

# Gender and Disability Workforce Development Program

FINAL Evaluation Report 30 July 2021 Women with Disabilities Victoria (WDV) acknowledges the Australian Aboriginal and Torres Strait Islander peoples as the first inhabitants and traditional custodians of the lands on which we live and work. We pay our respects to ancestors and Elders, past and present. The WDV community is committed to honouring the unique cultural and spiritual relationship Aboriginal and Torres Strait Islander peoples have with the land and waters, and their rich contribution to society.

WDV acknowledges the strength and resilience of victim survivors of violence against women. We remember those who did not survive and acknowledge friends and families who have lost loved ones through such violence. We undertake our work to shift the underlying structural drivers of violence against women so that *all* women can be free of violence.



Social Research for Healthy Communities

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# **Author's acknowledgements**

This report, and the evaluation on which it is based, could not have been possible without the guidance and advice of Women with Disabilities Victoria (WDV) staff connected to the Gender and Disability Workforce Development Program (the Program). Warmest thanks go to Fofi Christou who initiated the evaluation process in the latter part of 2018, and who brought together staff from across the Program and another initiative, the Responsive Access Project, to work in a 'learn-by-doing' environment on the initial Program Logic Model and Evaluation Plan, completed in early 2019. That work set the foundations for both teams to commence with an internal evaluation of their initiatives, and thanks go to Program Team members who designed instruments and collected data in parallel with undertaking the Program's many activities from that time.

Fast-forward 18 months, and thanks go to Bianca Evans, for reconnecting with me with the irresistible offer of an 'epic' external Program evaluation. Thanks to Bianca and members of the Program Team for another round of evaluation design work, and for their contributions to shaping a refreshed Program Logic Model and Evaluation Plan in the light of implementation developments and the not so small matter of a one-in-one-hundred-year public health crisis in the form of the COVID-19 global health pandemic. These Program Team members are Tess Karambelas, Carly Myers, Jan Earthstar and Olivia Franklin.

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Thanks go to all those who were involved in the evaluation process as focus group discussants or interview participants. These were the women of the Experts by Experience Group; the Program Team members; the members of the Program Advisory Group and other stakeholders; the trainers and facilitators involved in Program delivery; and WDV staff associated with the Program. Deepest thanks go to all the women with disabilities who met with me across these various focus groups and interviews, and who so generously shared their experience of the Program and what it has meant to them as women with lived experience.

Elsewhere I have written about the worth of any participatory and values-driven evaluation as lying in its capacity to be on the side of primary prevention and the alternate vision of society that it seeks, and not against it. As the Program evaluator, it has been an honour, truly, to have been gifted an allyship role by women with disabilities, and to have such trust placed in me to draw on our shared view of a world that is more gender *and* disability equitable, and where all women are respected and can fully experience life, as a guiding light in evaluation implementation.

Final thanks go to WDV for recognising and investing in evaluation as a component of the Program (not as an 'add on' or afterthought) and for ensuring that the Program's

external evaluation was possible through allocating funds towards it.

This evaluation of the Gender and Disability Workforce Development Program was led by Wei Leng Kwok of WLK Consulting who is also the author of this report.

30 July 2021

# **Executive summary**

## **About the Program**

The Gender and Disability Workforce Development Program (the Program) is an initiative of Women with Disabilities Victoria (WDV) that seeks to prevent violence against women with disabilities *before it occurs*. As a primary prevention initiative, the Program contains a number of mutually reinforcing activities that target the underlying causes of violence, also known as the drivers, in order to transform them. The most recent iteration of the Program commenced in 2017 and is concluding in 2021. Over this time, the Program received funding from what is now known as the Office for Prevention of Family Violence and Coordination (OPFVC) at the Department of Families, Fairness and Housing (DFFH).<sup>1</sup>

The Program has a strong focus on activities that work across multiple levels of society to influence change, specifically the community, organisational and individual levels. Activities are targeted at specialist and contributor sectors and workforces that have a role to play in preventing violence against women with disabilities. Activities seek to build capability in these sectors and workforces for intersectional prevention practice, including the capacity for cross-sector collaborations.

The Program centres lived experience throughout all its activities. This occurs through quality consultation and co-design processes that see leading organisations and agencies in cross-sectors for prevention put in touch with an Experts by Experience Group, a group of women with lived experience who are upskilled and supported for their expertise. Through this connection, clients receive valuable input into their policies, programs, practices, guides, or other resources they are working on.

Centring lived experience also occurs through the co-facilitation and delivery of highquality training and other capacity building activities; it is evident in the Program's governance and staffing arrangements too. By centring lived experience in these different ways, the Program elevates the expertise of women with disabilities, amplifies their voices and promotes their equality. *The Program demonstrates action on the drivers of violence against women with disabilities at the same time as it builds the capacity of others for action.* 

The Program's main activities during the current phase of implementation:

- **Experts by Experience Group** as the lived experience centrepiece for consultation and co-design;
- co-designed training and online courses targeting prevention and social services workforces, including disability organisations and service providers, with training co-facilitation and delivery shared equally and respectfully by experts in lived experience and experts in prevention;
- other cross-sector capacity building work i.e., a regional Community of Practice (CoP);

<sup>&</sup>lt;sup>1</sup> Prior to the machinery of government change in February 2021, the Program's funding was through the Office for Women, Department of Premier and Cabinet.

- co-designed materials and tools that raise awareness of violence against women with disabilities, help build knowledge of the intersecting drivers, and help strengthen skills in preventing such violence from happening in the first place;
- activities such as webinars, events, social media, and communications that raise awareness of violence against women with disabilities and its prevention, and maintain its profile in public discourse; and
- strategic engagements that position the Program's relevance in Victoria's prevention landscape, deliver consistent messaging around the intersecting drivers of violence against women with disabilities, and consolidate WDV's leadership in intersectional prevention practice.

These activities were in full flight during the second half of the Program from 2019 to 2021, and are the subject matter of this report, itself the result of an evaluation process that ran alongside implementation.

#### Synopsis of main evaluation findings

The **Experts by Experience Group** is unique to the Program and has emerged over the last two years as vital to intersectional prevention practice in Victoria. Members are women with lived experience employed by WDV as part of the staff team, a ground-breaking feature in itself, and who offer consultancy and co-design services on gender, disability and violence prevention. Over the course of implementation, the women have received ongoing professional development, support and guidance, and have fulfilled their role as experts competently and professionally. It can be said that the Experts by Experience Group has developed to the point where it now occupies a legitimate place within the specialist workforce for prevention.

Many leading organisations in violence prevention and response, as well as leading organisations from the disability sector, have **consulted meaningfully** with the Experts by Experience Group. Clients report that the women's contributions have positively informed the direction of their work. Women report improved skills and confidence in disability and/or violence prevention leadership and advocacy; for some this has led to consultancies or other opportunities outside of the group, including paid employment.

The Program **centred lived experience** throughout all client engagements, and this has been nothing short of sound practice in consultation and co-design. While clients have gained important inputs into their practices, policies, programs and guides or other resources, they have also been *exposed* to a process that is authentic and reciprocal, not merely tokenistic or a 'tick the box,' a process that values the expertise of women most impacted by discrimination and inequity. In showing how sound consultation and co-design in prevention should be done, *the process was action on the drivers of violence in real time*.

The Program took lived experience into its **workforces training and other capacity building activity**. As with the Experts by Experience Group, it achieved this through consultation and co-design, but also through its exceptional model of co-facilitation. Co-facilitation broadened the reach of lived experience by extending it to specialist and contributor sectors and workforces. It also produced powerful learning impacts. The Program consulted women with lived experience to co-design and produce **highquality content** on drivers of violence against women with disabilities and how to prevent it, not only for training material but for accompanying tools. These tools included a series of nine poster-style information sheets titled Taking Action (along with a written guide) that each present the drivers of violence against women with disabilities and actions to prevent it.

Tools such as these were intended for integration into the training content as they came to hand. They were also released through **well-attended public events** to increase their reach and build broader awareness of violence against women with disabilities and its prevention. The Taking Action launch, as part of International Women's Day 2021, was exceptional in this regard, with 16 women with disabilities speaking to purpose on the lived experience of sexism and ableism and taking attendees through the actions we can all do to transform the drivers of violence.

The Program's tools are available via WDV's website. Some Program content has been embedded into high-quality tertiary education or professional practice online courses that give users credentials in gender, disability, and violence prevention, and lend longevity to the Program's content beyond the current phase.

Over the last two years, WDV has supported the participation of Program Team members in **external engagements** with prevention, disability, or gender equity advisory committees, working groups, networks or other consortia. Wherever primary prevention, gender equity or disability have been discussed, it's likely there would have been a member of the Program Team attending! While this kept everyone superbusy (a little too much at times) the returns were enormous for the Program and the field of preventing violence against women with disabilities more broadly.

These engagements meant the Program Team was able to keep a 'finger on the pulse' when it came to emerging policy or other developments relevant to implementation and adapt activities to these changing contexts. Engagements also meant there was always a woman at the table *consistently* applying a disability or intersectionality lens to prevention discussions, or a gender discrimination and inequality lens to disability discussions. Their presence created sparks of 'ah-ha' moments in multiple spaces and furnished opportunities for conversations between sectors that otherwise might not have considered shared work. It also gave the Program and WDV visibility at these gatherings, and solidified stakeholder views of the organisation's 'pinnacle role' (as put by one evaluation participant) in primary prevention.

Over the last two years, the Program's **strategic communications** have been numerous and multifaceted, ranging from well-attended public events to social media campaigns and publications via traditional mechanisms (e.g., WDV e-newsletters or quarterly newsletters). Collectively, these communications in have helped raise awareness of gender, disability, violence and prevention in Victoria, as well as consolidated stakeholder views of WDV as a trusted 'go to' source for high-quality resources and intersectional prevention practice.

#### **Conclusions drawn from the findings**

The Program had many achievements and was implemented to the highest quality. Through the Experts by Experience Group, the Program created a safe and inclusive environment that upskilled women with lived experience for consultation and codesign and supported them to step into their professional identities as experts who can speak purposefully and confidently to lived experience. The Program connected leading organisations and agencies in family violence response, the prevention sector, and the disability sector to the Experts by Experience Group, in ways that were never a 'tick the box' affair. *Quality engagements were intentionally created*.

The Program produced an array of materials and tools intended for integration into its training content but also available more broadly for awareness raising and capacity building for prevention. Lived experience was integral to the development process; *it was the critical factor for producing high-quality outputs.* The Program hosted three well-attended online public events to launch its resources and raise awareness of gender, disability and violence prevention among target workforces and sectors. The events centred lived experience, amplified the voices of women with disabilities, and showcased their expertise, generating *powerful shared experiences among attendees*.

The Program successfully refreshed its training offerings in ways that gave them flexibility in delivery and ensured alignment with the latest developments in disability and prevention practices. The refresh also successfully responded to the realities of the contributor workforces the Program targeted, among them disability service providers. Training participants received a high-quality product through the Program. They also got a co-facilitation and delivery experience that allowed for *impactful learning moments*.

Consultation, co-design and co-facilitation were all unique features of the Program, and the centring of lived experience was the common thread between them. The centring of lived experience meant valuing the expertise of women most impacted by gender discrimination and disability discrimination. It meant amplifying the voices of women most affected by the intersecting systems of sexism and ableism. It meant challenging dominant stereotypes about women with disabilities and promoting their equality. *It meant action on the drivers of violence in real time.* 

The Program has been hugely important in developing the prevention sector's lived experience workforce. This has come about through the upskilling, support and *employment* of the Experts by Experience women, and in the composition of the Program Team. *What the Program has built in this lived experience workforce simply doesn't exist anywhere else and is unique to Victorian primary prevention.* 

#### **Recommendations arising from the evaluation**

**Recommendation 1**. That WDV builds on its existing relationship with the Centre for Workforce Excellence (CWE) at Family Safety Victoria (FSV) to strategically locate the Program's capacity building activities in the context of the reform agenda for the next few years, with specific attention paid to how these activities can continue to support CWE's implementation of Action 1.10 and Action 2.2 of the *Rolling Action Plan 2019–2022* for *Building from Strength*. It is suggested that the Program's non-accredited

training offerings to specialist prevention and contributor workforces continue to be reflected in Action 1.10, supported by a refreshed industry needs analysis currently being undertaken by WDV. It is suggested that conversations around Action 2.2 include opportunities for how the Program's high-quality training content and associated resources can be effectively integrated into the accredited training for specialist and contributor prevention workforces that CWE has commenced working on.

**Recommendation 2**. That WDV pursues explorations around an endorsement pathway for the Program as set out in the scoping paper presented to the Program Advisory Group (PAG) at the October 2020 meeting. This pathway should be approached as a means to increase the Program's reach to and engagement with specialist prevention and contributor workforces. These explorations can be run in parallel with (but are not reliant upon) Respect Victoria's development of an endorsement framework for prevention initiatives more broadly, depending on the timing.

**Recommendation 3**. That WDV develops a strategy for Program representation on high-level prevention committees or structures, among them (but not limited to) the prevention strategic reference group of the Family Violence Reform Advisory Group, so that intersectional prevention practice continues to be heard loud and clear at the reform governance level and at other strategic prevention levels.

**Recommendation 4**. That WDV re-establishes the cross-sector PAG to provide strategic advice and support to the Program on reach, delivery and sustainability; and that WDV strongly considers introducing another complementary structure that can support implementation 'on the ground.' This might be working groups of the PAG, or it might be a dedicated Program Implementation Group (PIG) as was in place to good effect during the Program's pilot years.

**Recommendation 5**. That the Program continues to upskill and support the Experts by Experience Group for consultation and co-design, as they are sought after for their expertise and are an integral part of intersectional prevention practice in Victoria. Added to this, that the Program develops a formal strategy to upskill and support the Experts by Experience Group to themselves be co-facilitators of leading best practice consultation and co-design.

**Recommendation 6**. That WDV advocates to the Victorian Government to properly recognise and integrate the Program's unique lived experience workforce into Victoria's prevention infrastructure, noting that full recognition and proper integration are not helped (but hindered) by cycles of short-term funding. In other words, that WDV and the Victorian Government work on solutions for the continued sustained existence and development of this vital part of the prevention workforce in ongoing recurrently funded ways.

**Recommendation 7**. That WDV communicates the findings contained in this evaluation report to whomever and whenever it needs to, as evidence of the Program's leading best practice in consultation, co-design, co-facilitation and intersectional prevention practice, and to support the implementation of Recommendation 1 to Recommendation 6 above.

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# **About the Program**

#### A primary prevention initiative

The Gender and Disability Workforce Development Program (the Program) is an initiative of Women with Disabilities Victoria (WDV) that seeks to prevent violence against women with disabilities *before it occurs*. As a primary prevention initiative, the Program contains a number of mutually reinforcing activities that target the underlying causes of violence, also known as the drivers, in order to transform them. By doing this, the necessary conditions that allow violence against women with disabilities to happen in the first place are transformed. The term 'primary prevention' is borrowed from the fields of public health and health promotion, in which leaders, experts and practitioners regularly look 'upstream' to the modifiable socio-economic determinants of population health issues appearing 'downstream' to tackle the first or primary causes of the problems.

In Victoria, work in the primary prevention of violence against women has developed steadily over the last two decades, guided by frameworks such as VicHealth's *Preventing Violence Before it Occurs: A framework and background paper to guide the primary prevention of violence against women* (VicHealth, 2007) and more recently Our Watch's *Change the Story: A shared framework for the primary prevention of violence against women and their children in Australia.* (Our Watch, ANROWS and VicHealth, 2015). As a national approach to primary prevention, *Change the Story* uses international research to update and advance the earlier VicHealth framework, further consolidating the evidence around what drives violence and the actions to transform these.

According to *Change the Story*, the necessary condition of violence against women is gender inequality in public and private life: the unequal distribution of power, resources, opportunity, and value afforded to men and women across all facets of society. This condition is expressed in four ways:

- the condoning of violence against women;
- men's control of decision-making and limits to women's independence;
- rigid gender roles and stereotyped constructions of masculinity and femininity; and
- male peer relations that emphasise aggression and disrespect.

Collectively, these are described in *Change the Story* as the gendered drivers of violence against women.

The gendered drivers arise from (and are maintained by) norms, structures and practices produced in and through time. As drivers, they are felt across society, in organisations and communities, and within our interpersonal relationships. This is known as the social ecology, another concept drawn from public health. It means that gender inequality is *systemic*. From a primary prevention view, the gendered drivers, as upstream causes, are also modifiable: they are not inherent to humankind. *We can change the story of violence against women by acting on the gendered drivers*.



Figure 1 – Social media tile produced by Our Watch

This is where the call to action on violence against women lies. According to *Change the Story*, the most important action we can take is to promote and normalise gender equality in public and private life.

#### **Intersectional prevention practices**

Drawing on an established body of international interdisciplinary scholarship, *Change the Story* recognises that the gendered drivers never operate in isolation but *intersect* with other historically based forces that operate across the social ecology. (Our Watch, 2017) Figure 2 shows how WDV understands

this critical concept of intersecting systems, with the gendered drivers (represented as sexism) as one of many forces that organise hierarchical relations of privilege and oppression in society, which in turn impact our lived experience and social identity. In the diagram, ableism is among these systems.



Figure 2 – Intersecting systems of privilege and oppression and their influence on socio-economic positioning, lived experience and social identity (reproduced with permission from WDV)

In terms of what drives violence against women, intersecting systems further influence the unequal distribution of power, resources, opportunity and value between women and men, and the hierarchical relations of privilege and oppression between them. The more *compounding* these unequal relations, the *less* equality that exists, and the *greater* the exposures to violence – its prevalence, dynamics, and contexts.

