Water program



## **Group impacts of the Rock and Water program**

Participants in the Rock and Water program have developed strong social connections with each other. Of the 34 participants, only 2 could genuinely say they knew another person in the group well. Further protective behaviours was evident through this increased social connection through:

- Them completing barista and computing courses together (4 participants from the same group).
- Setting up their own fitness group. Each Monday, 5 participants meet at one person's home to complete weights and practise their Rock and Water activities. This was initiated by the women, not the program facilitator.
- While the program facilitator took long service leave, a program participant offered to follow structured lesson plans to continue the momentum created by the weekly classes.
- Meeting for 'coffee' before or after the weekly program.
- Offering to child mind each other's children.
- Connecting via Facebook.

## **Qualitative stories**

### *Participant A*

Stated she went to the ANZAC Day march and saw her ex-partner from whom she had recently separated. She utilised centred and grounded steps to walk past him, head up and not making eye contact with him. He did not approach or bother her, which he would normally do if she did not pay attention to him. She felt very proud of this achievement. Participant A put the assertive communication skills taught in the program into practice. She stated that "the program gave me confidence to walk into the Police station and apply for an AVO against my ex-partner". She linked in with the Centre Against Violence service available at Benalla Community Health Service. Participant A sought new housing for herself and her daughter and has since moved out of Benalla.

### *Participant B*

Had been exposed to verbal and physical violence in the family home. In January 2016, she commenced a new job working with people seeking social support and housing. Participant B felt threatened by the verbal violence and threats used by the clientele and this could result in her becoming verbally aggressive toward clients or bursting into tears. Her manager recommended that she attended the Rock and Water program. Participant B was very challenged by the activities where she had to practice being verbally assertive. Initially, she struggled to hold eye contact with other participants and physically shook with fear. As the program progressed, participant B became more confident in her ability to voice her disapproval and stand up for her rights in the verbal confrontation tasks. She reported "there was an

incident in my office where a worker and a client were engaged in a heated conversation. I used to explode verbally in this situation or leave the room and burst into tears. In this situation, I took several deep breaths and I asked the 2 parties to move to another more private area to sort out their disagreement. There is no way I could have done that before doing Rock and Water”.

### *Participant C*

Had been exposed to verbal and physical violence in the family home. She felt particularly challenged by the physical defence activities in the program. Participant C gained employment delivering the Census paperwork to homes in some of the most vulnerable areas of Benalla. Census volunteers are given limited training regarding dealing with aggressive households and are advised to avoid going to the front door of homes where you “don’t feel right”. Participant C could see people were inside a house on her visit and approached the front door. Nobody answered so she turned to leave. As she was walking down the front stairs, a male grabbed her on the wrist. She used a release learnt in Rock and Water and looked at the male in the eye and firmly said “no”. Participant C was able to confidently walk away from the situation and felt incredibly empowered that she was able to put the skills learnt into practice in a real life confrontation.

## Part 3 - Educating Our Community



### ***Youth Mental Health First Aid (YMHFA)***

YMHFA teaches adults how to assist adolescents who are developing a mental health problem or in a mental health crisis. Course participants learn about adolescent development, the signs and symptoms of the common and disabling mental health problems in young people, where and how to get help when a young person is developing a mental illness, what sort of help has been shown by research to be effective, and how to provide first aid in a crisis situation. YMHFA is an evidence based program. Evaluation by questionnaires pre- and post-training and at 6 months follow-up found that the training increased teachers' knowledge, changed beliefs about treatment to be more like those of mental health professionals, reduced some aspects of stigma, and increased confidence in providing help to students and colleagues. There was an indirect effect on students, who reported receiving more mental health information from school staff. Most of the changes found were sustained 6 months after training (Jorm et al, 2010).

YMHFA was offered in 2013, when Benalla Health and Mansfield Community Health were funded to deliver the same Integrated Health Promotion Plan. In the last 2 years of this plan, YMHFA was offered to Benalla residents by Integrated Primary Mental Health Services.

The Benalla Mental Health Directory, a list of contact details of local mental health services, was developed as a resource to provide to training participants.

In Mansfield, 18 community members attended made up of community services students, health care professionals and general community members.

In response to a suicide at a local football club, YMHFA was offered in Benalla with 18 people attending. These attendees were involved in sporting clubs, youth mentoring and emergency management.

21 participants from the Mansfield and Benalla Youth MHFA courses were contacted by phone to determine 3-6 months post course regarding how they were implementing their learnings.

- 10 participants had used the information to support another person (48%)
- 8 had used the information to refer a person to an appropriate mental health service (38%)
- 8 had used the information to support a socially isolated/disadvantaged person (38%)
- 2 had made a referral due to family violence reasons (10%)
- 12 participants had used the Mental Health Directory (57%). This directory was compiled by Benalla Health and lists names and contact details of local mental health services

General comments from Youth MHFA course participants:

- Very useful, made me feel I could talk and listen and offer suggestions
- Very good, I felt prepared and ok to give them some information
- I'm happy I was able to help an elderly relative who has now been to GP is on medication
- Helped me with what to say to young people and feeling generally comfortable to "check in" with them, and that they were OK

Direct links can be made between YMHFA and Benalla Health's objective - Increase knowledge and awareness about the prevention of violence against women and their children, including where to obtain support services.

## Youth Mental Health Forum

Mental health literacy in youth is a key to promoting early detection and treatment of mental health problems. This then impacts on long term outcomes (Wright et al, 2006).

The focus of the Forum is to promote the mental health and wellbeing of young people within our community by inviting Year 9 & 10 students to come together in a supported environment. The aims are to reduce stigma associated with mental health issues through practical and engaging performance, group discussion, information sessions and Q&A sessions. The students are supported to develop strategies for promoting MH and wellbeing within their schools and to plan future events and projects around youth mental health and wellbeing.

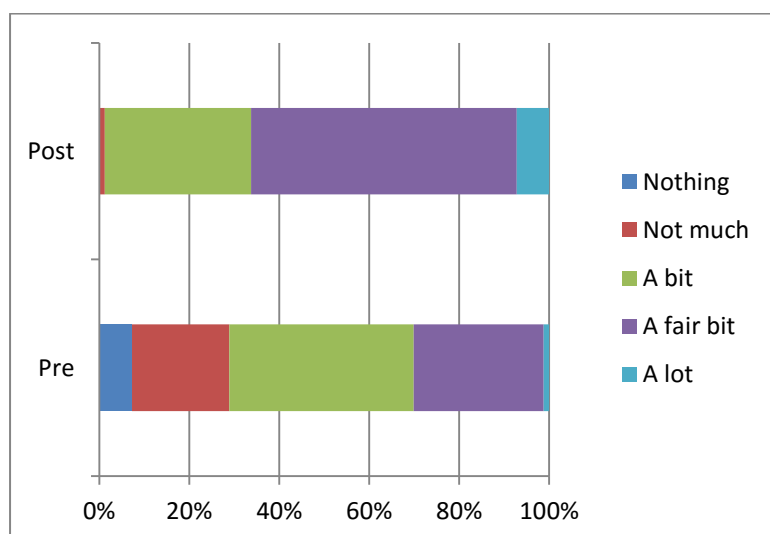
Until the forum was offered, there had not been an opportunity for Benalla's youth to gather together to discuss mental health and receive up to date information about diagnosis and treatment options.

In 2014, 100 year 9 and 10 students from Benalla P-12 College and FCJ College attended the forum at BPACC. The forum presented in a lecture and workshop format. Immediately after the forum there was a:

- 54% increase in participants knowledge of mental health
- 13% increase in participants confidence to talk about mental health
- 63% increase in participants' knowledge of where to get help

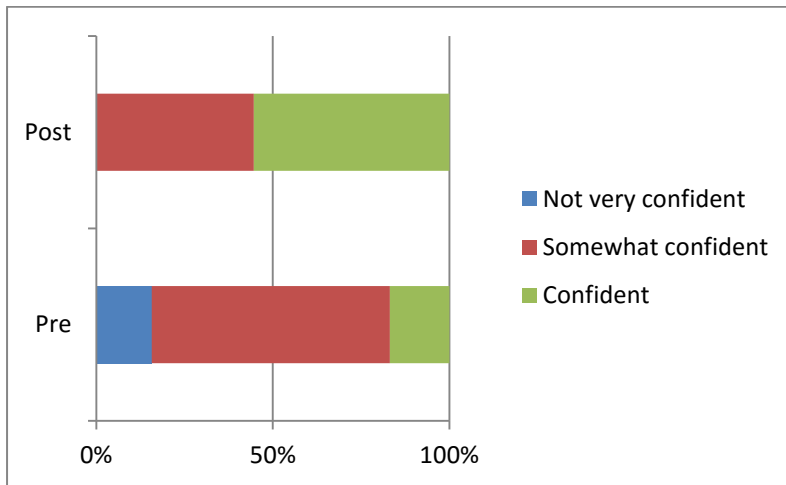
In 2015, 83 year 9 and 10 students from Benalla P-12 College, FCJ College and Benalla Flexible Learning Centre attended the forum at BPACC. The forum was presented in a workshop format. Participants completed a pre and post workshop questionnaire to measure shifts in knowledge.

### How much do you know about mental health issues?

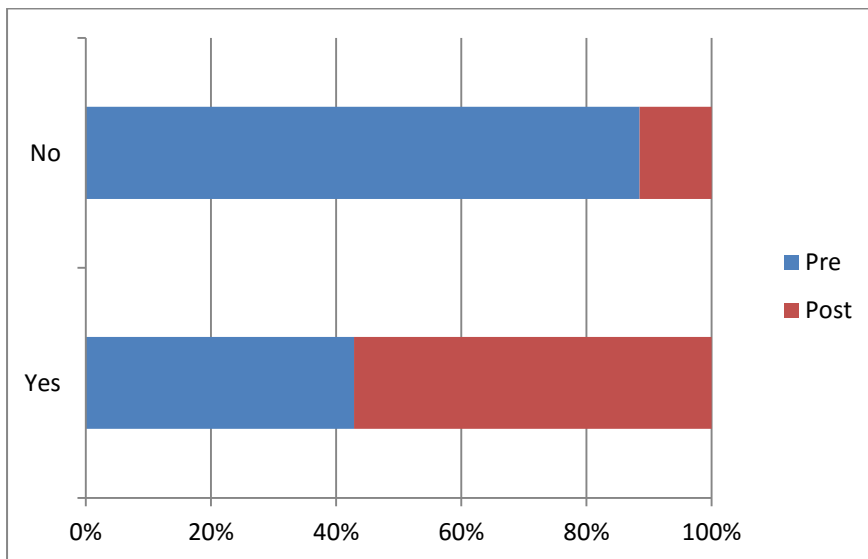




**How confident do you feel about knowing where to go if you or someone you now needed help for Mental Health issues?**



**Are you able to think of one place or person in Benalla you could contact to ask for support with Mental Health issues for yourself or someone you know?**



Of note, 25 participants (30%) said they could seek help from Benalla Health post forum compared with 6 (7%) pre forum.

**Do you plan on using this information to support someone who has experienced verbal, physical or sexual violence?**

- Yes            66 responses (80%)
- No             17 responses (20%)

The Youth Mental Health Forum enabled participants to increase their knowledge and awareness about mental health issues, including where to obtain support services.

## Live 4 Life



Live 4 Life (L4L) is an innovative, evidence-based, local community driven response to youth mental illness. The initiative aims to provide a local solution to a global problem by adopting a whole of community approach to increase knowledge, reduce stigma and improve mental health service pathways that are appropriate for young people (Bowers, 2016).

A strategic school-community partnership has been developed to address youth mental illness and suicide prevention by:

- Increasing mental health literacy;
- Decreasing stigma of mental health issues in rural communities;
- Enhancing access to and delivery of appropriate services for youth in the Benalla Rural City Council and surrounds.

The Live 4 Life program has been highly successful in the Macedon Shire Council and following a number of youth suicides in our community and with strong community support (including from Benalla Health), Benalla successfully applied to become an expansion site to run the program. The Benalla community recognise the value in utilising youth to empower their peers.



### FREE Youth Mental Health First Aid Course

Learn skills and gain confidence to assist young people experiencing mental health problems



Mental illnesses often start in adolescence or early adulthood and it is important to detect problems early to ensure the young person is properly treated and supported. The YMHFA course teaches adults who have frequent contact with adolescents, such as parents, guardians, school staff, sport coaches and youth workers, how to assist adolescents who are developing a mental health problem, experiencing a worsening of a mental health problem or in a mental health crisis.