WDV knows that the intersection of gender-based *and* disability-based systems of discrimination increases the risk of violence against women with disabilities compared to women without disabilities. WDV knows that women with disabilities experiencing violence do so at higher rates than women without disabilities; that the violence often

involves multiple perpetrators; that the violence is often with increased levels of severity and for longer periods of time; and that the violence is often in ways that are unique to them as women, such as the withholding of their medication or disability aids. This is what women with disabilities report and the research shows. WDV also knows that unless the intersecting drivers of sexism and ableism are transformed *at the same time*, the violence that is perpetrated against women with disabilities will continue unabated.

This is why WDV is leading the way to *change the story of violence against women with disabilities* through intersectional prevention practices, such as the Gender and Disability Workforce Development Program.

## The urgent need for action

Prevalence data tell us that initiatives like the Gender and Disability Workforce Development Program are urgently needed because violence against women with disabilities is highly prevalent and extremely serious – indeed, it is a national emergency. The Australian Bureau of Statistics Personal Safety Survey (PSS) is the most reputable population-based survey on women's safety. Findings from the latest iteration in 2016 show that since the age of 15 years:

- two in three women with disabilities (65%) report at least one incident of violence;<sup>2</sup>
- one in three women with disabilities (36%) report at least one incident of physical and/or sexual violence by an intimate partner, whether current or previous and living with them or not;
- women with disabilities are twice as likely than women without disabilities to report sexual violence; and
- 74% of women with psychological impairment and 72% of women with cognitive impairment report at least one incident of violence.

Over a 12-month period:

- women with disabilities are at 2.3 times the risk of violence by an intimate partner than women without disabilities;
- some 4% of women with disabilities report at least one incident of sexual violence compared to less than 2% of women without disabilities; and
- one in four young women with disabilities (18–29 years) report at least one incident of violence.

These statistics have been retrieved from an evidence synthesis recently completed by researchers at the University of Melbourne, as part of a project commissioned by Respect Victoria (Sutherland et al., 2021). In addition to exploring prevalence, the researchers build a strong case for innovations like the Gender and Disability Workforce Development Program, because our knowledge is still growing on how best to prevent violence against women with disabilities – especially when it comes to transformative action across *all* levels of the social ecology (societal, community, organisational and individual). The researchers conclude that more investment is

<sup>&</sup>lt;sup>2</sup> Unless specified, the term 'violence' in these figures is inclusive of physical violence, sexual violence, intimate partner violence, emotional abuse and/or stalking.

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needed in prevention programs that are multi-level in this sense, and that:

- amplify the voices of women with disabilities by adopting co-design principles across all stages of design and implementation;
- foster cross-sector collaborations between disability services, women's health services, and mainstream primary prevention organisations;
- develop stronger theoretical understandings on the drivers of violence against women with disabilities that are specific and not additional to existing frameworks;
- embed intersectional prevention practices in their approach; and
- undertake high-quality evaluations.

The researchers cite the Gender and Disability Workforce Development Program 2013–2015 (pilot years) as one of the few examples of work that can help to pave the way for more multi-level, multi-dimensional programmatic responses. The current iteration of the Program, spanning 2017 to 2021, demonstrates all of these features; but before we get to this, a brief account of the history of the Program and its location in the Victorian policy landscape are in order.

#### The pilot years 2013 to 2015

The Gender and Disability Workforce Development Program operated from 2013 to 2015 as a pilot that sought to build the capacity of disability organisations for cultural change i.e., to be more gender equitable in their policies, practices and structures (including leadership). Deep engagement with each organisational partner was a feature of the pilot through a dual approach: training on gender, disability, violence against women with disabilities, and how to prevent violence; and follow up communities of practice to progress the organisational work of cultural change. A standout feature of the approach was the centring of lived experience in all partner engagements, and the way this translated into a ground-breaking model of *co-facilitation* for the training and communities of practice. (WDV, 2015)

The co-facilitation model saw women with disabilities recruited to the Program as experts in their own lived experience. Women were trained and supported for cofacilitation and paired with facilitators from the women's health and specialist family violence and sexual assault sectors. The model was ground-breaking because it demonstrated equitable, respectful relationships between co-facilitators to the organisational partners in real time. Program evaluation found this model had powerful learning impacts in that it gave real-time authenticity and depth to the topics of discrimination, violence and its prevention. Women with disabilities experienced positive changes too, in that their skills and confidence increased as experts and facilitators. The centring of lived experience and the co-facilitation model are retained in the Program to the present day, as discussed further below.

#### The refinement years 2015 to 2017

WDV undertook refinements to the Program from 2015 to 2017. This work included a disability industry needs analysis and a strategic development and implementation plan. The work was required because the disability sector and the prevention sector were undergoing significant change during this time, in response to implementation of the National Disability Insurance Scheme (NDIS) and the conclusion of the Victorian

Royal Commission into Family Violence (RCFV) respectively.

Full implementation of the NDIS commenced in Victoria in July 2016. It reflected a generational shift in disability service delivery with significant transitions to client driven business models and a redefining of what the disability sector is. WDV would need to find ways of positioning the Program in an ever dispersed, time-pressured and expanding workforce to maintain the Program's relevance to the capacity building needs of the disability sector.

The conclusion of the RCFV in March 2016 reflected another massive generational shift – this time in terms of the political will and leadership to reform a broken, disconnected family violence system and transform the drivers of violence. Never before had Victorians experienced this level of commitment 'from the top' to responding to and ending family violence, including significant resourcing and budget allocations to wholeof-system responses and (admittedly to a lesser extent) whole-of-community prevention. WDV would need to find ways of positioning the Program in a raft of major policy arising from the RCVF recommendations to take fullest advantage of such a monumental time in political history and secure the Program's place in changing the story of violence against women with disabilities.

#### A rapidly evolving prevention landscape

The family violence and violence against women prevention landscape has evolved even more rapidly as implementation of major pieces of policy have gotten underway. The Victorian Government's overarching policy for all 227 RCFV recommendations is *Ending Family Violence: Victoria's plan for change*. This policy was released in 2016, and we are currently up to its second *Rolling Action Plan 2020–2023*.



Figure 3 – RCFV Report and Recommendations in eight volumes

The *Rolling Action Plan 2020–2023* contains 12 priority areas, among them primary prevention. Selected prevention activities relevant to the Gender and Disability

Workforce Development Program include:

- establishment of a primary prevention strategic reference group of the Family Violence Reform Advisory Group, comprising community organisations working in the prevention of family violence (WDV has representation on this group);
- a plan for supporting the current primary prevention workforce and growing it, as well as a plan to engage with a broader range of contributor workforces, both as part of *Building from Strength: 10-year industry plan for family violence prevention and response* (see further below); and
- accredited family violence prevention courses for specialist and contributor workforces (also as part of *Building from Strength*).

*Free from Violence: Victoria's strategy to prevent family violence and all forms of violence against women*, released in 2017, is the Victorian Government's dedicated strategy for the primary prevention of family violence and all forms of violence against women. This strategy responds to a specific recommendation of the RCFV for a long-term, stand-alone, and funded primary prevention initiative as part of the overarching policy for ending family violence. Development has commenced for the second action plan of *Free from Violence*, and stakeholders like WDV can expect to hear more in late 2021 about activities for the next three years of work across Victoria. If we are to go by the latest report of the Family Violence Reform Implementation Monitor (FVRIM), these activities are very likely to include measures to ensure prevention operates as a strong, coherent, and coordinated system as well as an integrated part of the family violence system overall. Indeed, FVRIM proposes the design, implementation and resourcing of infrastructure that incorporates clear roles and responsibilities for all players in prevention – government and non-government alike – as a priority for *Ending Family Violence* and associated policy. (FVRIM, 2021)

*Building from Strength*, released in 2017, outlines the Victorian Government's vision for the workforces that respond to and prevent family violence, and the plan to realise that vision. The vision of an integrated system that is flexible, dynamic, and person-centred working to respond to family violence and prevent it. The strategy's first *Rolling Action Plan 2019–2022* has four areas. Focus Area 1 'Building workforce capability' and Focus Area 2 'Enhancing training architecture' are most relevant to the Gender and Disability Workforce Development Program.

Workforce capability building is vital to creating a system that works together. Of particular priority is the capability building of specialist *and* contributor workforces for prevention because primary prevention is everyone's business, and *all* workforces are capable of fulfilling their particular role in preventing violence. Furthermore, Action 1.10 is about delivering training for the disability and social service sectors so that primary prevention is embedded into the work of practitioners and organisations; and the Gender and Disability Workforce Development Program is explicitly named as the means for implementing this action. Implementing partners are family violence reform agencies of the Victorian Government, among them Centre for Workforce Excellence (CWE), Family Safety Victoria (FSV). Action 1.10, and indeed all other actions for building the capability of prevention workforces, is supported by the strategy's accompanying tool, the *Preventing Family Violence and Violence against Women Capability Framework*, released in 2017.

The focus on architecture is important for a sustainable training approach. Of particular priority are options for accredited training so that consistency and quality are maintained while scale of delivery is increased. Action 2.2. is about developing accredited units of competency in gender equity and prevention to meet industry capacity building needs of current and emerging prevention workforce. Collaboration between educational institutions and prevention partners is required for this action; WDV is named in this context.

The Victorian Government has recently refreshed its framework to help all partners involved in *Ending Family Violence* track progress towards the long-term change we want to see. Known as the *Family Violence Outcomes Framework*, this document outlines four domains of change. Domain 1 is the primary prevention domain; the desired end state is that family violence and gender inequality are not tolerated. Of the total 26 outcome indicators for this domain, the following four have relevance to the Gender and Disability Workforce Development Program, in that the Program's objectives are contributing to their direction:

- increased number of organisations and institutions that model and promote inclusive behaviour;
- increased awareness of what constitutes violence;
- increased recognition of the significant impact of violence on victim survivors; and
- increased awareness and understanding of the extent and impact of gender inequality.

On the legislative front is the *Gender Equality Act 2020*, an action contained in *Safe and Strong: A Victorian Gender Equality Strategy*. The *Gender Equality Act 2020* requires local councils, the public sector, and universities to take positive action towards achieving workplace gender equality, and to consider and promote gender equality in policies, programs and services that interface with their communities. The *Gender Equality Act 2020* came into effect on 31 March 2021, with prescribed entities now underway in workplace gender audits and gender equality action plans.

At the national level, three developments must be mentioned as they are likely to have a bearing on the prevention landscape for future iterations of the Gender and Disability Workforce Development Program.

- The Council of Australian Governments (COAG) *National Plan to Reduce Violence against Women and their Children 2010–2022* is now in its final phase of implementation (*Fourth Action Plan 2019–2022*) with processes underway for the development of its next iteration.
- The House of Representatives Standing Committee on Social Policy and Legal Affairs has recently completed its Inquiry into Family, Domestic and Sexual Violence, with the final report released in April 2021. It is expected that report findings will inform the next iteration of the national plan to reduce violence against women and their children, above.
- The Australian Government appointed Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability released its interim report in October 2020 and continues to hear evidence throughout 2021, with the final report expected in April 2022.

## Leading-edge programming

The current iteration of the Program commenced in 2017 and is concluding in 2021. Over this time, the Program has received funding from what is now known as the Office for Prevention of Family Violence and Coordination (OPFVC) at the Department of Families, Fairness and Housing (DFFH).<sup>3</sup> In its current form, the Program responds to the refinements work undertaken from 2015 to 2017, and WDV's ongoing 'situational awareness' of the rapidly evolving prevention landscape post-RCVF as described in the preceding section – particularly the direction of *Building from Strength* and Focus Area 1 (Action 1.10) of the *Rolling Action Plan 2019–2022.* In addition, the Program in its current form contains the features proposed by University of Melbourne research of leading-edge programming to prevent violence against women with disabilities discussed above. (Sutherland et al., 2021)

The Program has a strong focus on mutually reinforcing activities that work across multiple levels of the social ecology – particularly community, organisational and individual. It is targeted at specialist and contributor sectors and workforces that have a role to play in preventing violence against women with disabilities. It seeks to build capability in these sectors and workforces for intersectional prevention practice, including their capacity for cross-sector collaborations.

The Program has also retained the standout elements from the pilot years; namely, the centring of lived experience and the co-facilitation model. Importantly, it adds consultation and co-design dimensions to these centrepiece elements and in doing so elevates the expertise of women with disabilities, amplifies their voices and promotes their equality. *The Program demonstrates action on the drivers of violence against women with disabilities at the same time as it builds the capacity of others for action.* 

Along the way, the Program has produced high-quality content to deepen our understandings of the drivers of violence against women with disabilities – not only through its training or online course materials but as accessible tools for intersectional prevention practice. It is also undertaking a high-quality evaluation grounded in values-driven and participatory modes of design and implementation.

#### **Program objectives and activities**

The Program has five high-level objectives under which these multi-level and mutually reinforcing activities can be located and coordinated.

- 1. Strengthen strategic partnerships for preventing violence against women with disabilities
- 2. Enhance the capacity of WDV and partners to develop and deliver quality evidence-informed workforce prevention programs
- Build the capacity of women with disabilities and the prevention and social services workforces (including disability service providers) to prevent violence against women with disabilities

<sup>&</sup>lt;sup>3</sup> Prior to the machinery of government change in February 2021, the Program's funding was through the Office for Women, Department of Premier and Cabinet.

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- 4. Strategically position WDV in an evolving policy context of family violence reform and NDIS rollout
- 5. Contribute to building the evidence base for preventing violence against women with disabilities

The Program's main activities during implementation:

- **Experts by Experience Group** as the lived experience centrepiece for consultation and co-design;
- co-designed training and online courses targeting prevention and social services workforces, including disability organisations and service providers, with training co-facilitation and delivery shared equally and respectfully by experts in lived experience and experts in prevention;
- other cross-sector capacity building work i.e., a regional Community of Practice (CoP);
- co-designed materials and tools that raise awareness of violence against women with disabilities, help build knowledge of the intersecting drivers, and help strengthen skills in preventing such violence from happening in the first place;
- activities such as webinars, events, social media, and communications that raise awareness of violence against women with disabilities and its prevention, and maintain its profile in public discourse; and
- **strategic engagements** that position the Program's relevance in the post-RCFV prevention landscape, deliver consistent messaging around the intersecting drivers of violence against women with disabilities, and consolidate WDV's leadership in intersectional prevention practice.

These activities were in full flight during the second half of the Program from 2019 to 2021, and are the subject matter of this report, itself the result of a process that ran alongside Program implementation in its final year. For more on the evaluation design and implementation, see <u>About the evaluation</u>.'

#### Program outputs and reach 'at a glance'

The outputs arising from the Program's main activities were multiple and significant. Many of these will be expanded upon later in this report when findings arising from the evaluation are presented, and their value to different beneficiaries and their contribution to the Program's impact are unpacked.

For now, Table 1 offers an 'at a glance' (not exhaustive) view of Program outputs and reach. Readers can refer to Table 1 as a navigating tool for the discussion in 'Evaluation findings: Thematic presentation.'

	T
Experts by Experience Group	<ul> <li>Recruitment and employment of 12 women, 11 continuing to the end of the Program;</li> </ul>
	<ul> <li>Ongoing professional development to support the women in their role as experts;</li> </ul>
	<ul> <li>Consultation and co-design on policy development, resource development, practice improvement and programming sought from leading prevention and disability entities among them 1800 RESPECT, DV Vic, Our Watch, Women with Disabilities Australia, Australian Network on Disability, WIRE and Good Shepherd</li> </ul>
	<ul> <li>Consultation and co-design on policy development, resource development and practice improvement sought from various WDV program areas</li> </ul>
Workforces training and online courses	Co-designed training content for workforce capacity development
	<ul> <li>4 calendar training programs plus tailored training to 8 clients; all co-facilitated and delivered; over 650 attendees from specialist and contributor sectors or workforces</li> </ul>
	<ul> <li>1 micro-credential in gender and disability – in partnership with RMIT University and Women Health Victoria (WHV)</li> </ul>
	<ul> <li>2-part online self-paced micro-course to raise awareness of violence against women with disabilities and actions to prevent it</li> </ul>
Cross-sector CoP	<ul> <li>1 cross-sector CoP piloted in Melbourne's east attracting 30 members from across specialist and contributor sectors or workforces</li> </ul>
	<ul> <li>4 meetings and 1 tailored training session on preventing violence against women with disabilities, all co-facilitated and delivered</li> </ul>
Resources for awareness-raising and/or skills building	<ul> <li>9 poster-style information sheets covering the drivers of violence against women with disabilities and actions to prevent it, accompanied by a written guide</li> </ul>
	<ul> <li>A 4-set video series with accompanying guides covering violence against women with disabilities and the intervention spectrum i.e., response, early intervention, and primary prevention – in partnership with National Disability Service (NDS)</li> </ul>
	<ul> <li>A ground-breaking video featuring women with lived experience and an ally speaking on the drivers of violence and actions to prevent it, available in full length format and as 5 individual chapters (i.e., 6 videos in total)</li> </ul>
	<ul> <li>An animated video presenting 6 keystones for understanding disability</li> </ul>
Webinars, events, social media, and communications	<ul> <li>3 webinars launching various Program resources, with close to 400 attendees in total from across specialist and contributor sectors and workforces (and beyond)</li> </ul>
	<ul> <li>Social media campaigns for the annual UN 16 Days of Activism against Gender-based Violence campaign and UN International Day of Persons with Disabilities, 'Disability Disrespect: Call it out' (micro-aggressions) (2019) and 'Respect Is' (2020)</li> </ul>

Strategic	<ul> <li>Program Advisory Group (PAG) of cross-sector stakeholders in</li></ul>
engagements	prevention, disability
	<ul> <li>Representation at disability or gender equity advisory committees, working groups, networks, or other consortia</li> <li>Consistent foregrounding of gender discrimination in disability discussions; disability and intersectional practice in gender equity or prevention discussions</li> </ul>

Table 1 – Program outputs and reach 'at a glance' 2019–2021

## **COVID-19 global pandemic**

The Victorian Government's reform agenda to end family violence is both sweeping and ambitious in scope, for it is seeking enduring and systemic change to how we respond to family violence as well as a transformation of its drivers. Since 2016, government and non-government stakeholders have partnered in unprecedented levels of activity as the agenda has unfolded, often at a pace never experienced too.