#### COURSE INFORMATION

A comprehensive 14 hour Youth Mental Health First Aid (YMHFA) course over four sessions. Course topics covered: Developing Mental Health problems, depression, anxiety, psychosis, eating disorders and substance abuse. Suicide and mental health crisis are also covered. Participants receive a copy of the Youth MHFA manual and are eligible to become an accredited Mental health First Aider



Brought to you by Youth Live4Life  
Benalla Partnership Group

BOOK EARLY : Contact Benalla Rural City Council Community Development on  
5760 2600 or email [amanda.aldous@benalla.vic.gov.au](mailto:amanda.aldous@benalla.vic.gov.au)

DATES: Monday May 29 -5-9pm  
Monday June 5 - 5-9pm  
Monday June 19 - 5-9pm  
Monday June 26 - 5-9pm

Participants will learn about adolescent development and the signs and symptoms of mental health problems, how and where to get help and what sort of help has been shown by research to be effective

## Benalla Health's involvement in Life 4 Life:

- Completing the Youth Mental Health First Aid (YMHFA) refresher course in Sydney in February 2017
- Co-facilitating the YMHFA course for teachers and Benalla Rural City Council Community Development staff during March 2017 (17 participants)
- Co-facilitating a YMHFA course for parents, coaches, youth workers, school staff, etc. over 4 evenings in late May and June 2017 (20 participants)

The L4L crew (students from FCJ College and Benalla P-12 College) ran a very successful L4L launch on 19 April 2017 for all Year 8 students. Jason Ball, Young Australian of the Year for Victoria and Mental Health Advocate, spoke at the launch which was followed by a BBQ lunch and game of bubble soccer in the gardens.



*Photo 3 – FCJ College students are joined by Jason Ball and Benalla Rural City Mayor Don Firth at the L4L launch*

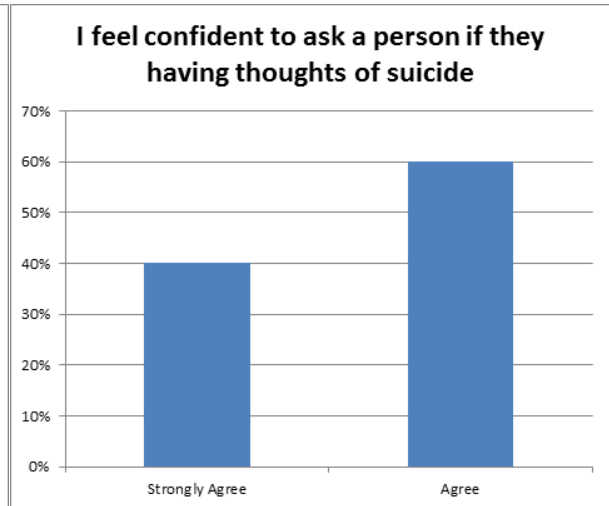
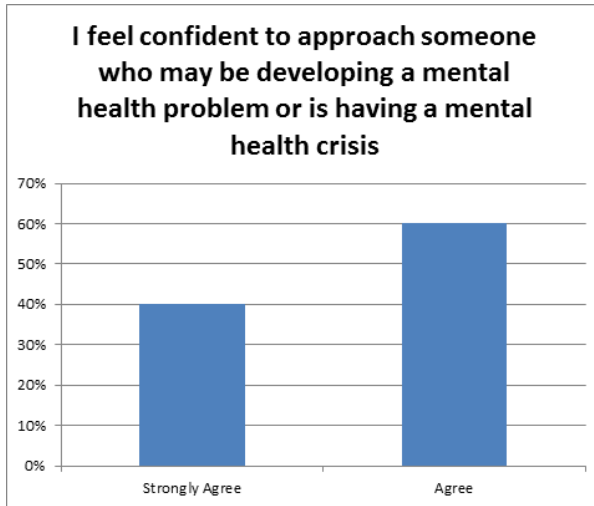


*Photo 4 – FCJ College students enjoying bubble soccer*

Year 8 and Year 11 students at both schools will be participating in Teen Mental Health First Aid during Terms 2 & 3, 2017, with Flexible Learning Centre students to receive training at a later date as well.

The Youth Mental Health First Aid sessions were held as planned in May-June 2017. 20 people registered with 12 completing all 4 sessions. This course will be offered again in October-November 2017.

Half of the participants in the May-June 2017 Youth Mental Health First Aid course completed the post-course evaluation (10 participants). Their feedback is as follows:



## ***Brief Mental Health Awareness Program (BMHAP)***

To complement Mental Health First Aid, Benalla Health identified that many members of the community were *time poor* and unable to attend the 2 day, Mental Health First Aid course.

To accommodate this need, the Social Worker team designed the BMHAP program which aims to improve understanding of mental illness, dispel myths and stigma and advice of available supports. The link between family violence and mental health is highlighted. The program was developed by the Social Work Counselling team at Benalla Health in response to several suicides in the community.

BMHAP allows group to tailor mental health education to their needs. Each of the 4 modules is 45 minutes long. Groups can choose to receive a single module or all 4 modules.

Program development involved:

- Gathering current evidence based practice regarding common mental health conditions and their treatment
- Gathering current based practice regarding strategies for lay community members to implement if confronted by a person experiencing signs and symptoms of mental illness
- Developing a Powerpoint presentation and video resources
- Gathering Beyond Blue resources
- Gathering supplies of the North East Mental Health Information card, which was developed by Integrated Primary Mental Health
- Updating the Benalla Mental Health Directory, which was developed by Benalla Health

The program was promoted to 84 community organisations – businesses, sports clubs, service clubs, churches, schools and preschools.

7 BMHAP sessions ran from 2015-2017. These sessions targeted:

- Benalla Health Leadership Team – 17 participants
- Benalla community – 10 participants
- Benalla SES volunteers – 15 participants
- Benalla All Blacks Football Netball club – 8 participants
- Benalla preschool and childcare staff – 20 participants

## Evaluation results show

- 88% of participants reported their knowledge of how to deal with someone experiencing depression had increased either 'greatly' or 'moderately'.
- 76% of participants reported their knowledge of how to deal with someone who is suicidal had increased either 'greatly' or 'moderately'
- 96% of participants stated they would use the information presented to support someone who has experienced verbal, physical and/or sexual violence

### *2 months post training:*

- 53% of participants had used the information presented to support another person
- 94% consider Family Violence to be a causal factor in mental health disorders

BMHAP has assisted participants to increase their knowledge and awareness about the mental health impacts of violence against women and their children.

## ***Family Violence Forums***

Stakeholders are critical in shaping whether and how an organisation's objectives are met. Stakeholders may include beneficiaries, communities, funders, donors, governments, other organisation, the media, practitioners, your team, researchers and consultants. It is important to understand stakeholders' motivations, needs, involvement and contribution in an overall policy, program or intervention (Partridge, 2005).