What no one could have anticipated at the start of this once-in-a-generation reform was a global pandemic, officially declared by World Health Organization on 11 February 2020, of the COVID-19 disease caused by the coronavirus SARS-CoV-2. Over the last 18 months, stakeholders across Victoria have continued to play their part in important reform activity, for ending family violence and violence against women are far too important to wait until the pandemic is over. But this work has had to occur against the backdrop of a one-in-one-hundred-year public health crisis. As Victoria (Melbourne in particular) has responded to consecutive waves of infection and regular occurrences of smaller clusters, public health lockdowns and economic slowdowns have become our 'new normal.' These have called for adaptiveness and agility on everyone's part, as we have adjusted to ever-continuing and ever-evolving circumstances under state of emergency and (for much of the second half of 2020) state of disaster conditions.

Given this backdrop, the Program's outputs and reach summarised in Table 1 are impressive achievements, especially given that almost all the activities that ordinarily would have occurred in-person 'pivoted' to online modes from early in 2020. Over and above this list of outputs and reach, what else can be said about the Program's successes? This is a question the Program's evaluation was designed to answer.

# About the evaluation

## **Evaluation design process**

The evaluation of the Gender and Disability Workforce Development Program commenced in December 2020 with the first in a series of evaluator-led workshops to revisit and confirm the Program Logic Model and Evaluation Plan. These documents had been previously developed by the evaluator and the Program Team from late 2018 to early 2019; however, everyone recognised the need to refresh these in the light of implementation developments, especially once the COVID-19 global pandemic landed on our shores, and staff changes since the documents were initially shaped.

The first workshop gave the Program Team an opportunity to reconnect with the Program Logic Model and test the fit of its components. This thinking was continued into a second workshop in February 2021, which also commenced the shared work of testing the fit of the 'hallmarks of achievement' or SMART indicators. There were two sets of indicators to review. The first was in relation to the Program's outputs (i.e., markers of quality and reach); the second was in relation to the changes desired as a direct result of the Program's activities (i.e., impact indicators). Two further workshops solidified the thinking, and the refreshed Program Logic Model and Evaluation Plan documents were finalised by early May 2021. The refined Program Logic Model and refined Evaluation Plan can be found at Appendix 1 and Appendix 2 respectively.

## Evaluation purpose, intended users and intended use

The Evaluation Plan contains the evaluation purpose, also confirmed during the refresh process described above. The evaluation purpose is to:

- capture the achievements of, and lessons learned from, the design and implementation of the Program over the two-year period 2019–2021;
- determine the value of the Program from the perspectives of those involved, among them:
  - women with disabilities (the experts);
  - members of the Program Team;
  - sectors and workforces for the prevention of violence against women with disabilities i.e., women's health, disability and social services;
  - WDV and other stakeholders of Victorian primary prevention, including members of the PAG;
- draw conclusions about the Program so WDV and stakeholders can make informed decisions about 'what next' for the Program; and
- support WDV to communicate and share the Program's results including (but not limited to) reporting to the Victorian Government.

In line with the purpose above, the overarching questions to be answered through the evaluation are:

- 1. What are the achievements of, and lessons learned from, Program design and implementation?
- 2. How was design and implementation quality demonstrated and maintained by the Program's various activities?

- 3. What was the value of the Program to those involved in its various activities?
- 4. What conclusions can be made about the Program, especially in terms of 'what next' for WDV and workforces capability development for Victorian primary prevention?
- 5. What are the strategic recommendations arising from the evaluation?

The evaluation's primary intended user is explained in the Evaluation Plan and is WDV and the Program Team. The primary intended use is also contained in this plan: it is to support the Program Team in sound strategic decision making around WDV's continued efforts to develop Victorian workforce capacity for the prevention of violence against women with disabilities.

Evaluation conclusions and recommendations will also help WDV and stakeholders to ensure continued alignments of the Program, should further funds be available, with the Victorian Government's ongoing commitment to building workforce capacity for sound intersectional practice, as set out in *Building from Strength: 10-year industry plan for family violence and response*.

## Data sources and data collection methods

Guided by the confirmed indicator set, the following data sources or methods of collecting data were used:

- A range of Program documents such as PAG Terms of Reference, agendas, and minutes; training and online course outlines and content; training delivery tracking records; video-recorded training and webinar sessions; Experts by Experience Group records; promotional flyers; presentation slides
- Data routinely collected by the Program Team during implementation such as participant feedback to training and webinars, Experts by experience feedback
- Focus groups led by the evaluator for the following groups:
  - PAG members
  - Experts by Experience Group members
  - Program Team members (one focus group and one shared interview)
  - Co-facilitators of the training offerings and cross-sector CoP
- Interviews conducted by the evaluator
  - <sup>o</sup> clients who consulted the Experts by Experience Group
  - members of the CoP
- Direct observation e.g., attendance at webinars

## **Evaluation participants**

Evaluation participants were recruited to focus groups and interviews from May 2021, with these methods of data collection occurring over May, June and into July 2021. The evaluator led a total of five focus groups (one of these was a shared interview) and two individual interviews. She prepared a plain language one-page information sheet on the purpose of the evaluation and how confidentiality and anonymity would be maintained and shared this with discussants and interviewees ahead of their focus groups and interviews, along with their questions. For the Experts by Experience Group, the information was provided verbally prior to their focus group. Participants gave their consent to be involved in their respective focus groups or interviews for the purpose as set out in the information sheet. Permission was also given for the

sessions to be audio-recorded to assist with notetaking. Focus groups were held via internet video application (Zoom); and interviews were conducted by phone. A total of 26 attendees were accepted for the focus groups and interviews, noting that some attendees had more than one opportunity to participate in a focus group as they had multiple connection points to the Program e.g., as Program Team member and training facilitator. The focus groups and interviews generated around nine hours of audio for playback and analysis.

#### Data analysis and write up

Data analysis and the write up of findings into the initial drafts of the evaluation report took place over July 2021, with the report finalised by July 30 upon receiving feedback and input from reviewers drawn from the Program Team and WDV more broadly.

# **Evaluation findings (thematic presentation)**

#### Lived experience, consultation and co-design

#### Synopsis of main findings

The Experts by Experience Group is unique to the Program and has emerged over the last two years as vital to intersectional prevention practice in Victoria. Members are women with lived experience employed by WDV as part of the staff team, a ground-breaking feature, and who offer consultancy and co-design services on gender, disability and violence prevention. Over the course of implementation, the women have received ongoing professional development, support and guidance, and have fulfilled their role as experts competently and professionally. It can be said that the Experts by Experience Group has developed to the point where it now occupies a legitimate place within the specialist workforce for prevention.

Many leading organisations in violence prevention and response, as well as leading organisations from the disability sector, have consulted meaningfully with the Experts by Experience Group. Clients report that the women's contributions have positively informed the direction of their work. Women report improved skills and confidence in disability and/or violence prevention leadership and advocacy; for some this has led to consultancies or other opportunities outside of the group, including paid employment.

The Program centred women's lived experience throughout all client engagements, and this has been nothing short of sound practice in consultation and co-design. While clients have gained important inputs into their practices, policies, programs and guides or other resources, they have also been *exposed* to a process that is authentic and reciprocal, not merely tokenistic or a 'tick the box,' a process that values the expertise of women most impacted by discrimination and inequity. In showing how sound consultation and co-design in prevention should be done, *the process was action on the drivers of violence in real time*.

#### A strong platform to establish the group

The Experts by Experience Group was built on a strong platform in that it drew on the achievements and lessons learned from the Lived Experience Co-facilitators Group that functioned during the <u>Program pilot years 2013 to 2015</u>. One of the findings from the pilot's evaluation was around the challenge of maintaining a pool of lived experience co-facilitators in the context of sporadic training events. Other ways to engage the leadership and expertise of the women were required: hence, a refreshed role for the experts that shifted the focus away from training co-facilitation to consultation and co-design. WDV introduced an important Program design modification to support the transition: it positioned the Experts by Experience Group as one of four Program levels for lived experience, with the other three being a Program Lived Experience Program Officer, Co-facilitation. It was this layering of lived experience throughout the Program's governance and staffing that made for a smooth establishment of the Experts by Experience Group.

We had a really good framework that guided the establishment of the group. Its beginnings were well thought out and considered, and there

was quite a bit of lead up time to send out information about the group. There was identification of women in the community who were going to be amazing advocates, not just for themselves but for the community. A lot of the strength was in the confidence we had in the Program and in the women themselves to be able to come to the meetings and give important input. (Program Team member)

Recruitment channels included members from the Lived Experience Co-facilitators Group, women from other WDV programs such as Enabling Women and Our Right to Respect, and WDV members. The group's information session was held in September 2018, and the group had its first meeting the following month. Program documents show that 14 women regularly attended the group over the 2019 to 2020 year, and 12 women regularly attended over the 2020 to 2021 year, with most having had a relationship with WDV prior to joining Experts by Experience including past work with the organisation (consultancies or employment) and a return from retirement for one!

Documents show that the group met a total of 27 times excluding the information session, with each meeting at three hours in length; and that meetings transitioned from in-person to online (via Zoom) from March 2020 to comply with public health directives on work-from-home arrangements and other restrictions as waves of COVID-19 infections (and smaller clusters) swept through Victoria (and Melbourne in particular) from that time. This means that the group has mostly met on Zoom, the impacts of which are unpacked a little later in our discussion.

#### A safe, inclusive and supportive environment

The Program created a safe, inclusive and supportive environment for the experts to learn and lead through a combination of processes, personnel and guidance material.

Processes were contained in a group agreement confirmed at the start of every meeting and adjusted as needed. Agreements encompassed the fundamentals of meeting etiquette, including for Zoom, and a number of rules such as: permission to be inarticulate; say your name before speaking; raise your hand when you want to speak; listen respectfully; keep to time; and embrace curiosity. While the facilitators were women with lived experience and in this sense equal with group members, they did occupy a position of power in the group relative to the others. Acknowledging power differentials and how these might operate in the group was another rule that enabled safety and inclusion. One agreement that was consistently referred to by evaluation participants as important to the group's functioning and cohesion was the statement, 'No one knows everything but together we know a lot.' In a way, this statement embodied the group's essence.

One of our group agreements is, 'None of us knows everything but together we know a lot.' This is really the group ethos. When we put our experiences together, it brings out this wonderful wisdom. We all learn from each other, and we contribute that to various organisations consulting us. That ripple effect, it's great. (Experts by Experience member)

The culture of the group is very inclusive, it's very respectful. I think everyone has a purpose; everyone plays their role really well. (Program Team member)

In terms of personnel, the facilitators maintained an awareness of their role in guiding the women but not leading the group, especially when clients were consulting with the women and seeking their views on the policy, practices, resources or programs they had brought with them. The facilitators understood that best practice in consultation and co-design means 'stepping back so others can lead,' as put by one evaluation participant. Experts were also regularly asked by the facilitators to identify what they wanted to work on as part of their professional development, and which organisations or services they thought would benefit from having expert input.

I like the analogy of the go-go dancers ... because the experts are the experts in their own lives, and the experts are the ones directing this and leading this group. And we're there to guide and support but were not there to do. (Program Team member)

In terms of guidance material, the Program developed four steps to help clients with their preparations and facilitate an inclusive, accessible and reciprocal exchange. These steps are contained in a one-pager titled 'Guidelines for external consultations.' This guidance material resonates with other WDV resources, such as *Our Right to Safety and Respect: Guidelines for developing resources about safety from violence and abuse* – especially in allowing sufficient time and assistance for the genuine involvement of women i.e., not a 'tick the box' meeting. (WDV, 2017) The four steps in the one-pager are:

- provide context and discussion points ahead of time in an accessible format;
- ensure the agenda is not too full and allow a generous amount of time for discussion;
- where possible, use tools such as a whiteboard to help record the discussion points, and verbalise the points for those with vision impairment; and
- allow time at the end for experts to contribute (write down) any further points.

The one-pager was used by members of the Program Team as a tool for conversations with clients prior to the consultations, to clarify expectations and support their readiness. This was sometimes an extensive engagement and piece of professional development in and of itself, as it depended on 'where the client was at' with respect to best practice inclusion, accessibility and co-design.

Instead of coming in with 45 questions to give to the group in three hours, we'll say, 'Let's drill that down to five questions.' We'll ask them to think about how to work with hearing loops, or ways of providing accessible information for people who need plain English. There's a whole lot of work in there that could be captured as 'liaison' but is actually professional development for the [client]. (Program Team member)

I don't ever name our experts, but I talk about the women in the room and the range of experiences. I get questions like, 'Are they going to understand this,' and I say, 'Well, only if you put it in plain English. You don't need to over complicate it and we don't want to give them prereading so have a synopsis for us.' (Program Team member)

The group, and the way it's facilitated, is a great way to understand how you can create a safe and supportive space. Not every woman with

disabilities needs that kind of space, but because there's a spectrum of experiences, you're working with many different women, just the way the way the whole meeting is structured makes it safe for people to be themselves and to share. It's not something you see practised a lot in the mainstream sector. Things like having permission to be inarticulate. That's quite a unique facilitator note that comes from that group. And challenging our norms around time. Access is not just about making it a safe space but actually giving people time to speak and to process. (Experts by Experience client)

Some clients consulted with the group over a series of meetings and worked more deeply with the experts on specific pieces of work. This happened for the WIRE and Good Shepherd joint initiative, Intersectional Guide and Financial Capability Education Co-design Project, for instance, where consultation occurred three times from November 2020 to June 2021. One of the experts was also engaged by the Project to work with the team as a consultant for an additional amount of time. In these instances, WDV and the organisations involved developed a Memorandum of Understanding so that expectations were crystal clear on all sides.

#### Safety had its challenges on Zoom

The Program always put supports around the experts to keep them safe, especially when discussions or consultations focused on discrimination or violence. Both discrimination and violence against women with disabilities are prevalent and common experiences in our community, and having clients consult experts on such content does carry a level of risk around safety.

The way the Program has established and runs the group is leading practice because the women have supports put around them all the time, including during training or when they're being consulted on resources. We never bring up the topic of violence or disability discrimination without making sure that a support network is active and they're aware of it. (Program Team member)

While the Program carried through its safety measures into the Zoom environment, this did come with some challenges specific to the medium. The meeting in March 2020 focused on 'looking after ourselves and supporting one another' as a state of emergency was declared for Victoria and everyone headed into lockdown. There were many uncertainties and unknowns, which made learning how to use internet-based video applications such as Zoom 'feel like a big thing for the women to get their heads around.' That the facilitators were able to support and coach the experts to learn a new way of connecting with one another so that they could continue to participate in the group shows the extent of their duty of care. As put by one evaluation participant, 'For some, we were the only contact they [experts] would be having for quite a while.' Documentation supports this view, showing that the women were happy to be able to continue their advocacy and leadership through the group and thereby reduce social isolation during lockdown.

Zoom meant the group could continue, but it did have its downsides. Zoom is a very poor substitute for interpersonal connection, especially when it comes to offering comfort during times of distress. There was one consultation where distress did occur;

in the Zoom environment, however, group members felt unable to help in ways they otherwise would, that is, by getting around their friend.

She was there in the meeting and there was no way any of us could physically be there with her. She was going through something and none of us could be with her. Had it not been COVID-19, it would have been different. It highlights the inadequacies of Zoom. (Experts by Experience member)

When she was upset, we couldn't reach her, do what we'd normally do for her, get her a drink. It made it very difficult for us too. That consultation was a very confronting one for her, and it was a confronting one for all of us, because one of our teammates was upset so it made it confronting for all of us. (Experts by Experience member)

#### Our lived experience was 'lifted' into a wider view

The Program provided ongoing professional development to the women to support them in their experts role, and for many women the training experience, combined with the consultation experience, has been transformational. Program documents show that the professional development occurred as peer-led learning through members of the Program Team or by inviting guest speakers to the group; and that 21 sessions in total were provided over the 2019 to 2020 period covering a wide range of topics. (Table 2)

Skills-based learning	<ul> <li>using lived experience to speak to purpose</li> <li>providing feedback and consultation in a professional setting</li> <li>identifying personal strengths and achievements; setting goals</li> <li>vicarious trauma and self-care strategies</li> <li>advocacy and leadership</li> <li>financial literacy</li> <li>co-design principles</li> <li>writing a speaker's biography</li> <li>public speaking</li> <li>understanding the recruitment process</li> <li>female-led employment services</li> </ul>
Content-based learning	<ul> <li>primary prevention of violence against women with disabilities</li> <li>bystander action including in a social media context</li> <li>understanding the impact of COVID-19 on women with disabilities</li> <li>our rights when accessing health services</li> </ul>

Table 2 – Experts by Experience professional development 2019–2020

In terms of knowledge, skills and confidence, the experts have reported many positive impacts through the professional development. Communication and public speaking were two big areas: the more they learned, the more they were able to 'speak up' – including when to speak, what to say and how to say it.

I've been able to use the training in so many different ways. The way I communicate is a lot clearer now than it used to be because I've learned to speak up and say what I need to say. My voice is a lot clearer now. My

speech has improved, it's improved to be able to express myself a lot easier, get my point across. (Experts by Experience member)

The content-based learning helped in this regard too. It gave experts the 'full and clear background knowledge' to be effective advocates and contribute to the consultations. As one expert put it, it meant 'we were all speaking the same speech.' For others, there was power in having a *collective* voice in the room built from a lived experience that is unique to each woman (her story) but is nonetheless *shared*.