Two Family Violence Prevention forums were conducted in Benalla in May 2013. There had not been an opportunity for the Benalla community to discuss family violence in an open forum previously.

The day time forum was designed to be agency based and included a tertiary component (i.e. what is happening in the local area now as far as FV support, response and prevention) and a secondary component (i.e. generating conversation on what needs to or could happen in the future around FV support and prevention)

45 people attended the day time forum, representing 15 local agencies.

The evening session focused on raising awareness and generating conversation in regards to the community taking action against family violence. Key note speaker, Jason McCartney engaged the audience with his talk on overcoming adversity from his experience with the Bali Bombings and his AFL playing career. He focused on the consequences of violence on him personally, on his family and his community. Following on from Jason's speech, selected community members were invited to give an overview of their involvement in Family Violence Prevention and promoting Respectful Relationships within their communities.

140 community members from a number of different backgrounds attended the night including sporting clubs and other community organizations



*Photo 5 - Forum participants at Lakeside Community Centre*

The daytime Family Violence forum for agencies highlighted the need for better communication and referral pathways between organisations and developed a list of key priorities for action. These were recorded for implementation in the future. The following data was captured:

- 83% of participants at the evening forum believe family violence is a major issue in the Benalla community.
- 57% of participants believe their knowledge of family violence significantly increased as a result of the forum.
- 24% of people surveyed stated they would be interested in joining a community action group.

General feedback suggested participants wanted more regular forums, regular updates on Benalla stats and work within schools/preschools/sports clubs. This has been achieved by:

- Regular media releases in the Benalla Ensign
- Employment of a Media Officer to regularly post updates on Facebook and Twitter
- An annual press release regarding Benalla statistics and actions, led by Benalla Health and the Benalla Police
- Introduction of the “Breaking the Silence” program at Benalla P-12 College
- Education to Benalla sports clubs and church groups regarding Family Violence, its impacts and actions to take if witnessing violence or if someone discloses violence

### ***Rosie Batty Forum***



Speakers at the recent Rosie Battie Family Violence Forum at BPAC.

In May 2015, Australian of the Year Rosie Batty told her story at BPACC and emphasized the need for local action.

Over 165 people attended this forum and the panel discussion that followed allowed questions to be answered. From this forum a number of “Community Champions” identified themselves and became part of the initial cohort of “Benalla White Ribbon Day Supporters”.



## International Women's Day

#beBOLDforCHANGE  
International Women's Day 8 March 2017



**International Women's Day** is a global day celebrating the social, economic, cultural and political achievements of women. The day also marks a call to action for accelerating gender parity.

[www.internationalwomensday.org](http://www.internationalwomensday.org) states the day is an opportunity for us to:

- **celebrate** the social, economic, cultural and political achievements of women because visibility and awareness help drive positive change for women
- **declare** bold actions you'll take as an individual or organization to help progress the gender agenda because purposeful action can accelerate gender parity across the world

Benalla Health established a local working group to organise International Women's Day (IWD) events. Forty three local women were invited to an initial meeting in August 2016 to plan events. Invitees were previously involved in IWD events in Benalla as well as women from local businesses and service clubs.

Benalla Health secured the services of Dr Ann O'Neill as the keynote speaker for events. Ann is a specialist in the areas of trauma, criminal victimisation and advocacy. Being a survivor of family violence, she brings personal experience to her presentations.

The IWD working group met monthly to coordinate 4 events for IWD 2017:

- A community supper with Dr Ann O'Neill as keynote speaker
- A breakfast for local business women and women in leadership positions with Dr Ann O'Neill as the keynote speaker
- A presentation to year 10-11 students at Benalla P-12 College (Dr Ann O'Neill keynote speaker) and year 8 students (Rosie Respect program information regarding cyberbullying and sexting)
- Dr Ann O'Neill presenting to parents of children aged 0-5 years at the Parents Early Education Partnership (PEEP) program run by Tomorrow Today Foundation.

*Quantitative outcomes:*

- 221 people attended the community supper (211 women and 10 men)
- 52 women attended the breakfast
- 162 year 10-11 students and 77 year 8 students from Benalla P-12 College attended the workshops (142 males and 97 females)

- 21 parents of pre-schoolers attended the session at PEEP (19 women and 2 men)

*Evaluation of the events showed:*

Half of the participants (50%) at the community supper session plan on taking actions in their own life as a result of Dr O'Neill's presentation. These actions include:

- Genuinely asking people "are you okay?"
- Really listening to people's stories/concerns
- Being more aware that family violence can affect anyone
- Have 'the' conversation with close family and friends
- Role modelling good behaviour. Be aware of referral pathways
- Believing people who say they are domestic violence victims.
- Teaching my children the importance of equality
- Listen to what isn't being said
- Talk to people. Keep this subject on people's minds. Keep the conversation going
- Continue the journey to reduce family violence in Benalla
- Speak to relatives and friends about the content of Ann's presentation
- Listen more and not pass things off as trivial or too hard
- Speak with my own sons about family violence. Positive communication/conflict resolution skills

Seventy nine percent (79%) participants at the breakfast plan on taking messages from Dr O'Neill's presentation back to their workplace and/or community group.

- Be more proactive within the workplace
- Lead by example
- More work within our school community to teach students and teachers "It's not OK"
- Being approachable
- Sharing more information with colleagues and friends in regard to leadership, resilience, endurance and change
- Listen & believe

Other outcomes:

- 89% of the school students plan on sharing messages from the presentations with others
- 96% have a better understanding of resilience
- 94% stated they could use messages from the presentations in their own lives
- 66% stated they had more confidence to seek help for themselves

The evaluation results have been shared with the Benalla International Women's Day committee with the aim of using feedback to guide future opportunities for the education and inspiration for women in our community. A list of participants who are interested in planning future events was compiled and distributed to the previous IWD committee.



*Photo 6 – Dr Ann O'Neill with students from Benalla P-12 College*

## Part 4 - Community Action

### White Ribbon Day



25 November is the International Day for the Elimination of Violence against Women also known as White Ribbon Day ([www.whiteribbon.org.au](http://www.whiteribbon.org.au), 2017)

Since 2010, Benalla Health has coordinated a White Ribbon Day march each November. The numbers of people attending the march has steadily increased throughout the duration of this Health Promotion Plan. This is in response to the strong community awareness campaign, led by Benalla Health.

Year	Attendance
2010	45
2011	75
2012	95
2013	225
2014	225
2015	320
2016	700+

Benalla Health partnered with VicRoads in 2016 to enable Bridge Street to be closed. This allowed participants to march on the road through the main business district of Benalla. Previous White Ribbon marches had been shorter and more hidden from the public eye.

Each year, guest speakers present on a variety of topics relating to Family Violence:

- Men's roles in the prevention of violence – 2012
- Police response to family violence – 2013
- Story of a local survivor and their family - 2014
- The impact of violence on children - 2015
- How schools and workplaces are making positive cultural changes towards women - 2016

### Community Education

Benalla Health has continued the family violence awareness momentum in the community by:

- The development of educational materials about what is family violence and where to seek support

- The development of White Ribbon decorations – material bunting, wooden and material white ribbons for display
- 28 media articles highlighting the issue of family violence in our community. These achieved coverage in the Benalla Ensign, Wangaratta Chronicle and Shepparton News.
- 27 articles relating to family violence, seeking help, respectful relationships were provided to Benalla P-12 College and FCJ College for use in their school newsletter.
- 12 newsletters were sent to Benalla White Ribbon Supporters. These contained updates on local statistics and actions to prevent violence against women and their children.
- Coverage on WIN TV and/or Weeknights of White Ribbon Day marches, press releases, and the impact of family violence on children. This coverage has been loaded onto You Tube.

**Table – list of Video articles produced by Benalla Health**

<b>Title of Video</b>	<b>Date</b>	<b>Number of views</b>
Weeknights – Benalla Take a Stand	July 2013	84
2013 Benalla march against violence	November 2013	39
Benalla White Ribbon Day speeches	November 2013	1161
Weeknights – Benalla Family Violence press conference	October 2014	118
Weeknights – Benalla White Ribbon Day march	November 2014	11
Benalla White Ribbon Day speeches	November 2014	234
WIN TV – Benalla Family Violence incidents and the impact on children	August 2015	43
WIN TV – Benalla Family Violence press conference	August 2015	58
WIN TV – Benalla March Against Violence	November 2015	85
White Ribbon Day speeches	November 2015	39
Benalla Family Violence press conference	August 2016	11
Benalla FCJ College “Let the World Know Where You Stand”	October 2016	638
2016 Benalla march against family violence	November 2016	213

**See Appendix 4 – Video (Media) Links for links to each of these Videos**



Photo 7 - Benalla CFA tanker lead the 2016 Benalla March against Violence (White Ribbon Day)



Photo 8 - Joanne Rock, Principal of FCJ College Benalla, was a guest speaker at the 2016 Benalla March against Violence (White Ribbon Day)

## **Benalla White Ribbon Day Supporters Program**

The Benalla White Ribbon Day Supporters program has been a significant community action program since its inception in 2015. It has provided a focus whereby local businesses, community groups, sporting clubs and health and welfare agencies can unite together in a common cause in a true collective impact approach.

Local organisations have been provided with information about what is family violence, local family violence statistics, and how to take action against family violence. These organisations have been encouraged to sign up as a Benalla White Ribbon Day Supporter. This will enable these groups to be recognised as a leader in family violence prevention and allow them to take their own community action.

Businesses have been targeted to become Supporters. Personalised letters and a follow up phone call were sent to clusters of businesses and community groups (eg, hairdressers and beauticians, sports clubs). See Appendix 1 for a full list of supporters.

The Director of Community Health, who is a White Ribbon Ambassador, has contributed over 50 hours of work toward raising the Benalla community's awareness of Family Violence. This work has engaged over 3000 people – from secondary school students to business owners. All have received education about:

- What is Family Violence?
- What can I do to support victims?
- Where can I seek professional support for victims?



Photo 9 – Benalla White Ribbon Supporters "Wall of Honour", located inside Benalla Community Care

The following comments have been recorded about community involvement in the White Ribbon / Community Action campaign:

- *I have been sure to share the impact of Family Violence with community groups and individuals now I am more informed. Education has increased my passion to reduce the impact of this issue.*
- *I alerted police to an incident in Shepparton (my home town) where a woman was being verbally abused in front of a child in public.*
- *I notified police when I witnessed an incident of family violence in the Benalla community.*
- *I have discussed the issues of Family Violence with friends, within the workplace and family of all ages, also more aware of verbal abuse in the community.*
- *I challenged the behavior of a work colleague towards a female work colleague*

Community actions since the Benalla White Ribbon Supporters program was introduced:

- Benalla P-12 College has completed the Breaking the Silence training to embed models of respectful relationships in school culture and classroom activities
- Benalla P-12 College art students involved in designing a Benalla White Ribbon Supporter polo shirt
- Benalla Health has become a White Ribbon Accredited workplace.
- There are 34 Benalla White Ribbon Supporters. The supporters represent local businesses, government organisations, sporting and service clubs.
- Goorambat, Samaria Suns and Benalla Saints Football Netball Clubs have committed to a White Ribbon Round for one of their home games in 2017.
- Benalla Rural City Council (BRC) has placed a large “Say No To Violence Against Women” sign on the external library wall
- BRC senior management team participated in By-Stander Training
- BRC included a Family Violence clause in the 2015 Employment Agreement
- Businesses and clubs encouraged to financially sponsor a Benalla White Ribbon Supporter banner to be displayed for a week either side of White Ribbon Day each November. The banner would display the white ribbon and their business’/club’s logo
- Businesses encouraged to display white ribbons and wrist bands for sale



- The White Ribbon Youth Ambassador Pilot Program will be implemented in North East Victoria across the areas of Shepparton, Benalla and Wangaratta. Among the key activities, White Ribbon will provide educational training on understanding men's violence against women; provide a workshop session on what it means to be a safe bystander; support the development of youth-centred resources and information; pre and post survey questions to evaluate attitudinal change over the course of the pilot and case management.
- Education and encouragement to report matters of Family Violence. Additional units in the Key Age and Stages as part of the Maternal and Child Health Program have been introduced to educate and encourage new parents regarding family violence
- Increase in funding to support programs. There has been increased funding in the Family Service program to support the work in the Family Violence sector. The Child First Family Services Alliance has introduced a specific position to address Family Violence in the Central Hume Region
- Creation of specialist units (ie; FVU) to deal with recidivism (both Affected Family Member (AFM) and Respondent)
- Increased support from Court (penalties)
- Increased support from other agencies and access to same
- Increase in public confidence that matters of family violence will be investigated thoroughly and appropriately dealt with through the judicial system



Photo 10 - Presentation of White Ribbon Cup, Wangaratta Chronicle

## Part 5 Developing Community Leadership

Benalla Health has worked hard over the past four years to identify, train and support community champions who can provide community leadership on Family Violence Prevention.