You get strength from attending these meetings. Just the realisation that people consulting us do find it valuable. The knowledge that they are getting from a range of experiences in just one meeting. In one hour, there's a plethora of different experiences and resources that can be drawn upon. (Experts by Experience member)

Something that I think the group has done really well is the collective group voice when we're speaking. What someone says the next person supports and backs up. I think we've done that really well. (Experts by Experience member)

We have been successful because we had a clear common purpose and teamwork was fostered from the beginning. This enabled us to have a strong voice and common agenda, instead of coming with our own agendas. Outnumbering the people consulting us has also been important. (Experts by Experience member)

The standout impact, however, was the journey to becoming *well-rounded* advocates, meaning experts who can 'speak to purpose' through their lived experience and aren't simply 'stuck in their own stories,' as one evaluation participant put it. Through their professional development and consultation experience, their 'situated knowledge' as women with lived experience was lifted into a wider view of the structural systems of discrimination, and this became the standpoint for their expertise, advocacy and leadership.<sup>4</sup> This didn't mean personal stories were no longer important; *it did mean that personal stories weren't the only thing*. It also meant that their role as experts was more sustainable. Put simply, this process was entirely transformational.

I've definitely become a more well-rounded advocate. The thing I've learned most has been about boundaries, about using my own personal experience with family violence but also being okay to *not* use that experience, to not only have to talk about my personal experience but advocate in a more systemic way. Never on behalf of but taking a wider view and taking the plethora of experience we've got here and using that to inform my advocacy, rather than that narrow view of my own experience and continuing to retraumatise myself. That has been incredibly valuable. And I can do much more of this kind of work now because I've changed the way of doing it. (Experts by Experience member)

<sup>&</sup>lt;sup>4</sup> Situated knowledge is a core concept of feminist standpoint theory, which claims that all knowledge is socially and materially generated; that people who are most marginalised are able to produce knowledge that penetrates the real relations of power and privilege in society much better than those who hold power and privilege; and that the standpoints arising through such knowledge are therefore the most important of all viewpoints for transforming social relations. See S Harding ed., (2004) *The Feminist Standpoint Theory Reader: Intellectual and political controversies* 

I can hear the question being asked, I can notice my part in relation to it, and I can see the space between me and the answer. (Experts by Experience member)

The biggest learning moments I've seen in the women is them continuing to advocate for themselves as well as advocating for others with disabilities, when it's not their own disability but all disabilities in general. How to make the connections, how to best answer questions, and how to really engage their own professional identity. (Program Team member)

It's just foundational, it's changed everything for me. I'm completely and utterly in their debt [WDV] and very appreciative of the work they do and that I have done with them. (Experts by Experience member)

Evaluation participants gave many examples of the women speaking to purpose when being consulted, and even one time when a guest speaker was offering skills-based learning and the group switched into advocacy mode to let her know about inclusion and access!

When we consult and when we do training – obviously there are differences, but I think it can also feel similar. I think it's partly because of the way we approach the training. We approach the training in a *consultative* way. It's not like someone gives us the information, we take it on, we say thank you. In the group, it's really exciting because we've actually said that the training isn't a good fit. We've been able to give *them* some disability awareness training ourselves! (Experts by Experience member)

Speaking to purpose also occurred outside of the group; for instance, in various other advocacy committees or community groups that the women have joined. One such group is the PAG, which as mentioned above had representation from two women with lived experience. The two women were in fact drawn from the Experts by Experience Group. Indeed, WDV demonstrated its leading practice in consultation and co-design by recruiting from this group and bringing into the Program's high-level advisory group two upskilled women who could sit alongside representatives from statewide and national prevention and disability organisations *as their peers*.

My knowledge of violence and looking through the gender lens, and there's possibly a couple of other topics, they weren't particularly things I'd considered before. So, it's really been a bit of an eye opener. Because I'm involved in other advocacy groups, committees or meetings, that's where I feel I have a louder voice. There's usually no one else in the room that has that knowledge. (Experts by Experience member)

Being brought into the room with other stakeholders and being in that position of conceptualising the broader problem and how that fits with stakeholders, how that fits within this committee [PAG] – this has been really valuable. It feels really respectful. We can't keep people stuck in going through lived experience, so being able to come into these spaces is a really huge value. (PAG member)

I wish other organisations did the same. Seeing people with lived experience as stakeholders in their own right. People who've had upskilling in design work, upskilling in consultation, so they're coming into that room and positioning that greater [view] of lived experience rather than individual experience. Not many places do that. (PAG member)

#### A pathway to other opportunities

The Experts by Experience Group was a pathway to other advocacy and leadership roles for the women, such as membership on community-based committees or advisory groups, consultancy work and paid employment. The Program maintained a platform so that experts could have a view of employment or other opportunities arising in the disability and prevention sectors, 'targeted information they probably wouldn't be able to search and find.' (Program Team member) Opportunities were also shared with the group on a regular basis. A sample of paid employment gained through the Program is included in Table 3, as are examples of external advocacy and leadership that women have taken up to expand their experts by experience horizons.

Paid employment outside the group (examples)	<ul> <li>WIRE and Good Shepherd joint initiative, Intersectional Guide and Financial Capability Education Co-design Project, which consulted with the group over three meetings and engaged an expert for an additional time (as mentioned previously)</li> <li>WDV employment of different experts to present as webinar speakers/panellists e.g., 'Prevention of Violence against Women with Disabilities: Workforce resources for action' (International Women's Day event March 2021)</li> <li>WDV employment and upskilling of two experts to work alongside the Program Lived Experience Program Officer, Co- facilitation to deliver presentations to organisations on gender and disability equity</li> <li>WDV employment of one expert as training facilitator for the organisation's Sexual and Reproductive Health Program</li> <li>WDV employment of one expert as training facilitator for the (former) Department of Health and Human Services (DHHS) Family Violence Disability and Learning Program</li> </ul>
Advocacy or leader- ship external to the group (examples)	<ul> <li>Past member of Maribyrnong City Council Disability Advisory Committee; involved in Disability Action Plan consultation; advocate on WIRE's Women's Financial Capabilities Project; self-advocate</li> <li>Contributed lived experience knowledge to Deakin University and University of Melbourne</li> <li>Filmed in an advertisement for the Victorian Disability Worker Commission; spoke about support workers in the past, the help they gave, and the difference that made 'to get me to where I am now'</li> <li>Many public speaking and panel opportunities as those consulting the group have made contact about other projects</li> </ul>

Table 3 – Experts by Experience and their expanded horizons

#### Action on the drivers of violence 'in real time'

The group's client list over the last two years is impressive in terms of organisations and stakeholders reflected. Leading organisations and agencies in family violence response, the prevention sector and the disability sector, statewide and national, have benefited from the input the experts have given to their policy, programs, practices, guides or other resources. An important client was also WDV in the form of staff working in programs across the organisation among them the Sexual and Reproductive Health Project; Responsive Access Project; Policy Team; Women's Health Services Capacity Building Project; and the Health Services Program. Members of the Gender and Disability Workforce Development Program Team sought input from the experts too, to co-design a number of significant Program resources. Experts were consulted on the development of WDV's new strategic plan and were involved as participants in the evaluation of the Gender and Disability Workforce Development Program.

Table 4 summarises the list of external clients over the last two years, and what they were seeking from the experts through the consultations. More on Program resources that were co-designed with the experts can be found later in this report. See '<u>Our</u> resources are out there (and getting embedded)'.

1800RESPECT	Consultation on 1800RESPECT Disability Pathways Project
Australian Network on Disability	Consultation on the recommendations arising from an evaluation of the DV Alert 'Working with Women with Disabilities' training program
cohealth	Consultation on SRH and respectful relationships
DHHS	Consultation on Allied Health Capability Framework: Disability and complex support needs
DV Vic	Consultation on the <i>Family Violence Code of Practice</i> and women with disabilities
	Consultation on how family violence workers can support victim/survivors with the NDIS
	Consultation on a training program and online resources
	Follow up on training program and online resources consultation
Our Watch	Consultation on Preventing Violence against Young Women with Intellectual Disability
WIRE and Good Shepard	Intersectional Guide and Financial Capability Education Co-design Project (intro)
	Consultation 1 Intersectional Guide and Financial Capability Education Co-design Project
	Consultation 2 Intersectional Guide and Financial Capability Education Co-design project
Women with Disabilities Aust.	Consultation on new online platform

Table 4 – Experts by Experience client list, 2019 to 2021

As presented earlier in this discussion, the Program produced guidance material to help clients with their preparations and facilitate an inclusive, accessible and reciprocal exchange. The guidance material contained practical steps to allow sufficient time and assistance for the genuine involvement of women, and so that the meeting could not be a 'tick the box' encounter. What was the actual experience like? There were certainly deep positive contributions made to the work that clients brought into the group.

It really says a lot for someone to be sitting there for three hours and having one, sometimes two, consultations, and being able to provide very original, very in-depth feedback or content to inform what that program needs, or what that resource needs. (Program Team member)

I think they were surprised with the depth of wisdom that they got with this group, that lived experience really does mean something and can change the way you think about something or the way you're going to go about your project or give it hugely greater depth. (Experts by Experience member)

A lot of what they said formed the direction we took and the principles we ended up putting together. The underlying theme was what gets prioritised. It's about how programs make priorities. One of the principles we have talks about access. After speaking with the women, it's about considering people's access needs right from the start. It's about asking people about access right at the start of a program and to keep asking. That's actually one of our principles, 'To ask about access from the start.' Another was, 'Respect and work with the person's experience and expertise.' (Experts by Experience client)

Just as importantly, all clients were exposed to a consultation and co-design style that centred women's lived experience, elevated their expertise and amplified their voices, from the moment they were briefed about what to expect through to the close of the engagement. *The process itself valued and promoted the women as experts in gender, disability and prevention; it was action on the drivers of violence in real time*. This is how leading best practice consultation and co-design should be done; that is, *as a demonstration of intersectional prevention practice*. And hopefully, all those who got to see how it's done are taking that experience into their own organisations and practices.

I went in thinking 'I've got this theoretical piece of work; will they be able to follow it?' That was actually the thought I was having. Then they just had so much to contribute that was far beyond – it just challenged that thinking. My own internal ableism and stereotypes about people with disabilities were revealed and smashed! I think that it is extremely valuable, to have a place where people who don't have a lot of experience working with people with disabilities and consulting with groups of women with disabilities, have a space where they do that and have a similar experience to me. (Experts by Experience client)

This is what WDV does, it's why the organisation is good at what it does. It's an organisation that's across the content and how to do the practice really well. It's one of the vital pieces of doing work like this. It's not enough to just tick the right boxes. (PAG member)

Repeating my point about demonstrating best practice in consultation and co-design, they would have seen how we do that, and hopefully taken that best-practice example to their own work. (Program Team member)

### We have developed the specialist prevention workforce

The experts, too, have seen the value in what they do. As one expert said, they reached a point as a group when they each realised, 'I'm valued, I have knowledge that is useful.' Clients were encouraged to return to the group to report back on where the policy or resource or project they had worked on was up to, or what the next stage was in the process. This helped to complete the circle for the women.

The most rewarding thing for them is to see something tangible that they've [had] input into. A lot of the time, clients do come back. We're not getting a lot of one-off consultations; we're getting consultations where there might be two or three. And the last one will be, 'This is what we've now finished with.' Or sometimes we might get an email to say the project is complete, or something is now available. I always encourage them to come back and show things to the women themselves. (Program Team member)

I was very proud of the fact that they came back and told us what they'd done with it, because it meant that we had closure on one thing that we'd started. With the feedback from them, it sort of helps me realise that the work we're doing is worth it. (Experts by Experience member)

As an organisation for women with disabilities by women with disabilities, WDV wanted to acknowledge the value of the work the experts were doing as a legitimate part of the specialist prevention workforce. This meant moving beyond the existing honorarium arrangement that is somewhat standard in the sector for advisory groups and *leading the way* in remunerating the experts more appropriately. What happened was a considered and thorough process to recruit the women as casual employees of the organisation, where experts were supported to make sure the recruitment was equitable and that no one would be inadvertently disadvantaged e.g., through hours worked and Centrelink payments.

It shouldn't be a novel concept that meaningful consultation needs to be paid. But there are still many highly regarded organisations that are giving gift vouchers, stuff like that. Not only have we always paid [an honorarium] but we went through an active process of reviewing that. We made the decision that it wasn't working. We decided to bring the group on as casual staff because we felt that was the most appropriate thing for them. And that was not a simple process or a simple decision. (Program Team member)

Statistics show that women with disabilities are among the most marginalised in our community, often experiencing high levels of disadvantage when it comes to employment and income. Stakeholders have praised the Program Team's initiative to drive change for the experts on these socio-economic indicators.

The women have reported an increase in confidence and recognition as a result of the change. As one woman put it, 'My time and expertise are acknowledged, respected and valued. I'm able to devote more time to the group while increasing my financial independence.' (Experts by Experience member) The women can now say they are employed by WDV and are part of Victoria's specialist prevention workforce, that they are part of the agenda to transform the drivers of violence. And that is an extremely powerful shift in their professional identity as Experts by Experience in gender, disability and violence prevention.

# Workforces training and other capacity building

## Synopsis of main findings

The Program took lived experience into its workforces training and other capacity building activity. As with the Experts by Experience Group, it achieved this through consultation and co-design, but also through its exceptional model of co-facilitation. Co-facilitation broadened the reach of lived experience by extending it to specialist and contributor sectors and workforces. It also produced powerful learning impacts.

The Program consulted women with lived experience to co-design and produce highquality content on drivers of violence against women with disabilities and how to prevent it, not only for training material but for accompanying tools. These tools included a series of nine poster-style information sheets titled <u>Taking Action</u> (with a written guide) that each present the drivers of violence against women with disabilities and actions to prevent it. Tools such as these were intended for integration into the training content as they came to hand. They were also released through well-attended public events to increase their reach and build broader awareness of violence against women with disabilities and its prevention. The Taking Action launch, as part of International Women's Day 2021, was excellent in this regard, with 16 women with disabilities speaking to purpose on the lived experience of sexism and ableism and taking attendees through the actions we can all do to transform the drivers of violence.

The Program's tools are available via WDV's website. Some Program content has been embedded into high-quality tertiary education or professional practice online courses that give users credentials in gender, disability and violence prevention, and lend longevity to the Program's content beyond the current phase.

## Two streams of training services on offer

Training offerings were a large component of the Program's activity over the 2019 to 2020 period, with two different streams available to the specialist prevention workforce and contributor workforce, including disability service providers and other social services. These offerings were the calendar training program and tailored training. The calendar training comprised a program of three structured sessions (Table 5) each three hours in length and connected through a 'scaffolded' learning approach. The first session introduced foundational concepts (e.g., social model of disability, violence against women). The second session built up more complex ideas (e.g., drivers of violence and essential actions); it was also a bit more action focused. The third session allowed for further participatory engagement geared towards 'learn-by-doing' in real-world practice contexts (e.g., bystander action, action planning).

The calendar training program was open to anyone from target workforces and sectors, among them disability service providers and sole traders located in the disability or social services sectors; and while attending the first session was a requirement for attending the second and third, participants did not have to subscribe to all three sessions. The calendar training was branded 'A Right to Respect' and was offered online from May 2020, following a refresh of the Program's training content to this point, in response to 'having to do business differently' as the impacts of COVID-19 related restrictions and lockdowns were being felt across Victoria (Melbourne in particular). The next section has more on the refresh process.

<b>Session 1</b> Introduction to the Prevention of Violence against Women with Disabilities	<ul> <li>Intersections of inequity</li> <li>Social model of disability</li> <li>Ableism</li> <li>Intersectionality</li> <li>Violence against women</li> <li>Violence against women with disabilities</li> <li>Gendered drivers and reinforcing factors</li> </ul>
<b>Session 2</b> Gender and Disability Drivers of Violence	<ul> <li>Condoning of violence against women with disabilities</li> <li>Male and able-bodied control of decision making and limits to independence</li> <li>Stereotyped constructions of masculinity, femininity and disability</li> <li>Disrespect towards women and girls with disabilities; male and able-bodied peer relations that emphasise aggression</li> <li>Essential actions to prevent violence</li> <li>Action planning</li> </ul>
Session 3 Prevention in Action	<ul> <li>Unconscious bias</li> <li>Being a bystander</li> <li>Disability micro-aggressions</li> <li>Managing disclosures</li> <li>Self-care and vicarious trauma</li> <li>Action planning</li> </ul>

Table 5 – Calendar training sessions and content areas

Calendar training sessions were available to individual organisations wanting to upskill staff, tailored to specific organisational learning needs and levels of the organisations seeking the capacity building e.g., direct service staff, leadership, senior management or executive. In these cases, a planning process was put in place with the client to ensure the training was the right 'fit' for the intended participants, and to clarify expectations on both sides. For some clients, the training was a tailored version of the calendar program in that it delivered content over three sessions; for others, the training had more selective content and was done as a single session. It depended on organisational needs and contexts.

A good example of tailoring to need was the training offered to two Victorian women's health services: Women's Health East (WHE) and Women's Health Loddon Mallee (WHLM). This training was delivered in partnership with another WDV initiative, the Women's Health Services Capacity Building Project, which sought to build the capacity of women's health services as an important part of the specialist prevention workforce through strengthening their organisational policies, practices and programming in gender, disability and intersectionality. Since women's health services already have a solid baseline knowledge of prevention (it is part of their core funded integrated health promotion activity) the Program Team worked closely with colleagues in their sister initiative to tailor two sessions each for WHE and WLHM. The sessions had more in-depth explorations of disability theory, ableism, and sexism as intersecting systems. The second session was a 'deeper dive' into the disability sector and what

this looks like under NDIS implementation and took participants through examples of accessibility in organisational practices including communications (e.g., websites). This tailored training example showed that the Program Team had the skills and scope to design and deliver to a higher level of content when the cohort required it.