### *Community Champions*

<b>Agency / Business / Group</b>	<b>Position</b>	<b>Name</b>	<b>Year Commenced</b>
Benalla Health	Director Community Health	Neil Stott	2009
Benalla Rural City	Manager Community Services	Deb Randich	2010
Benalla Health	Community Health Staff	Various	2010
Benalla Rural City	Community Services Staff	Various	2010
Benalla Health	Executive Leadership	CEO, DCS, Business Manager	2010
Benalla Rural City	Leadership	Various	2011
FV Prevention Network	Various	Various	2011
Benalla Police	Family Violence Liaison Officers	Sergeant Harry Verbaken Sergeant Di Smith Various Others	2011
Benalla P-12	Senior Leaders	Barb O'Brien Paul Challis	2011 2012
FCJ College	Senior Leaders	Joe Mount David Leslie Joanne Rock	2012 2012 2016
Department of Environment, Land, Water and Planning	Team Leader Finance Officer	David Donehue Susan Pinkerton	2015
Georgina's Restaurant	Co-owner	Jade Kirk	2016

## Benalla White Ribbon Day Supporters

See Appendix 1 for the full list.



## Benalla Health Internal changes

- Benalla Health completed an 18 month program to become a White Ribbon Accredited Workplace. This has enabled the workplace to develop an action plan to support staff in dealing with family violence in their own lives and in that of their clientele.
- Information regarding Family Violence is displayed in numerous places around the organisation. This information details – what is Family Violence, what Benalla Health’s actions are in response to Family Violence, where to seek support
- All new clients seeking services at Benalla Community Health Service complete the Department of Health and Human Service’s Service Coordination Tool Template Initial Screening of Health and Social Needs. If a client responds positively to the statement “I have felt afraid of someone who controls or hurts me”, they are assisted to call the Centre against Violence to seek support.
- 41 staff have been educated on Strengthening Hospital Responses to Family Violence, a toolkit created by the Royal Women’s Hospital, Melbourne. This education covers the 6 sensitive steps in liaising with a client or staff member who has experienced family violence.
- 31 staff completed the Common Risk Assessment Framework training provided by Women’s Health Goulburn North East
- 4 staff have become White Ribbon Advocates

## External partnerships

- Benalla Rural City Council
  - Referrals from Maternal and Child Health Nurses and Children and Family Services staff into Bringing Up Great Kids and Real Men Make Great Dads
  - Participation in the Benalla Early Year's Network
  - Participation in the Benalla Youth Service Providers' Network
  - Providing professional opinions regarding the direction of mental health initiatives in Benalla
- Tomorrow Today Foundation (TTF)
  - Delivery of Parents Early Education Partnership
  - Referrals into Bringing Up Great Kids and Real Men Make Great Dads
  - Increased staff awareness of services at Benalla Community Health. This has resulted in increased referrals from TTF into speech pathology, counselling and dietetics.
- Benalla White Ribbon Supporters – See Appendix 1 for list of supporters
  - Received training regarding what is Family Violence, causes of Family Violence and providing victim support
  - Displaying Supporter certificate in their place of work
  - Providing victims with information of where to seek help
  - Referring victims in to programs such as Rock and Water for Women and Girls
  - Assisting in the planning of White Ribbon Day events
  - Attending White Ribbon Day events
- Benalla Police
  - Co-presenting at annual Benalla Family Violence press conference. Role involves covering local statistics and Police response
  - Active support in organising and crowd/vehicle control at the annual White Ribbon Day march
  - High level relationships between Director of Community Health and Officer in Charge Benalla Police around Family Violence, Mental Health/Suicide, and the Benalla Safety Committee
  - Participant and referring victims into the Rock and Water program
  - Member of the Benalla Family Violence Prevention Network

- Benalla Family Violence Prevention Network – See Appendix 2 for list of members
  - Group meets bi-monthly
  - Forum for sharing current statistics and initiatives regarding the prevention of Family Violence
  - Provides support for White Ribbon Day events
- White Ribbon Australia
  - Director Community Health
    - White Ribbon Ambassador –
    - Chair Victorian White Ribbon Committee
    - Chair NE Victoria White Ribbon Committee
  - Benalla Health - White Ribbon Advocates
    - Director Clinical Services
    - Nurse Unit Manager of Morrie Evans Nursing Home
    - Housekeeping staff member
    - Speech Pathologist / Team Leader
  - Sponsor:
    - Breaking the Silence program
      - Benalla P-12 (5 campuses)
      - Cathedral College Wangaratta
    - Youth Ambassador Program
    - White Ribbon Football / Netball
      - Benalla Saints vs Tatura Bulldogs
      - Goorambat vs Benalla All Blacks
      - Samaria Suns vs Bendigo

## Future Directions

### Collective Impact

*Increase the commitment of the partners in the Benalla Family Violence Prevention Network (BFVPN).*

Since its inception in 2010, this group have had a number of different agencies and individuals representing agencies attend. Over time, the urgency and vitality of the group has waned. To ensure that this group is the one of the primary groups working in family violence prevention, each individual and agency needs to be reengaged and their input and commitment to the work of the network strengthened.

A facilitated plan development process in late 2017 will assist in this process.

*Capacity Building of staff and partners around Collective Impact*

Both staff at Benalla Health and members of the BFVPN need to have their knowledge of the principles of Collective Impact strengthened and improved. A workshop in early 2018 will assist in this process.

*Improve data measurement of community attitude change.*

Through the life of the plan there have been a number of indicators that have been identified. Some of the measures are quantitative, demographic but also include qualitative measures. (Refer to *Measuring Collective Impact* – P.10).

These measures require further refinement and improvement. Developing / expanding our relationship with Melbourne University or Deakin University would assist in this area.

*Capacity Building of WR Supporters around Gender Equity and Community / Workplace Action*

Communicating Gender Equity to the community is an ongoing problem with all groups involved in this space. We will work with the key lead agencies both Nationally (White Ribbon Australia; Our Watch), in the State (Domestic Violence Resource Victoria) and Regionally (Women's Health GNE) to refine and enhance our messaging and education material.

Once we have achieved that, we can expand our community education plan into this key are.

## **Skills Development**

Benalla Health recognise that parents are a child's first and most important educator. Flood (2007) researched causes of men's intimate partner violence against women:

### **(1) Gender roles and relations**

- Men's agreement with sexist, patriarchal, and sexually hostile attitudes
- Violence-supportive social norms regarding gender and sexuality
- Male-dominated power relations in relationships and families
- Sexist and violence-supportive contexts and cultures

### **(2) Social norms and practices related to violence**

- Lack of domestic violence resources
- Violence in the community
- Childhood experience of intimate partner violence (especially among boys)

### **(3) Access to resources and systems of support**

- Low socioeconomic status, poverty, and unemployment
- Lack of social connections and social capital
- Personality characteristics
- Alcohol and substance abuse
- Separation and other situational factors

The modelling of respectful relationships and the importance of social connectivity are key themes in Flood's research (2007). It is therefore critical that our efforts continue to support families and children through programs such as "Real Men Make Great Dads" and PEEP.

Recommended future directions:

- Support the Tomorrow Today Foundation in their investigation and implementation of the 2Gen Program. This program is run by the Brotherhood of St Laurence and focuses on getting parents out of poverty. Currently, a potential partnership between Tomorrow Today Foundation, PEEP facilitators, Brotherhood of St Laurence and GOTAFE is being explored to enable parents attending PEEP to gain credits toward a qualification in Early Childhood studies. This is a very exciting opportunity for local families who have shown commitment to PEEP and investing in their child/children's futures.

- Recruitment of a male staff member and/or volunteer to co-facilitate “Real Men Make Great Dads”. Benalla Health has struggled to find a male volunteer with the appropriate skills to assist in the delivery of the program. A man delivering key messages regarding parenting and respectful relationship is the key to the ongoing success of this gender specific program.
- Tying the educational aspects of the “Real Men Make Great Dads” program into a PEEP program that is for fathers and their children only. The Tomorrow Today Foundation ran a Dads Playgroup on a Saturday morning for several months. It was run by a community volunteer who burnt out from the burden. The partner organisations should investigate the option of employing a paid male staff member to run such a program.
- Continue to investigate effective evaluation techniques for our programs

### **Empowering and Supporting Victims and at Risk Groups**

Good service provision is underpinned by a gendered understanding of violence. It is focused on women’s and children’s safety, provides gender and cultural safety, works from a client-centred, trauma-based, empowering framework, supports women to navigate the complex systems, recognises children as clients in their own right, and works towards greater gender equality recognising the complexity of intersectionality and that women are best qualified to decide their pathway to recovery from violence and trauma (Australian Women Against Violence Alliance, 2016).

### **Recommended future directions:**

- Rock and Water program continue to be offered women and girls in the Benalla community.
- All Counselling staff at Benalla Health to be trained in the Rock and Water program for women and girls. This will enable staff to implement strategies with clients in 1:1 sessions. This is particularly important for victims who may feel uncomfortable attending a group session.
- Offering Rock and Water as an ‘extra’ after a PEEP session each week. For some mothers, a barrier in attending the group program has been lack of child care. This will capture mothers who are already attending a specific parenting program and child care is available on site. Rock and Water will give them the opportunity to learn skills to empower themselves. This option will be explored with our PEEP partners.



## **Educating our Community**

Families and community members play a crucial role in preventing family violence for many reasons:

- Studies show that abused women turn first to those closest to them—extended family, friends, and neighbors—before they reach out to an organization or professional service provider. Relatively few access shelter services. And they seek out government institutions—police, courts, and child protection agencies—last.
- Families that experience violence are often disconnected from traditional service providers and isolated from services offered outside their immediate neighborhood.
- Community members often know which families need help and which services can make a difference.
- Community members know the cultural values, traditions, and practices that support violence—as well as those that can be used appropriately to intervene and stop it.
- Communities include men, women, and youth who understand the connection between violence in the home and on the street and see family violence as a primary barrier to community development and revitalization.
- Most community residents and leaders have the willingness and capacity to develop the skills needed to conduct family violence prevention and intervention activities (Family Violence Prevention Fund, 2002).

### **Recommended future directions:**

- Ongoing support of the “Live 4 Life” program at Benalla secondary schools. Continuous education to school staff, parents, students and the general community will increase knowledge of mental illness and how to support someone in distress.
- Investigate the need for a community Family Violence forum. Such a forum has not been held in Benalla since 2013. Benalla Health would consider community need and gaps in knowledge before seeking funding and planning appropriate key note speakers.
- Continue to offer the Brief Mental Health Awareness Program in response to community need. The program will continue to be offered to targeted groups (eg, sports clubs, hairdressers) and will continue to have a focus on supporting those experiencing family violence.
- Benalla Health will promote Mental Health First Aid sessions that are being offered by other organisations in our catchment.

- The development of a Brief Mental Health Awareness Refresher session. This will assist those who have completed the training to update their knowledge in a shorter session. This training would be practical rather than theory based, enabling participants to respond to mock scenarios involving people in mental health crisis due to family violence.

### **Support Community Action and Grow Community Champions**

According to a report written by the Family Violence Prevention Fund (2002), there are strengths and challenges of building networks of leaders within the community:

- This approach equips community leaders and gatekeepers with the information and skills they need to engage their community in family violence prevention.
- It engages community members in assessing their own realities and in critical thinking and planning that can lead to action.
- It provides opportunities to learn new skills and apply them to personal and community life.
- Leaders sometimes burn out from overwork or are recruited to work on other issues or for other organizations. The challenge is to develop a group of leaders and not rely too much on any one individual.

### **Recommended future directions:**

- A coordinated approach to gathering local data regarding family violence presentations to GP clinics, Urgent Care Centres, counselling services, family services and welfare services within Benalla. Meetings with all partners would discuss ways of gathering the data and this would allow monitoring of the scope of family violence in Benalla and assist in planning for future community action.
- A goal of 50 Benalla White Ribbon Supporters by the end of 2017 and 20 per annum joining each year after that.
- Promotion of White Ribbon Supporters as “Safe Places” for victims to disclose and receive support
- Greater engagement of the Benalla White Ribbon Supporters in the planning of White Ribbon Day events. Currently, the supporters are invited to attend as a participant. Their input into the coordination of the events would promote greater community ownership.
- Progressing the involvement of Benalla White Ribbon Supporters to become White Ribbon Accredited Workplaces.
- Promoting participation in the White Ribbon Advocate and Ambassadors program to the Benalla White Ribbon Supporters.

- Involving the White Ribbon Youth Ambassadors in the coordination of White Ribbon Day events and in raising awareness of family violence in our community throughout the year.
- Utilising the White Ribbon Youth Ambassadors to recruit other young men into this program.