Table 6 and Table 7 present the training programs and sessions held over the twoyear period, July 2019 to June 2021, and the number of attendees at each session. Over 650 attendees turned up to the sessions as an aggregate, noting that some of these would have been the same unique participants in a program of training. All up, four calendar training programs were delivered (including a test run) while nine crosssector clients received tailored training. The clients were:

- Melba Support Services;
- Banyule City Council;
- RMIT School of Urban and Social Studies (GUSS) (now School of Social Care and Health);
- WHE and WHLM in partnership with the Women's Health Services Capacity Building Project;
- Genetics Support Network Victoria (GSNV);
- Northern Metropolitan Region (NMR) Councils (Banyule, Nillumbik, Whittlesea)
- Relationships Australia Victoria (RAV); and
- Gender and Disability Workforce Development Program CoP.

Tailored training was also delivered to WHE through WDV's partnership with that organisation for another initiative, Margins to the Mainstream: Preventing violence against women with disabilities (M2M).<sup>5</sup> While not a client as such, the WHE/M2M training is included in Table 7 as a demonstration of training output.

Calendar training	Attendees (#)	
May to Jun 2020	'A Right to Respect' Session 1 (test)	12
	'A Right to Respect' Session 2 (test)	12
	'A Right to Respect' Session 3 (test)	12
Sept to Nov 2020	'A Right to Respect' Session 1	26
	'A Right to Respect' Session 2	24
	'A Right to Respect' Session 3	25
Sept 2020	'A Right to Respect' Session 1	13
	'A Right to Respect' Session 2	13
	'A Right to Respect' Session 3	13
Mar 2021	'A Right to Respect' Session 1	17
	'A Right to Respect' Session 2	23
	'A Right to Respect' Session 3	18
		208

Table 6 – Calendar training program and number of attendees, 2019 to 2021

<sup>&</sup>lt;sup>5</sup> WHE is the lead partner for M2M; other partners are drawn from the regional prevention partnership in Melbourne's east known as Together for Equality and Respect (TFER).

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Tailored training 2019 to 2021		Attendees (#)
Melba (Jul 2019)	Introduction: Prevention of Violence against Women with Disabilities	64
Banyule Council (Nov 2019)	Introduction: Prevention of Violence against Women with Disabilities	30
GUSS (Sept, Nov 2019)	Introduction: Gender and Disability	7
	Introduction: Gender and Disability	17
	Introduction: Gender and Disability	9
WHE (May 2020)	Introduction: Gender and Disability	10
	Accessibility and Inclusion	10
WHLM (May 2020)	Introduction: Gender and Disability	10
	Accessibility and Inclusion	10
WHE/M2M (Jun 2020)	Introduction: Prevention of Violence against Women with Disabilities	8
	Introduction: Prevention of Violence against Women with Disabilities	24
GSNV (Sept, Nov 2020)	Webinar panel of women with lived experience	162
	Tailored training session	2
Program CoP (Nov 2020)	Tailored training session	7
NMR Councils (Dec 2020)	Tailored training session	22
RAV (Feb 2021)	'A Right to Respect' Session 1	19
	'A Right to Respect' Session 2	19
	'A Right to Respect' Session 3	21
		451

Table 7 – Clients of tailored training and number of attendees, 2019 to 2021

## Training co-design and evolution

As mentioned earlier in this report, lived experience was built into the staffing profile of the Program Team, through the positions of the Program Team Leader, Lived Experience Specialist, and Program Lived Experience Program Officer, Co-facilitation. In fact, more than 50% (three out of five) of the Program Team identified as experts in lived experience (i.e., gender and disability) with the balance of the team being gender or prevention experts. This meant that a collective source of disability *and* gender expertise was readily available for the development of the training content.

The core framework for the training is *Change the Story*. We spent a lot of time applying a disability lens to that and making sure that the content we were presenting was always evolving. (Program Facilitator)

The advent of the COVID-19 global pandemic and Victoria's initial wave of infection came with a set of public health directives around work-from-home arrangements and other social and economic restrictions. While this required a huge adjustment on everyone's part, the Program Team took this as an opportunity to rethink how the training could be done for target workforces and sectors – especially the contributor workforce including disability service providers – while still meeting funding timelines and requirements. Their leadership, along with support from the funder, resulted in a

consolidation of 'A Right to Respect' as an *online* offering using the internet video application, Zoom.

The migration of the training content and delivery to an online environment required planning on several fronts such as how to ensure participant inclusion, access and safety; how to run certain activities including whole and smaller group discussions; and how to provide networking opportunities in a virtual way. Practicalities like etiquette around verbal communication and speaking one at a time, and the length of time allocated to activities in an online environment, were carefully thought through too. 'A Right to Respect' was then tested from May to June 2020, with a group of participants from the social services workforce including support work, education psychology, disability advocacy and music therapy. Feedback was extremely positive; it was also promising in terms of delivering 'A Right to Respect' in a sustainable way.

The refresh of 'A Right to Respect' was an opportunity for the Program Team to check that the training continued to be aligned with the latest developments in disability and prevention practices. One example of this was around managing disclosures. While the learning objectives of the training were squarely on primary prevention, knowing how to manage disclosures is vital to prevention work – as long as it's appropriate to one's location as a prevention practitioner on the intervention continuum.

The training included information for participants if support was needed during discussions or activities. But the Program Team felt that appropriately managing disclosures was just as important for participants to learn, as they would be going out to practise prevention once the training was done. This did not mean learning how to do a risk assessment, for that would be highly *inappropriate*. It did mean gaining the skills and confidence outlined in Responsibility 1 of the MARAM (Multi-agency Risk Assessment and Management) Framework. Responsibility 1 is around respectful, sensitive, and safe engagement. Knowing how to attend to the general needs of the person disclosing (and not their specific family violence needs) is also part of Responsibility 1.

As one evaluation participant put it, these are the critical 'soft skills' of listening to the person disclosing, validating their experience, and believing them. The Program Team built a strong case to the funder for 'A Right to Respect' to include managing disclosures as appropriate to prevention practice, which is how this topic came to have a proper place in the third session. (Table 5)

The entire team has been totally dedicated to working from a principled ethical position, working within best practice, and making sure we have the latest data around violence prevention, which is continuously changing. That's one of the things that I've loved about the team, the constant move to being leading best practice. (Program Team member)

The Program's biggest achievements? One would have to be the training and where it is now. The transition to an online environment was a big achievement. It is in line with best practice. It is deliverable in multiple ways, as a calendar program and tailored. It hits the mark. People walk away with applied knowledge.' (Program Team member)

#### Powerful learning impacts were achieved

High-quality online training content was certainly an achievement given the challenges posed to Program implementation by a global pandemic; but the standout success of the Program's training and capacity building component was its co-facilitation model. The co-facilitation model is when women with lived experience are up skilled and paired with prevention experts to share an equal role in presenting content and supporting learning in a training or capacity building context. Through co-facilitation, the intersecting systems of sexism and ableism are made real to participants, in that lived experience can be brought to bear on the content being covered so it's not simply theoretical.

Co-facilitation isn't necessarily about putting one's personal story in the room all the time; nor is it about speaking on behalf of all women with disabilities. It's about illuminating sexism and ableism as systems that shape discrimination and violence experienced by women with disabilities and speaking to purpose on the everyday ways that this happens, that participants might not have ever thought about. These are things like words used in everyday language and why it's preferable not use them, or paternalistic behaviours towards women with disabilities that are so deeply engrained we don't even realise we're doing them.

In bringing lived experience into the room, co-facilitation kept the focus on the intersecting systems or what's driving these practices and behaviours, and on the exciting possibilities of taking shared action on them. As one evaluation participant put it, 'Lived experience helps to de-theoreticise the drivers and actions. Once you understand these through the everyday context, you can then connect them back to the concepts.'

In my role, I encompass and look at everybody, not to generalise, although sometimes that can be useful, but to give a holistic picture. When I do this, it's *really* important to speak to purpose, rather than being wishy washy about any old story. You go back to your messages. Because a lot of the time people talk about any old story without any meaning behind it. (Training facilitator)

The lived experience perspective is the number one thing that our participants call out in the feedback. Participants pretty much consistently feedback that the lived experience perspective is one of the most, if not *the* most, valuable part of our training. It's what makes our training really unique. The anecdotes are really relevant to the drivers and actions and to the general content. They sometimes hit people between the eyes, which is what we're trying to do. There's also a light-hearted and humorous way that this is done, which makes a lot of people feel comfortable. That's something that is really important especially when you're getting into the heavy stuff. (Training facilitator)

To learn from the perspective of those who live with a disability gives you an appreciation of the challenges, bias and discrimination that people with a disability face on a daily basis. As someone who does not have a disability, I can only begin to better understand these particular challenges by listening and learning from the perspective of those who do have a disability. I thoroughly recommend this course to anyone wanting to expand their professional expertise or deepen their understanding of how we can work more effectively together to prevent violence towards women with a disability in our communities. (Rosie Batty AO, family violence survivor advocate, 'A Right to Respect' participant)

Co-facilitation allowed for powerful learning moments. Evidence can be found in the returned participant feedback forms for the calendar training, for instance. Of three programs delivered following the test phase, a total of 34 completed forms were returned for Session 3 (final session) reflecting a response rate of 60.8%. Respondents gave an average of 4.7 out of a possible 5.0 for their overall rating of Session 3, with 97.1% of respondents either strongly agreeing or agreeing with the statement, 'As a result of today, my knowledge of primary prevention of violence against women with disabilities has increased.'

I have learnt a lot and feel more empowered to take action to help, and also to just be aware and ask the questions. (Training participant)

As a bystander, I will take on different ways to flag behaviours as inappropriate and pull someone aside if needed to discuss [a] more appropriate response. (Training participant)

Yes, I would recommend this training. It makes important links between gender inequality, ableism and discrimination, and violence against women with disabilities. (Training participant)

Terrific in-depth learning. Really appreciated the Zoom format, I wouldn't have been able to attend otherwise as juggling several competing demands. (Training participant)

Informative, engaging and makes you think through deeply around the intersections of gender and disability. Realistic and factual and I loved [the facilitator] giving her lived experiences. (Training participant)

I would recommend this workshop to others. It is informative and structured well to clearly articulate such a big issue and propose solutions. (Training participant)

I think this is *fundamental* work for all people to understand. (Training participant)

The gender drivers of violence really landed this third session and I think they are so key for as many people to know as possible. (Training participant)

## Prevention action and leading by example

Co-facilitation had one other powerful influence on the training experience. It shared knowledge, power and responsibility between two women as professionals with overlapping and complementary areas of expertise and demonstrated equal and respectful relationships. It elevated the voices of women with lived experience and showed participants the role that allies can play too. It brought into the training room the ethos of the Experts by Experience Group, that 'none of us knows everything but together we know a lot.' It normalised disability equality by embodying how it's done. It exposed participants to action on the drivers of violence against women with disabilities *in real time*, by leading by example.

Something that we try and do in the training is to lead by example, to show that women with disabilities have capacity to talk about prevention as well as their lived experience. The knowledge is shared, power is shared. She isn't doing 70% of the work and I'm doing 30%. It's a very even balance and we're very conscious of that. I do think there's an important role for allies, people without disabilities, doing co-design and train with me. Because people with disabilities can't do this alone. (Training facilitator)

The co-facilitation model, which is very core to our work, is a two-person thing. If it's one person with a disability and one person without, then it's my job to make sure that there are opportunities for my co-facilitator to put in a lived experience perspective. And that there's a good solid division of the content. And that she knows she can draw on my expertise to support the content as well. (Training facilitator)

We allow each other the time and space; we equalise the power. When she talks about ableism, she doesn't blame. She always says, 'Let's acknowledge it, and try to solve it.' It's important that everyone is comfortable in the training space. (Training facilitator)

In short, the Program's training was built around a model of co-facilitation that was important for content learning *and* it came with core principles and practices that could be immediately transferred and applied by participants upon leaving the training environment. What better way to act on the drivers of violence?

### We created opportunities for cross-sector collaboration

The Program piloted a cross-sector CoP in its final year as another way of building the capacity of target prevention and contributor workforces. The CoP was run in partnership with WDV's Women's Health Services Capacity Building Project, as this initiative also focused on workforces and transformative gender and disability practices. The Capacity Building Project had two partners: WHE in Melbourne's east and WHLM in Victoria's Loddon Mallee region. In addition to working on the Capacity Building Project, WHE was the regional prevention partnership's lead in Margins to the Mainstream (M2M), one of 16 projects across the nation to have received funding from the Australian Government Department of Social Services community-led prevention grants scheme for 2020 to 2022. WDV was WHE's statewide partner for M2M. What all these relationships and developments pointed to was an Eastern Metropolitan Region (EMR) CoP that focused on disability and preventing violence against women with disabilities, to further saturate effort in this geographical location.

The CoP brought together practitioners engaged with disability or gender transformative work, with the view to strengthening intersectional practices in a supportive peer-to-peer environment. This was achieved through sharing practice achievements, challenges and lessons learned, and offering opportunities for networking and collaboration. Membership was open to cross-sector workforces, among them women's health, health, disability, family violence, social services and local government, as well as to other prevention of violence against women stakeholders.

Given everything going on in the region, it was not surprising that the CoP expression of interest was well received, with 27 members from across target sectors recruited ahead of the first of four meetings in October 2020. This meeting was followed by

tailored training in November 2020 as discussed in the section, <u>'Two streams of</u> <u>training services on offer</u>.' Three further meetings followed in December 2020 and February and March 2021.

The CoP was a space for shared knowledge and shared learning with the direction of content, topics or practice issues set by its members. The CoP allowed for information sharing and networking too, within the limitations of Zoom. While different to the training component of the Program's capacity building activity in being less structure and more flexible, CoP meetings were nonetheless co-facilitated in a similar way; that is, equally and respectfully between two women, one with expertise in lived experience and one with prevention expertise. Co-facilitators also represented the two WDV initiatives partnering on the CoP. Based on member input, the meetings covered many areas of interest, among them:

- lived experience panel presentation and discussion, with the lived experience co-facilitator joined by an Experts by Experience member;
- intersection of sexism, ableism and ageism, and elder abuse;
- co-design principles and practices; and
- prevention initiatives in the region.

The average attendance number was 12 to 13 members for the first three meetings, with attendance falling away by the last meeting to a handful of people. Evaluation participants commented that maintaining the engagement of members across the 12 months was a bit of an issue, as people are busy in these sectors and there are often competing demands at play. Staff turnover in some participating organisations didn't help either, as it meant having to re-engage with new people to get them along to the meetings. More formal ways to keep members engaged *between* meetings could be considered next time around. That said, member feedback has mostly been positive, with members highlighting the practice issues and content areas covered as the best part of the CoP.

Particular standouts have been learning about the social model of disability and co-design principles for developing prevention programs and resources with women with disabilities (CoP member)

I really value the experience and knowledge that is brought to this CoP and the platform to learn and develop my own intersectional practice in supporting women with disabilities. (CoP member)

In a small number of instances, the CoP led to collaborations between members and WDV to work on the inclusion and accessibility of different resources. One example was the '<u>Together for Respect at Home</u>' campaign video produced by the Eastern Domestic Violence Service (EDVOS), which features one of the CoP co-facilitators speaking to what respect at home looks like from her lived experience perspective. If EDVOS had not been a member of the CoP, it might have missed out on this level of specialist input. Evaluation participants also noted that it felt like the CoP was building up momentum for more collaborations along these lines but being a final year deliverable there wasn't the time for such conversations to flourish.

### Our resources are out there (and getting embedded)

High-quality materials and tools intended for integration into training content were significant Program outputs. Some were stand-alone resources that served to get the Program's content out there, including in embedded ways. As with other Program activities, lived experience was critical to resources development. We turn to three resources as exemplars of leading best practice in consultation and co-design, and what can be achieved as a result. The full list of outputs can be found in Appendix 3.

<u>Taking Action</u> is a series of nine poster-style information sheets. Each poster presents one of the drivers of violence against women with disabilities and the actions needed to transform them if we are ever to see an end to violence. The posters build on *Change the Story* as our shared national framework for the primary prevention of violence against women. They do this by placing a disability lens over the gendered drivers and essential actions in *Change the Story*. This way, the posters have immediate value and utility to anyone familiar with *Change the Story*, as they can be picked up and applied to intersectional prevention practice 'seamlessly.' That said, an accompanying written guide exists containing the latest research on violence against women with disabilities, the intersecting drivers of violence and how to prevent violence, should any end-user wish to know more.

We've really appreciated the Program being able to put the disability lens onto the gendered drivers and prevention theory at that core level. In a lot of our work, we're operating under the gendered drivers, using those as our narrative to talk about our work in general and the value of our work. It's quite an emerging area, understanding the impact and the unique ways these drivers intersect with discrimination against disability. So, that lens applying to core pieces like the Our Watch framework, through those resources released this year, has been incredibly valuable for us to articulate across [our sector] and being able to see where the gaps are. (PAG member)

The real value of Taking Action lies in the fact that each poster contains examples of what the drivers or actions look like in everyday contexts, shaped by the lived experience of women with disabilities who were part of the co-design. As with the training experience, the examples help to 'de-theoreticise' the drivers and actions in the posters by making them real; once real they can be reconnected to core concepts.

The co-design process is so worthwhile and valuable. It is important. I think our experiences have helped to create more meaningful resources. (Experts by Experience member)

Lived experience just makes an academic thing highly practical. It's also quite emotive, the way it moves people, the way it connects to them. I can really see through the resources, through our work, how we're really contributing to social change. I think that they will contribute to changing society and violence against women. (Program Team member)

Taking Action was released through a well-attended online public event to increase the resource's reach and build broader awareness of violence against women with disabilities and its prevention. WDV held the webinar as part of International Women's Day activities (IWD) in March 2021.



Figure 4 – Taking Action Poster (Action 5)

The launch event centred lived experience right the way through, with not less than 16 women with disabilities drawn from the Experts by Experience Group, the Program Team and WDV more widely, speaking to purpose on the everyday contexts of sexism and ableism, and putting out the call for collective action on the drivers of violence. The event centred lived experience, amplified the voices of women with disabilities, showcased their expertise and smashed ableist stereotypes; and participants got a taste of what action the drivers of violence can actually look like. It was extremely special to be a participant in such a powerful event.

I want to express my thanks for you incredibly valuable work and for your generosity in sharing your lived experiences openly and honestly. I really appreciate the opportunity to listen and learn. (Webinar attendee)

Excellent webinar! Thank you so much for sharing so deeply your lived experiences and these great resources. Congratulations! (Webinar attendee)

Fantastic webinar and great resources. Super-valuable and thank you for such generous sharing of lived experience. Incredibly powerful. (Webinar attendee)

It's a unique component of the work that we deliver. That really strong lived experience perspective. Using that March webinar as an example, the IWD one, how many women with disabilities did we have speak in that short session? Sixteen. Really meaningful contributions. People just loved it. (Program Team member)

The Taking Action launch was the inspiration behind the next resource presented in this report, the Primary Prevention of Violence against Women with Disabilities video. As put by one evaluation participant, 'It was awesome to see that many women talking about an experience of each of the drivers, why not put that in a video and have it forever!' The video features five women with disabilities and one ally, speaking about the drivers of violence and how these permeate everyday life, and collectively calling viewers to take action to end violence once and for all. The video is available in full length and as five individual chapters (six videos in total) through WDV's website.



Figure 5 – Primary Prevention of Violence against Women with Disabilities (still shot)

We've got academic research that can tell us what the drivers of violence against women with disabilities are, but then in the video women with disabilities give actual real-life examples of things that have happened to them that illustrate each of these drivers at work. That just brings it to life so much more, makes it more tangible, both the fact that it's happening but also how we fix it. (Program Team member)

Once again, as with so many other parts of the Program, women's lived experience was integral to the development process and outcome. Indeed, the consultation and co-design process for this video shows just how leading WDV's practice was, in giving Experts by Experience and Program Team members the opportunity to speak to purpose through an altogether new medium for them. For one woman, the process was especially formative in terms of her professional identity as an expert in gender, disability, and violence prevention. Typically a bit quieter, she was at first reluctant to be involved. Then she changed her mind; and something truly wonderful happened.

When we approached her to ask her to do this, she sent an email back straight away, 'No, no. I'll help you in the background, other people are able to get up and talk.' Then, she clearly sat with it for a couple of hours and emailed again. 'Hang on, I've just had a proper look at the resources

that you sent, and I do have opinions about the information. Maybe I could be part of this film.' That in itself is pretty amazing. That was her doing her own work with it, I didn't speak with her between those two emails. Then, we did all this prep work and even in those sessions her first drafts of things she wanted to say were not as articulate as they were in the end. But she did all the work to get there, and she's come out so amazing on this video. She's come out really powerful, a really strong voice. (Program Team member)

All of the women who participated in the video, it was a huge thing. It's a bit of a legacy piece that's going to be around for a long time. And those women can reflect on that and be proud of that accomplishment. (Program Team member)

The video was released through another well-attended online public event to increase the resource's reach and build broader awareness of violence against women with disabilities and its prevention. The webinar included panel discussions with the Program Team and Experts by Experience Group members. WDV held this webinar in June 2021.

Amazing and comprehensive resource. Thank you for putting this together to help teach all us ableists and advocate for change. (Webinar attendee)

What a brilliant resource featuring such incredible advocates. Congratulations WDV, this is powerful and moving. (Webinar attendee)

Thank you WDV for this powerful presentation. We will be sharing these resources and key messages with our team. (Webinar attendee)

The third exemplar is the <u>Gender and Disability</u> short course, a micro-credential or certification-style online learning program available to students and practitioners to improve skills in gender and disability. This short course was developed in partner-ship with RMIT University and Women's Health Victoria (WHV) as part of the Gender Equity Training Project, 2018 to 2020. The short course is currently being offered through RMT and WHV i.e., to enrolled students (RMIT) and by paying a fee (WHV).

The short course was a major piece of content development for all partners and benefited from input by the Experts by Experience Group on specific issues around accessibility and appropriateness of language and imagery. The final product comprises three modules (Table 8) with a number of case study scenarios to enhance the online learning experience. The final product also includes a <u>prevention video</u> developed by WDV and NDS as part of NDS' <u>Zero Tolerance</u> initiative.<sup>6</sup> This video is located towards the end of the course to help participants bring together the lessons learned over the three modules. Participants are asked to view the video and answer questions on what could have been done differently to change the story of a young woman with disabilities experiencing everyday sexism and ableism. One other feature of the course is its clear presentation of concepts such as diversity, inclusion, and intersectionality; indeed, the content around these three terms is one of the least cluttered and most precise expositions that this evaluator, a respected leader in prevention, has ever seen.

<sup>&</sup>lt;sup>6</sup> This video was one of four resulting from the partnership, all of which were launched in 2019, along with written guides shortly after, including the <u>written guide</u> for the prevention video.

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<b>Module 1</b> Gender and Disability	Key terms		
Equitable Practice	Medical vs social model		
	<ul> <li>Reflection on gender and disability</li> </ul>		
	Equity or equality?		
	Disability equity and equality		
	<ul> <li>Examples of gender and disability</li> </ul>		
	Diversity, inclusivity and intersectionality		
	Reflection on intersectionality		
	<ul> <li>Privilege and oppression</li> </ul>		
	Check your knowledge		
	Summary		
Module 2	<ul> <li>Progress towards gender and disability equity</li> </ul>		
Gender and Disability	<ul> <li>Reflection on gender and disability equity</li> </ul>		
Inequality	The impacts of gender and disability equity		
	<ul> <li>Reflection on the collective impact</li> </ul>		
	<ul> <li>Gender and disability inequity: A scenario</li> </ul>		
	<ul> <li>Violence against women</li> </ul>		
	<ul> <li>Reflections on violence against women</li> </ul>		
	<ul> <li>What creates inequity?</li> </ul>		
	<ul> <li>Examples of norms, practices and structures</li> </ul>		
	The socio-ecological model		
	<ul> <li>Socio-ecological model: A scenario</li> </ul>		
	<ul> <li>Reflection on norms, practices and structures</li> </ul>		
	Check your knowledge		
	Summary		
Module 3			
Opportunities for			
Equitable Practice			
	Approaches to addressing inequity Transforming ideas about conder and disability		
	Transforming ideas about gender and disability     Check your knowledge		
	Check your knowledge		
	Summary		

Table 8 - Gender and Disability micro-credential modules and content areas

Like the Taking Action posters and the lived experience video, the short course is a vehicle for putting the Program's training and other content out there and giving it longevity. As put by one evaluation participant, 'The resources over the last 12 months are very high quality and will outlive the Program until there are serious updates to the drivers and actions, so that's significant.' The Gender and Disability online short course goes one step further in *embedding* the Program's content into mainstream spaces: a major higher education provider and a statewide women's health service. While the training component wrapped up in March 2021, there is evidence that the Program Team had started *integrating* materials and tools such as Taking Action and the lived experience video, into content for various external engagement and presentations e.g., Sexual Assault and Family Violence Centre CoP, May 2021.

# Strategic engagements and communications

## Synopsis of main findings

Over the last two years, WDV has supported the participation of Program Team members in a number of external prevention, disability or gender equity advisory committees, working groups, networks or other consortia. Wherever prevention, gender equity or disability have been discussed, it's likely there would have been a member of the Program Team attending! While this kept everyone super-busy (a little too much at times) the returns were enormous for the Program and the field of preventing violence against women with disabilities more broadly.

These engagements meant the Program Team was able to keep a 'finger on the pulse' when it came to emerging policy or other developments relevant to implementation and adapt activities to these changing contexts. Engagements also meant there was always a woman at the table *consistently* applying a disability or intersectionality lens to prevention discussions, or a gender discrimination and inequality lens to disability discussions. Their presence created sparks of 'ah-ha' moments in multiple spaces and furnished opportunities for conversations between sectors that otherwise might not have considered shared work. It also gave the Program and WDV visibility at these gatherings, and solidified stakeholder views of the organisation's 'pinnacle role' (as put by one evaluation participant) in primary prevention.

Over the last two years, the Program's strategic communications have been numerous and multifaceted, ranging from well-attended public events (touched on in the previous section) to social media campaigns and publications via more traditional mechanisms (e.g., WDV e-newsletters or quarterly newsletters). Collectively, these communications have helped to raise awareness of gender, disability, violence and prevention in Victoria, as well as consolidated stakeholder views of WDV as a trusted 'go to' source for high-quality resources and intersectional prevention practice.

## A leader in the prevention field

Documentation shows Program Team representation occurred at many different types of forums for progressing prevention work, and at national, statewide, regional and local levels. Among these were a range of advisory committees, working groups, networks or consortia, as shown in Table 9. These engagements gave Program Team members two opportunities: they got to hear about developments in prevention policy, practice, programming or research areas; and they got to reciprocate by promoting the Program and building interest in training offerings, resources or events.

It wasn't only about information sharing. Team members were able to use information gathered through the engagements to shape activities, so that the Program could maintain *strategic* relevance to partners and stakeholders for prevention. The best example of this was the Experts by Experience Group.

Experts by Experience was formed in part as a response to what the Program Team was hearing at various external meetings: that no group existed with the skills and capacity to provide meaningful lived experience input into prevention initiatives, and as a result consultation processes were often tokenistic or 'tick the box'.

National level	<ul> <li>Our Watch, Men and Masculinities in Preventing Violence against Women (webinar)</li> </ul>
	Our Watch, Masculinities in Practice Project Advisory Group
	<ul> <li>Our Watch, Prevention Practice Guide and Principles</li> </ul>
	<ul> <li>Our Watch, Do Nothing Does Harm (campaign)</li> </ul>
Statewide level	<ul> <li>Family Violence Rolling Action Plan Prevention Accredited Courses Evaluation and Monitoring Committee</li> </ul>
	<ul> <li>Gender Equity Panel of Providers (Women's Health Services)</li> </ul>
	<ul> <li>Municipal Association of Victoria (MAV) Gender Equality and Preventing Violence against Women and all forms of Gender-based Violence Network</li> </ul>
	DV Vic, Experts by Experience Working Group
	DVRCV, Partners in Prevention Network
Regional or	WHE/TFER, Margins to the Mainstream Project Advisory Group
local levels	Manningham City Council, Access and Equity Advisory Committee
	Yarra Ranges Shire Council, Disability Advisory Committee

Table 9 – Program Team engagements with advisory groups, working groups, committees, consortia and networks

In parallel, the Program Team recognised that they *themselves* didn't have a wide representation of disability for best practice consultation and co-design in relation to the Program's *own* activities. Experts by Experience was created to meet both sets of needs as 'a whole other level of the Program,' as put by one evaluation participant; and what a critical function of the Program that strategy has proven to be.

The engagements were strategic in one other way too, in that Program Team members looked to these external meetings as a way to insert gender equity into disability conversations, or disability equity into gender or prevention conversations. The engagements literally brought intersectional practice into the contexts and spaces *surrounding* the Program, which in turn elevated the Program's standing to different stakeholders. When the engagements were on specific pieces of prevention work, as in Our Watch's Men and Masculinities webinar, the contributions evolved into deeper levels of consultation.

When it's violence prevention or gender equity, we're often updating them and bringing in expertise on intersectionality and disability, talking to them about how they can be more inclusive and intersectional in their practices, or how they can target specific women with disabilities groups who aren't always recognised. In disability spaces, we're frequently bringing in the gender lens, talking to them about violence, the rates, the ways they can prevent it, practices that promote inclusion and equity, removing stereotypes and de-stigmatising. (Program Team member)

These engagements have increased the credibility of the Program, because people hear us talking in these spaces with knowledge and authority, with expertise. They also bring a generalised awareness about violence prevention right across a number of different spaces that probably wouldn't have it on their radar. Or they bring disability into spaces that don't have that on their radar. (Program Team member)

As well as bringing a disability perspective and the intersectional lens into prevention, we end up providing consultation on the accessibility of resources or events. Men and Masculinities was like this. (Program Team member)

The PAG gave the Program a further avenue for strategic engagement in that it brought together stake-holders who otherwise might not have met and created opportunities for discussion around gender, disability, and violence prevention. The PAG also helped to consolidate stakeholder views of WDV as a trusted 'go to' source for high-quality resources and intersectional prevention practice.

The PAG was a group of cross-sector stakeholders. Its membership included women with lived experience, an independent researcher in violence against women, and senior-level representatives from the following agencies or organisations: OPFVC DFFH; CWE FSV; Centre for Learning and Professional Development, DHHS; Respect Victoria; Our Watch; GEN VIC; DVRCV; MAV; NDS; National Disability Insurance Agency; Quality and Safeguard Commission, NDIS; and Brotherhood of St. Laurence.

Documentation shows that the PAG met four times out of a planned schedule of five meetings over the 2019 to 2021 (February, June and October 2020 and June 2021). Over these meetings, PAG members contributed high-level advice on the delivery and sustainability of the Program, covering areas such as:

- Program promotion and maximising the reach and impact of activities;
- Program alignments with policy, priorities and other developments;
- implications of strict public health directives on the Program as the COVID-19 global pandemic made its presence felt across Victoria; and
- accreditation and endorsement options for the Program going forward.

Documentation shows that the PAG met its Terms of Reference especially in its contributions to Program promotion for maximising reach and impact. The PAG also contributed to identifying implementation risks in the light of public health directives and other restrictions, as Victoria plunged into a state of emergency followed by a state of disaster over the course of 2020. Meeting minutes show a sophisticated discussion around the uneven impacts of these restrictions, in that restrictions exacerbate already existing socio-economic disadvantages among groups like women with disabilities. Not everyone has the same level of access to technology for staying connected, for instance (the digital divide); and attention would need to be paid to how activities could continue in accessible ways. Meeting minutes show that access issues were concerns held by PAG members in relation to their own organisations; and that discussion on COVID-19 impacts functioned like a high-level CoP in this regard (i.e., shared challenges and problem solving).

Evaluation participants gave specific examples of ways in which the PAG supported Program alignments with policy, priorities and other developments. It was in the PAG context that Program Team members first heard from others on the inclusion of managing disclosures as content in their prevention training. This gave Program Team members the resolve to push harder for the topic to be part of the Program's calendar training and tailored offerings, as described in 'Training co-design and evolution.'

It was also in the PAG that discussions took place around the Program's future, specifically its options for training accreditation or endorsement. These discussions were supported by a scoping paper tabled at the meeting in October 2020. The paper recommended further exploration of an endorsement pathway for the Program's training as it would be a more straightforward option than accreditation. This pathway could be forged in parallel with (but is not reliant upon) planned work by Respect Victoria on an endorsement framework for prevention initiatives more broadly.

The paper noted that FSV (i.e., CWE) had commenced steps towards accredited training in family violence prevention and response, but that this would not preclude non-accredited options from existing such as the Program's calendar training and tailored offerings. Put simply, the more offerings for specialist prevention and contributor workforces the better.

As a further layer to this, PAG members, in their focus group for the Program's evaluation in June 2021, added that the Program's training content, being of such high quality, could potentially be integrated into the accredited training content that CWE is in the process of developing. This discussion captured another option for sustaining the Program's training going forward.

All up, it appears that options for developing and embedding the Program's training abound! But what this example (and the other examples above) shows is that as a cross-sector group, the PAG was an effective space for high-level strategic thinking and discussion on Program implementation and prevention practice. And that in bringing issues to the PAG's attention such as the future of the training offerings, the Program Team was able to demonstrate to this cross-sector stakeholder group WDV's position as a leader in the prevention of violence against women with disabilities and intersectional prevention practice.

The PAG has proved to be a fantastic tool in governance and strategic positioning of our Program deliverables. (Report to Funder 2019 to 2020)

The PAG got people talking about violence prevention and disability at a strategically higher level, it got them in a room together. That possibly might have been the most significant thing! Bringing together the NDIS with the family violence and prevention sectors, for instance. I remember 'ah ha' moments with one group talking about something and the other group going 'Oh, I knew none of that.' (Program Team member)

The Program has solidified in my mind that WDV is a leader in prevention and gender equality, and in being able to bring the content, expertise and experiences of women with disabilities to these issues. Through this Program, through the resources created the reputation that has been developed, through the training offerings and CoP, the really successful events and launches, these have all solidified in my mind the pinnacle role that WDV plays in bringing disability to prevention and the social determinants to family violence. I think the Program for me has solidified that connection! (PAG member)

I think we *are* recognised these days as the people to go to for the prevention of violence against women with disabilities. Our name is now

synonymous with our prevention work across the sector. Key people within prevention recognise us as being the leaders in the prevention of violence against women with disabilities. In the disability sector, I think we are more recognised for having tangible work that organisations can access, that [we] can train and deliver to, to improve quality and practice. (Program Team member)

## A trusted 'go to' source for intersectional prevention practice

Table 10 presents the Program's activities around webinars (i.e., launch events for tools and materials), social media campaigns and communications via more traditional forms of media, for the 2019 to 2021 implementation period. Reach estimates are also included in the table where these are known.