## Appendix 1 - List of Benalla White Ribbon Supporters

No	Agency	Date
1	Benalla Saints Football Netball Club	2014
2	Benalla and District Fire Brigade Group	2015
3	Benalla and District Pre-School Partnership	2015
4	Benalla All Blacks Football Netball Club	2014
5	Benalla Anytime Fitness	2016
6	Benalla Business Network	2015
7	Benalla Ensign	2014
8	Benalla Health	2014
9	Benalla P-12 College	2015
10	Benalla Rural City Council	2014
11	Benalla Soroptomists	2016
12	Big Hair	2017
13	Department of Environment, Land, Water and Planning	2015
14	Department of Health and Human Services East Division	2015
15	FCJ College Benalla	2014
16	Georgina's Restaurant	2016
17	Goorambat Football Netball Club	2016
18	Hollywood Café	2016
19	Leading Edge Books	2017
20	Lions Club of Benalla	2015
21	McDonalds Benalla and Euroa	2017
22	Rotary Club of Benalla	2015
23	Rural Housing Network	2017
24	St Vincent De Paul Benalla	2015
25	Samaria Suns Football Club	2017
26	Smith Dosser Accountants	2017
27	Tomorrow Today Foundation	2015
28	Waminda Community House	2016
29	Wellways	2015
30	West End Post Office and General Store	2015
31	Young Leos	2016

## **Appendix 2 - List of members of the Benalla Family Violence Prevention Network**

The Benalla Family Violence Prevention Network is a community based group made up of government and non-government agencies and community members who are committed to family violence prevention

1. Benalla Health
2. Benalla Rural City Council
3. Central Hume Primary Care Partnership
4. Victoria Police
5. Centre Against Violence
6. Benalla P-12 College
7. Rural Housing Network Limited
8. Department of Health & Human Services
9. Women's Health Goulburn North East
10. Mental Illness Fellowship
11. Tomorrow Today Foundation
12. Mind Australia
13. GOTAFE
14. Benalla Lions Club
15. Benalla Carer's & Parents support Group Inc.
16. North East Support & Action for Youth (NESAY)
17. Gateway Health
18. St Vincent De Paul's.

## Appendix 3 - Comments Vulnerable Families Literature Review

- “The research project has provided good evidence to support the proposition that traditional approaches to community education do not work with hard to reach communities. The research provided good insight into innovations that have worked and provided strong guidance around the principles to be followed to achieve success. There appears to be a shift of focus of “taking education to them”, “consulting with them” and “listening to them” approaches.”
- “I found the presentation very interesting and informative. It has made me think about your question about different approaches to working with families and I have come up with the following ideas:
  - A) The mental health outreach model where a worker supports the person in their own home initially and then supports them to become involved in support groups and community activities.
  - B) Family support workers could be used as models/champions/coaches or even small group facilitators
  - C) Clients/ex-clients of “the system” could be supported and trained up to become parenting support workers
  - D) A whole of community/multipronged approach is usually most successful. Perhaps we need to be thinking more about working at the 3 levels in a dedicated way – individual, family/group, and community”
- “I thought the presentation was interesting and well prepared. It clearly pointed to the need for more one to one engagement with vulnerable and difficult to engage families (in the first instance, anyway) prior to attempting to engage them into group work. It raised a lot of questions in terms of what more can be done to engage families, which hopefully will be examined further in our Working Group. Congratulations on the work put into the report.”

## Appendix 4 – Video (Media) Links

The following YouTube links show the Video history of the White Ribbon / Family Violence Prevention Campaign which has been led by Benalla Health

### **2016 White Ribbon Day Benalla “March against Violence”**

**The March – Drone Footage**

<https://youtu.be/Zj4ecR6BV4U>

**Welcome Speech – Neil Stott**

<https://youtu.be/6f7P6zlePOE>

**Supporter Speech – Dave Donehue**

<https://youtu.be/miUuUaGX4XU>

**The Oath Neil Stott**

<https://youtu.be/RSMpqGZ4200>

**FCJ College – Giant White Ribbon**

<https://www.youtube.com/watch?v=yv0ZLbYjp7o>

**The March – People Power**

<https://youtu.be/kAjdv-fFkEc>

**Supporter Speech - Ms Joanne Rock FCJ**

<https://youtu.be/LQ88HnUirTE>

**Supporter Speech – Ms Barbara O’Brien,  
Benalla P-12 College**

<https://youtu.be/wmrMU8UYgYE>

**Importance of Fathers – Neil Stott**

<https://youtu.be/42lwhmJcCR0>

### **2015 News Items**

**Press Conference**

<https://youtu.be/fDQ-EedGcG8>

**WINTV News Item 21 Aug 2015**

[https://youtu.be/K\\_HuVSUDW4M](https://youtu.be/K_HuVSUDW4M)

### **2015 White Ribbon Day Benalla “March against Violence”**

**The March**

[https://youtu.be/euGORH\\_Ps04](https://youtu.be/euGORH_Ps04)

**Speech – Kerry Burns CEO Centre Against  
Violence**

<https://youtu.be/VTA0uxQGGJs>

**The Oath**

<https://youtu.be/RUdEqFNUip0>

**Speech – Neil Stott (WR Ambassador)**

<https://youtu.be/ClIijbYVi8g>

### **2014 News Items**

**Weeknights 31October2014 Benalla Family Violence Statistics 2014 Press  
Conference**

<https://youtu.be/YSr2kNgYpSU>

### **2014 White Ribbon Day Benalla “March against Violence”**

**Weeknights News Item**

<https://youtu.be/WIn8iRRdQHQ>

**March Photos**

[https://youtu.be/4oTpriTp\\_Zw](https://youtu.be/4oTpriTp_Zw)

### **2013 White Ribbon Day Benalla “March against Violence”**

**The March**

<https://youtu.be/QdQBRpOPEnU>

**Speech – Anj Barker**

<https://youtu.be/6nWVMpNImH0>

**Speech – Neil Stott (White Ribbon  
Ambassador)**

[https://youtu.be/Yk3\\_dl4AeRq](https://youtu.be/Yk3_dl4AeRq)

**Take a Stand – Week Nights 30 July 2013**

<https://youtu.be/zpRjc-Mtu7g>

## **Appendix 5 – List of attachments**

The following documents are included with this report to showcase the strong work that has been achieved during the life of this plan.

1. What is Family Violence information flyer
2. Brief Mental Health Awareness Presentation
3. Example – Respectful Relationships Presentation to Benalla P-12
4. White Ribbon Day Supporters Newsletters
  - a. Spring 2016
  - b. Winter 2017



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