As discussed earlier, webinars were important vehicles to promote to specialist prevention and contributor workforces the Program's ground-breaking resources, among them the Taking Action posters and the lived experience video. See '<u>Our</u> resources are out there (and getting embedded).' The webinars were also the means for broader awareness raising and discussion on gender, disability, violence and prevention; as such, they were promoted widely across the prevention, social services and disability sectors. The Taking Action webinar had a strategic focus too, in that it included a presentation by the Hon. Gabrielle Williams Minister for Prevention of Family Violence, Minister for Women and Minister for Aboriginal Affairs. Planning necessarily involved engagement and discussion with Minister Williams' office.

Program comm	Reach (#)	
Webinars launching Program tools, materials <sup>7</sup>	Respect, Inclusion and Equality: Building workforce capacity to prevent violence against women with disabilities (Dec 2020) (launch of 10 Actions to be a Gender and Disability Equitable Organisation)	143 attending
	Prevention of Violence against Women with Disabilities: Workforce resources for action (March 2021) (launch of Taking Action posters)	170 attending
	Equity and Inclusion: Workforce development resources (launch of the lived experience video) (June 2021)	80 attending
Social media campaigns	16-Days of Activism against Gender-based Violence Campaign and International Day of Persons with Disability – 'Disability Respect' (Nov Dec 2019)	
	16-Days of Activism against Gender-based Violence Campaign and International Day of Persons with Disability – 'Respect Is' (Nov Dec 2020)	
Violence and Disability Qtly	Regular contributions showcasing the Program's activities to this WDV quarterly publication	Ave. 810 readers per edition
WDV e-News	Regular contributions communicating the Program's activities to this bi-monthly e-newsletter to WDV members	Ave. 1 200 readers per issue

Table 10 – Program webinars, social media campaigns and other communications,

2019 to 2021

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<sup>&</sup>lt;sup>7</sup> Webinar recordings (where these exist) are available through WDV's website.

Social media campaigns were another way to raise awareness more broadly of gender, disability, violence and prevention. The Program ran two campaigns during the annual UN 16-Days of Activism against Gender-based Violence campaign, 25 November to 10 December, which overlaps with the annual UN International Day of Persons with Disabilities on 3 December. The two Program campaigns were 'Disability Disrespect: Call it Out' (2019) and 'Respect Is' (2020).

'Disability Disrespect: Call it Out' leveraged off Respect Victoria's mainstream social marketing campaign, 'Respect Women: Call it Out.' Women with lived experience from the Program Team and women from the Experts by Experience Group took part in the codesign of campaign messages, which focused on everyday micro-aggressions including forms of disrespectful and demeaning behaviours.

For each day of the campaign, WDV posted a tile on their social media platforms that described a common micro-aggression. (Figure 5) The tiles were accompanied by a tip sheet titled, 12 Principles of



Figure 5 – Social media tile produced by WDV (2019)

<u>Respectful Communication with Women with Disabilities</u>.' As with other Program activities, the consultation and co-design process was just as important as the outputs: the process ensured lived experience carried through the entire way. The 2020 'Respect Is' campaign followed the formula of the preceding year with the co-design of a series of statements, one posted each day of the campaign. (Figure 6)

Awareness raising was further supported by Program stakeholders such as MAV, DVRCV's Partners in Prevention Network, and the Disability Advocacy Resource Unit, who utilised their social media platforms and websites to promote Program activities. The Gender and Disability Workforce Development Program and the Women's Health Services Capacity Building Project also presented a 'lightening talk' at DVRCV's PreventX Online Conference in November 2020, with members from both teams discussing the impacts of COVID-19 on women with disabilities. Over 400 delegates attended this conference.

Collectively, the webinars, social media campaigns and other forms of communications have helped to consolidate stakeholder views of WDV as a trusted `go to' source for high-quality resources and inter-sectional prevention practice. In different ways they each promulgated information about the Program's training offerings, events, tools and materials – all of which were underpinned by the Program's leading best practice in consultation, co-design and co-facilitation.





This is what women with disabilities say Respect is: Gender and disability equity is fundamental to preventing violence against women with disabilities.

Respect is supporting our decision- making.	Respect is bodily autonomy.	Respect is consulting with us about things that impact our lives.	Respect is challenging sexist and able- ist stereotypes.
Respect is letting me set my own boundaries and take my own risks.	Respect is listening to us, learning from us and following our lead.	Respect is not assuming you know better than I do.	Respect is acknowledging our sexual & reproductive health rights.
Respect is paying us for our labour.	Respect is letting me speak for myself.	Respect is believing me.	Respect is recognising our skills, talent and contribution.
Respect is making your space accessible for everyone.	Respect is giving me the time I need to communicate.	Respect is acknowledging my parenting abilities.	Respect is disability pride.
Copyright Women with Disabilities Victoria 2020			
#16dayscampai #respectis #ca		Respect Victoria	RESPECT CALL WOMEN IT OUT

Figure 6 – 'Respect Is' social media campaign messages (2020)

# **Conclusions and next steps**

Data collection and analysis have yielded many findings presented thematically in the foregoing pages. This report now consolidates these findings into a discussion that answers the overarching evaluation questions, before shaping recommendations for WDV and stakeholders in Victorian primary prevention to take forward. The overarching evaluation questions are:

- 1. What are the achievements of, and lessons learned from, Program design and implementation?
- 2. How was design and implementation quality demonstrated and maintained by the Program's various activities?
- 3. What was the value of the Program to those involved in its various activities?
- 4. What conclusions can be made about the Program, especially in terms of 'what next' for WDV and workforces capability development for Victorian primary prevention?
- 5. What are the strategic recommendations arising from the evaluation?

# **Program achievements and quality**

Program achievements and quality can be understood against the backdrop of three major contextual factors that had a bearing on Program design and implementation. First, the rapidly evolving and sweeping reform agenda of the Victorian Government following the completion of the RCFV in 2016. This has seen multiple pieces of policy and associated three-year plans released over a relatively short period of time; with prevention stakeholders like WDV having to work fast and strategically to maximise opportunities for their involvement and input.

Second, the implementation of the NDIS, which also commenced in Victoria in 2016. This has been described as generational shift in disability service delivery, with significant transitions to client driven business models and a redefining of the disability sector. NDIS implementation has seen disability stakeholders like WDV having to think deeply into how their programs can maintain relevance to, and best meet the needs of, an ever dispersed, time pressured workforce as it expands into non-traditional areas such as the for-profit sector and the sole trader sphere.

Third, the advent of the COVID-19 global pandemic and the waves of infection (and smaller clusters of infection) that swept through Victoria from March 2020. No one could have anticipated this one-in-one-hundred-year public health crisis at the start of designing the current iteration of the Gender and Disability Workforce Development Program; the Program in its current iteration commenced in a vastly different world to the one it ended up operating in.

Against these contextual factors, Program achievements and quality are summarised as follows.

**Experts by Experience Group**. The Program created a safe and inclusive environment that upskilled women with lived experience for consultation and co-design and supported them to step into their professional identities as experts who can speak purposefully and confidently to lived experience. That the Program successfully

maintained the group over the 2019 to 2021 implementation period and provided meaningful professional development, consultancy, and co-design opportunities to the women – always to the highest level of quality and care and all within the parameters of Zoom under challenging conditions of public health restrictions and lockdown – cannot be overstated.

**Leading best practice in consultation and co-design**. The Program connected leading organisations and agencies in family violence response, the prevention sector, and the disability sector to the Experts by Experience Group, in ways that were never a 'tick the box' affair. Guidance materials and sound processes ensured that sufficient time and assistance for authentic exchanges between clients and experts were not left to chance. *Quality engagements were intentionally created*. Clients received valuable input into their policies, programs, practices and guides or other resources that they were working on; but that was not the only positive result. All clients, without exception, were exposed to a consultation and co-design approach that centred the women's lived experience, elevated their expertise, and amplified their voices. *They got to see first-hand what leading best practice in consultation and co-design looks like*; this created opportunities for a potential ripple effect of this approach being taken back into their organisations or other work areas.

**High-quality materials and tools**. The Program produced an array of materials and tools intended for integration into its training content but also available more broadly as stand-alone resources for awareness raising and capacity building for prevention. These outputs were significant achievements in that they were each major pieces of content development. They were also significant achievements in that they were the result of leading best practice in consultation and co-design. Lived experience was *integral* to the process; *it was the critical factor for producing high-quality outputs*. Three exemplars come to mind:

- Taking Action series of poster-style information sheets on the drivers of violence against women with disabilities and actions needed to transform them, with lived experience examples that make this content real;
- lived experience video, Primary Prevention of Violence against Women with Disabilities, featuring women with lived experience and an ally speaking to the drivers of violence and the actions we can take; and
- Gender and Disability online short course offering micro-credentialling in gender and disability, with case study and video lived experience scenarios to support learning.

**Well-attended public events (webinars)**. The Program hosted three well-attended online public events to promote its materials and tools and raise awareness of gender, disability and violence prevention among target workforces and sectors. Almost 400 participants in total attended the three events held in December 2020 and March and June 2021. As with the Experts by Experience Group, that these events were successfully planned and delivered in the COVID-19 context of public health restrictions and lockdowns cannot be overstated. But it's the *quality* of the events that once again stands out. The Taking Action launch is particularly noteworthy for its demonstration of leading best practice in consultation and co-design. The event featured 16 women with disabilities speaking to purpose on the everyday contexts of sexism and ableism contained in the posters. The event centred their lived experiences, amplified their

voices, and showcased their expertise, *making for a powerful shared experience among attendees*. The event demonstrated that leading best practice in consultation and co-design was integral to the development of the resource being launched as well as how it was *communicated* – with quality, respect, and care.

**Evolution of 'A Right to Respect'**. The Program successfully refreshed its training offering in the light of 'new normal' ways of doing business under COVID-19 conditions. Consultation and co-design featured strongly in the process and was how quality ensured, along with attention to the latest developments in disability and prevention practices. The Program delivered this offering as calendar training of three three-hour sessions, four times from 2020 to 2021 (including the test run). As a calendar training, 'A Right to Respect,' was open to anyone from the Program's target workforces and sectors, among them disability service providers and sole traders in disability or social services sectors. The refresh was thus a strategic response to the realities of NDIS implementation: it gave training relevance to an ever dispersed and expanding workforce and was marketed as something that could give providers a unique edge.

The disability sector has gone through a lot of change over the last few years. We're seeing a shift from the not-for-profit sector, largely charities running the show, to an emergence of for-profit players. Also, the gig economy is having a big impact on the sort of people we have in the sector. So, if I was going to sum up [the training] in a few words, 'Filling a gap and access.' The accessibility of this work is really game changing. (PAG member)

The redesigned training content could also be tailored to meet the needs of organisations wanting to upskill staff in gender, disability, and prevention. The Program thereby maximised the training via flexible forms of delivery. All in all, the Program was very successful in sustainably redeveloping its training content with all that this involved (i.e., alignment with lived experience, responsiveness to different capacity building needs, transitioning to online delivery) with over 650 attendees recorded for the calendar and tailored offerings.

**Leading best practice in co-facilitation and delivery**. Training participants certainly received a high-quality product through the Program. What they also got was a co-facilitation and delivery experience that allowed for *impactful learning moments*. The standout of the training was its model of co-facilitation: a woman with lived experience paired with a prevention expert, sharing an equal role in speaking purposefully to the training content and supporting the learning of others. Through co-facilitation, the intersecting systems of sexism and ableism were made 'real' in the training room, in that lived experience was brought to bear on the content, discussion and activities. So too were training participants exposed to the possibilities for action on the drivers. As with consultation and co-design, *co-facilitation was a process that maintained the quality of the end-user experience*, this time by giving those in the training room a real-time demonstration of shared knowledge, responsibility and power, and the role that allies can play in ending violence. Co-facilitation promoted equality through *leading by example*.

**Action on the drivers of violence in real time**. Consultation, co-design and co-facilitation were all unique features of the Program, and the centring of lived experience

was the common thread between them. As a process, the centring of lived experience meant valuing the expertise of women most impacted by gender discrimination and disability discrimination. It meant amplifying the voices of women most affected by the intersecting systems of sexism and ableism. It meant challenging dominant stereotypes about women with disabilities and promoting their equality. Without doubt, Experts by Experience clients, webinar attendees and training participants all gained important inputs or content for their work through connecting with the Program. In showing them how leading best practice in consultation, co-design and co-facilitation is done, the Program gave these beneficiaries much more: a good look at what action on the drivers of violence against women with disabilities really means, *what intersectional prevention practice really means.* This was the Program's biggest achievement and marker of quality: *it led by example in everything it did.* 

Anyone who engages with [the Program] gets an excellent example of positive representation of women with disabilities and sees how women with disabilities can operate at such a high level. That works to smash those stereotypes. (Program Team member)

**Victoria's lived experience workforce**. The Program has been hugely important in developing the prevention sector's lived experience workforce, that part of the specialist prevention workforce vital for sound intersectional practice. This has come about through the upskilling, support and *employment* of the Experts by Experience women who can now say that they work at WDV; that they are part of Victoria's prevention sector as experts in gender, disability and primary prevention; that they are contributing to a reform agenda that is transformative and systemic. This reflects a powerful shift in their professional identities *and* in how the sector sees the value of lived experience.

Another way the Program has built and developed the lived experience workforce is in layering lived experience through the Program Team, with over half of its members identifying as women with disabilities. Both layers of lived experience have been the engine room (and heart) of intersectional prevention practice and preventing violence against women with disabilities in Victoria over the last two years; and Victorian primary prevention would be far less advanced without them. *What the Program has built in this lived experience workforce simply doesn't exist anywhere else.* Despite this incredibly important contribution, the Program continues to be funded on a short-term 'phase-by-phase' basis, almost as if it's optional. In keeping with the vision and plan of *Building from Strength*, it is time for the Program's lived experience workforce to be better recognised and fully integrated into the prevention system as a *sustained* part of its infrastructure.

## Lessons learned through design and implementation

Shifting the way the Program is funded would immediately address *the* biggest lesson learned through Program design and implementation. To do all the activities well, with quality and care, with commitment to sound practice around inclusion and accessibility, with alignment to lived experience in every part of design and implementation – in short, to do intersectional prevention practice well and to lead this work by example – *all of this takes time*. To be a Program that *embodies* leading best practice in consultation, co-design and co-facilitation requires time. But the time that is needed is

something that short-term cycles of funding work against, which means everyone ends up functioning in stressful (unsustainable) ways.

We have to get started as soon as we get the money in, work really hard to deliver what we have [to] in the timeframe. It is exhausting. The workloads that everybody works under, they're at 150% every second that they're working. (Program Team member)

One other lesson learned was around external engagements, and the need to be more selective in where the Program can offer representation. These engagements end up being strategic in one way or another e.g., in bringing a disability or intersectionality lens to prevention discussions, or a gender discrimination and inequality lens to disability discussions. Working out where the Program has most strategic influence and then planning an engagement strategy from there could help next time around.

A final lesson learned was around keeping cross-sector CoP members engaged between meetings through information sharing or communications, to minimise any decline in attendance numbers over time.

# Program's value to beneficiaries

When reflecting on the Program's mutually reinforcing activities, a number of beneficiaries come to mind. First, are the specialist prevention and contributor workforces targeted by all the capacity building effort: the training offerings and CoP, the online course, associated tools and materials, the webinars. Workforces have certainly benefited from these activities as training participants or webinar attendees or endusers of the various resources, as described in the sections above. Second, are the organisations and agencies that connected with the Program as clients of the Experts by Experience Group. Again, the benefits have been covered above. Third, are crosssector stakeholders for the prevention of violence against women with disabilities more broadly. The most important example was the PAG. The PAG provided excellent advice and support to the Program Team on Program reach, impact and sustainability. PAG members were beneficiaries of these exchanges too, in that the structure brought together stakeholders who otherwise might not have collaborated; it thereby created opportunities for high-level discussions around gender, disability and prevention, or on the shared challenges of COVID-19 and 'new normal' ways of working.

By far the most important beneficiaries were the Experts by Experience women, for their journey through the Program has been transformational. Many acquired practical and new skills in communication or public speaking. Many learned new things about gender, disability and primary prevention. But the standout shared experience was their transition into being *well-rounded advocates*, meaning experts who can speak to purpose and aren't 'stuck in their own stories,' as put by one evaluation participant. Through the professional development and consultation experience, lived experience was elevated into a wider view of the structural systems of discrimination, and *this* became the women's advocacy platform. This has made for more sustainable practice too, in that the experts don't always have to relive their own stories, they can bring lived experience into conversations in more elevated strategic ways. The women are poised to take on the next phase in their Program journey, which brings us to the final section of this report.

## Next steps for WDV and Victorian primary prevention

What lies ahead for the Gender and Diversity Workforce Development Program? Going forward, there are opportunities to evolve the Experts by Experience Group even further as well-rounded advocates. Members could, for instance, be supported and upskilled as co-facilitators of consultation and co-design processes for intersectional prevention practice, and not only be the ones consulted upon. To an extent, this has already started happening. The level of consultation provided to WIRE and Good Shepherd for their Intersectional Guide and Financial Capability Education Co-design Project is the example here, where one expert was employed by the partners to co-facilitate their other consultations. There could be a strategy to formalise this kind of development of the Experts by Experience women in their ongoing role.

Regarding training opportunities, further exploration of an endorsement pathway is well within the horizon of Program's next phase. So too is further exploration with CWE on how best to locate the Program's non-accredited training and its content in relation to Action 1.0 and Action 2.2 of the *Rolling Action Plan 2019–2022* for *Building from Strength.* 

There is room for the Program going forward to continue shaping our theoretical understandings of the drivers of violence against women with disabilities and the actions to prevent such violence, given the excellent resources it has already produced by way of the training content and associated tools and materials – particularly the Taking Action posters and the lived experience video. Both resources have immediate familiarity and utility to anyone working in prevention, as they overlay a disability lens onto the drivers and actions of *Change the Story*. Contributing further to our theoretical understandings will likely occur in the immediate future through WDV's partnership with Our Watch on a practice guide and conceptual model for the prevention of violence against women with disabilities, anticipated for release in the second half of 2021. Beyond that, the Program does need to continue to make its own stamp as a *thought* leader and practice leader in preventing violence against women with disabilities.

The biggest opportunity, however, is for the Program's lived experience workforce to be better recognised and fully integrated into the prevention system as a sustained part of its infrastructure. This requires advocacy on the part of WDV to the Victorian Government for a solutions-focused approach.

The lived experience is invaluable to people. Unfortunately, we live in a world where lots of people aren't exposed to disability, diverse disabilities and women with disabilities. What the Program provides is something you can't get anywhere else! It's a unique component of the work we deliver, that really strong lived experience perspective. (Program Team member)

It just makes sense, it's obvious. In this space it's how we work. But it's rare. (Experts by Experience member)

The next steps and opportunities are now shaped into evaluation recommendations for WDV and Victorian primary prevention stakeholders to take forward.

# Recommendations

**Recommendation 1**. That WDV builds on its existing relationship with the Centre for Workforce Excellence (CWE) at Family Safety Victoria (FSV) to strategically locate the Program's capacity building activities in the context of the reform agenda for the next few years, with specific attention paid to how these activities can continue to support CWE's implementation of Action 1.10 and Action 2.2 of the *Rolling Action Plan 2019–2022* for *Building from Strength*. It is suggested that the Program's non-accredited training offerings to specialist prevention and contributor workforces continue to be reflected in Action 1.10, supported by a refreshed industry needs analysis currently being undertaken by WDV. It is suggested that conversations around Action 2.2 include opportunities for how the Program's high-quality training content and associated resources can be effectively integrated into the accredited training for specialist and contributor prevention workforces that CWE has commenced working on.

**Recommendation 2**. That WDV pursues explorations around an endorsement pathway for the Program as set out in the scoping paper presented to the Program Advisory Group (PAG) at the October 2020 meeting. This pathway should be approached as a means to increase the Program's reach to and engagement with specialist prevention and contributor workforces. These explorations can be run in parallel with (but are not reliant upon) Respect Victoria's development of an endorsement framework for prevention initiatives more broadly, depending on the timing.

**Recommendation 3**. That WDV develops a strategy for Program representation on high-level prevention committees or structures, among them (but not limited to) the prevention strategic reference group of the Family Violence Reform Advisory Group, so that intersectional prevention practice continues to be heard loud and clear at the reform governance level and at other strategic prevention levels.

**Recommendation 4**. That WDV re-establishes the cross-sector PAG to provide strategic advice and support to the Program on reach, delivery and sustainability; and that WDV strongly considers introducing another complementary structure that can support implementation 'on the ground.' This might be working groups of the PAG, or it might be a dedicated Program Implementation Group (PIG) as was in place to good effect during the Program's pilot years.

**Recommendation 5**. That the Program continues to upskill and support the Experts by Experience Group for consultation and co-design, as they are sought after for their expertise and are an integral part of intersectional prevention practice in Victoria. Added to this, that the Program develops a formal strategy to upskill and support the Experts by Experience Group to themselves be co-facilitators of leading best practice consultation and co-design.

**Recommendation 6**. That WDV advocates to the Victorian Government to properly recognise and integrate the Program's unique lived experience workforce into Victoria's prevention infrastructure, noting that full recognition and proper integration are not helped (but hindered) by cycles of short-term funding. In other words, that WDV and the Victorian Government work on solutions for the continued sustained

existence and development of this vital part of the prevention workforce in ongoing recurrently funded ways.

**Recommendation 7**. That WDV communicates the findings contained in this evaluation report to whomever and whenever it needs to, as evidence of the Program's leading best practice in consultation, co-design, co-facilitation and intersectional prevention practice, and to support the implementation of Recommendation 1 to Recommendation 6 above.

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# **Appendices**

- Appendix 1 Refined Program Logic Model 5 May 2021
- Appendix 2 Refined Program Evaluation Plan 5 May 2021
- Appendix 3 Program resources i.e., tools and materials

#### APPENDIX 1 REFINED PROGRAM LOGIC MODEL FINAL 5 MAY 2021

Objective 1: Strengthen strategic partnerships for preventing violence against women with disabilities (PVAWD)

Objective 2: Enhance the capacity of Women with Disabilities Victoria (WDV) and partners to develop and deliver quality evidence-based workforce prevention programs Objective 3: Build the capacity of women with disabilities (WWD), the prevention workforce, and the social services workforce for PVAWD

Objective 4: Strategically position WDV's programs in a rapidly evolving policy context of statewide family violence (FV) reform and the National Disability Insurance Scheme (NDIS) Objective 5: Contribute to building the evidence base for PVAWD

	Activities	Outputs	Desired changes (immediate to medium term)	
Inputs	Strategic partnerships & engagements	1 x Program Advisory Group (with TOR) to govern the Program 2 x strategic communications per month to influencers & decision makers in prevention & social services sectors (workforce development & PVAWD opps)	Improved relationships among cross-sector stake- holders critical for PVAWD; enhanced recognition of WDV's role in prevention	Longer-term changes
Funding & staffing; WWD WHS Workforce Capacity Building Project, SRH Project Empowerment Program	Program partnerships	Partnerships with <b>2</b> x WHS, <b>1</b> x disability peak, <b>1</b> x national prevention origination & specific sectors incl. education, local government etc.	Increased partner commitment to inclusive practices; improved understandings of workforce/systems/ structural barriers to inclusive practices	WWD are skilled & supported employees in prevention & social services workforces
Policy environment FV reform i.e., Ending Family Violence, Free from Violence, Building from Strength, workforces capability frame- works, intersectionality consultations	Program establishment & design	<ul> <li>1 x Program Team skilled for Program co-design; min. 50% WWD</li> <li>1 x EbE Team (approx. 12 WWD) skilled for Program co-design</li> <li>Co-designed training package/s, resources, presentations etc. (co-designed = by Program Team and/or EbE Team)</li> </ul>	Increased diversity of WWD for policy/program design; improved pathways (opps) for leadership, employment Increased integration of workforces capacity building efforts within WDV; improved alignment of programs to evidence, policy, etc., improved quality of programs	Organisational cultures are gender & disability transformative & do not tolerate violence supportive attitudes Sustained cross-sector
NDIS Information Linkages & Capacity Building, Quality & Safeguarding Framework	Program promotion	Promotion strategy i.e., 2 x Program promotion plans per year	Improved capacity of WDV to target desired settings	leadership exists for PVAWD; WDV's PVAWD work is mainstreamed
Evidence base Change the Story, Voices Against Violence, Workforce Development Program past evaluation findings, WDV Right to Respect resources Principles Collaboration, inclusivity, intersectionality, women's lived experiences, adherence to the evidence Readiness Public discourse on VAW & prevention; workforces & sectors readiness post RCFV WDV's reputation Practice & policy expertise Cross-sector partnerships	Program delivery          Expansion activity to embed & sustain	<ul> <li>4 x professional development sessions to EbE Team At least 8 x EbE consultancy/advice engagements per year (opps offered through the Program) (engagements = WDV &amp; external) Disability &amp; social services workforces training (incl. webinars) with flexible delivery modes &amp; modules; min. 150 participants per year WHS workforces training to strengthen their intersectional prevention lens Other presentations (incl. webinars) for sector awareness building At least 12 x PVAWD resources (8 x online tools, 4 x videos) 1 x regional cross-sector CoP (disability &amp; prevention) Program Team representation on at least 6 committees or networks that have a disability or prevention focus 3 x Program Team consultancies per year on PVAWD resources &amp; training</li> <li>1 x partnership with OW for the PVAWD conceptual framework 1 x partnership with WHV for the gender &amp; disability equity micro-credential 1 x updated industry needs analysis/report to inform future directions</li> </ul>	INDIVIDUAL LEVEL EbE Improved skills & confidence of WWD in their experts role; improved pathways (opps) for their leadership, employment INDIVIDUAL LEVEL OTHERS Enhanced awareness & knowledge among training/CoP/webinar participants of VAWD (dynamics, prevalence, drivers); improved confidence & skills to act on the drivers; increased awareness of tools for action; demonstrated commit- ment to address the drivers & take action ORGANISATIONAL LEVEL Improved capacity among organisations & structures to further their inclusive PVAW practices/intersectional work SECTOR LEVEL Enhanced opps for cross-sector collabs Improved capacity to transfer or scale up WDV's work	A society exists in which WWD participate fully in civic, social, economic life <u>PROGRAM VISION</u> Women with disabilities & their children are safe, thriving & free from violence <u>WDV VISION</u> A world where all women are respected & can fully experience life
	Program evaluation for learning & improving	1 x evaluation report (incl. dissemination & use of findings)	Improved capacity of WDV to share achievements & lessons learned, make sound decisions on 'what next'	

# Workforce Development Program on Gender and Disability 2019–2021 Refined Evaluation Plan Final 5 May 2021

### **Evaluation Plan and Logic Model**

This Evaluation Plan should be read in conjunction with the Logic Model for the Workforce Development Program on Gender and Disability (WDPGD). The Logic Model depicts the activities, outputs and desired changes of the WDPGD over time. The Evaluation Plan 'operationalises' the Logic Model's outputs and immediate to medium-term (i.e., two-year) program-level impacts expressing them as 'indicators of success.'

This Evaluation Plan should also be read in conjunction with the latest iteration of the Victorian Government's *Family Violence Outcomes Framework*. The *Outcomes Framework* contains 26 population-level outcome indicators across four population-level outcome areas under a single population-level prevention domain, 'Family violence and gender inequality are not tolerated.' This Evaluation Plan depicts the relationship between program-level impacts and longer-term population-level outcome indicators of the *Outcomes Framework*, where contributional 'line of sight' relationships (not direct attributional links) can be asserted between these two levels of change, and insofar as the Victorian Government's outcome indicators are understood as extending *well into* the future and *well beyond* the Program's timeframe, scope and demonstrable influence as set by its fully operationalised indicators of success.

#### Evaluation purpose and overarching questions

Data collected against the indicators contained in this Evaluation Plan will enable the evaluation to meet its purpose, which is to:

- capture the achievements of, and lessons learned from, the design and implementation of WDPGD over the two-year period 2019–2021;
- determine the value of WDPGD from the perspectives of those who have been involved in the Program, among them:
  - women with disabilities (WWD)
  - members of the Program Team
  - sectors and workforces for the prevention of violence against WWD (PVAWD) i.e., women's health, disability and social services
  - Women with Disabilities Victoria (WDV) and other stakeholders in Victorian primary prevention, including members of the Program Advisory Group (PAG);
- draw conclusions about WDPGD so that WDV and stakeholders can make informed decisions about 'what next' for the Program; and
- support WDV to communicate and share the Program's results including (but not limited to) reporting to the Victorian Government.

In line with the purpose above, the overarching questions to be answered through the evaluation are:

- 1. What are the achievements of, and lessons learned from, designing and implementing WDPGD?
- 2. How was design and implementation quality demonstrated and maintained by the Program's various activities?
- 3. What was the value of WDPGD to those involved in its various activities?
- 4. What conclusions can be made about the Program, especially in terms of 'what next' for WDV and workforces capability development for Victorian primary prevention?
- 5. What are the strategic recommendations arising from the evaluation?

#### APPENDIX 2 REFINED EVALUATION PLAN FINAL 5 MAY 2021

While not set as an explicit question to answer, the evaluation will also help to determine the extent to which WDPGD is contributing to the population-level outcomes sought by the Victorian Government as it implements *Free from Violence: Victoria's strategy to prevent family violence and all forms of violence against women*, particularly in its funding of evidence-informed and evidence-building prevention initiatives such as WDPGD.

#### Primary intended user and use

The evaluation's primary intended user is WDV and the WDPGD Team, and the primary intended use of the evaluation is to support the WDPGD Team in sound and strategic decision making around WDV's continued efforts to develop Victorian workforces capability for PVAWD.

#### **Evaluation design process**

This Evaluation Plan is the result of shared thinking by members of WDV's WDPGD Team over the course of a series of facilitated workshops, initially in late 2018 then followed by further refinements in early 2021. Over the course of the evaluation design sessions, the Team utilised the Logic Model to arrive at the final set of SMART indicators contained in the pages that follow.\* The design process was led by Wei Leng Kwok of WLK Consulting who is also the lead for the evaluation of WDPGD.

\* SMART indicators are specific/sharp; measurable/manageable/meaningful; achievable/attainable/accurate/action-oriented; relevant/realistic/repeatable/reliable; and timely/ timebound. They are also 'ours' and 'owned'.

tivities	Indicators of success	Data collection methods	Who leads & when b	
nts	SMART process indicators (outputs & reach, quality)	Mon 7 Jun <b>Shared Interview</b> with WDV personnel involved in high- level strategic partnerships & engagements	Evaluator reviews all documents May 2021 Evaluator conducts FG & int. Apr to Jun 2021	
	1 x PAG with cross-sector (i.e., prevention & disability) membership			
	1 x TOR to support the PAG's role in guiding & advising on Program implementation			
	2 x WDV strategic communications per month to influencers & decision makers in the prevention & social services sectors			
ageme	WDV representation (advocacy) on at least 2 x prevention or disability workforce development industry groups e.g., advisory committees, peak bodies			
High-level strategic partnerships (i.e., PAG) & other engagements	Over the course of the Program, the PAG consistently meets its TOR i.e., its purpose; member expectations & responsibilities (e.g., strategic advice, partnership opportunities, Program promotion); best practice accessibility & inclusion processes			
	Of WDV personnel involved in the PAG & other high-level engagements, their <i>overall</i> view by Program end is that these activities were meaningful, worthwhile & enabling of WDPGD implementation (specific examples)			
<u>م</u>	SMART program-level impact indicators			
(i.e	As a result of their involvement in WDPGD (i.e., by Jun 2021) PAG members can speak to			
sdir	<ul> <li>stronger cross-sector relationships for PVAWD than before the Program</li> </ul>			
ersl	<ul> <li>enhanced recognition of WDV's role in prevention</li> </ul>			
partne	WDV personnel can also speak to WDV's role in prevention being more recognised by sectors e.g., those represented at the PAG			
egio	As a result of implementing the PAG & other strategic engagements (i.e., by Jun 2021) WDV personnel can:			
evel strate	<ul> <li>report increases in demand (referrals) for WDPGD from prevention &amp; social services sectors</li> </ul>			
	<ul> <li>provide evidence of WDV/WDPGD being featured or recommended by industry groups in prevention, disability or social services sectors to progress workforces capability development</li> </ul>			
- B	Program-level (i.e., two-year) impacts as per WDPGD Logic Model			
I	Improved relationships among cross-sector stakeholders critical for PVAWD			
	Enhanced recognition of WDV's role in prevention			
	Free from Violence population-level outcome 'line of sight'			
	Increased number of organizations & institutions that model & promote inclusive helpsviour			

Increased number of organisations & institutions that model & promote inclusive behaviour

Activities	Indicators of success	Data collection methods	Who leads & when by
Program partnerships	<ul> <li>SMART process indicators (outputs &amp; reach, quality)</li> <li>Partnerships with relevant organisations or entities to facilitate Program delivery i.e., <ul> <li>2 x Victorian WHS &amp; 1 x Victorian women's health peak body</li> <li>1 x disability industry peak body</li> <li>1 x national prevention body</li> <li>specific sector organisations or entities e.g., social services institutes, disability support providers, education institutions, local governments</li> </ul> </li> <li>Of WDV personnel involved in Program partnerships, their <i>overall</i> view by Program end is that these activities were meaningful, worthwhile &amp; enabling of WDPGD implementation (specific examples)</li> <li>SMART program-level impact indicators</li> <li>As a result of their involvement as Program partner (i.e., by Jun 2021) each Victorian WHS can: <ul> <li>report the introduction of least 1 x new action for gender &amp; disability transformative practice within their own organisation (e.g., a policy, integration of PVAWD into core training offerings) &amp; give reasons for why this has been important in terms of inclusive practice</li> <li>demonstrate their organisation's intent to sustain gender &amp; disability transformative practice</li> <li>As a result of their involvement as Program partner (i.e., by Jun 2021) peak bodies, institutes, providers, institutions, local governments, etc. can demonstrate an intent to introduce gender &amp; disability transformative practice</li> </ul> </li> </ul>	Review of documents e.g., partnership agreements, planning notes Shared interview with WDV personnel involved in Program partnerships Interviews with WHS; Qs via email to other Program partners (contacts)	Evaluator reviews all documents May 2021 Evaluator conducts al int. Apr to Jun 2021 Evaluator administers Qs via email May 202
	Program-level (i.e., two-year) impacts as per WDPGD Logic Model Increased partner commitment to inclusive practices Improved understandings of workforce/systems/structural barriers to inclusive practices		

tivities	Indicators of success	Data collection methods	Who leads & when by
Program establishment & design	<ul> <li>Process (outputs, reach, quality)</li> <li>1 x Program Team skilled for co-design; min. 50% WWD</li> <li>1 x EbE Team (approx. 12 WWD of diverse abilities &amp; socio-demographic backgrounds) skilled for co-design</li> <li>1 x co-design process for training package/s &amp; presentations; resources (full list under 'Program delivery')</li> <li>Program Team &amp; EbE Team can describe how the establishment &amp; co-design activities were leading practice: <ul> <li>through the evolution of the EbE Team (incl. renumeration) &amp; in the composition of the EbE team</li> <li>in ensuring safety, accessibility &amp; inclusion for meaningful consultation with/contribution from WWD</li> <li>in shaping high quality outputs that are evidence informed; accessible &amp; inclusive; appropriate to the intended audiences &amp; responsive to their needs (i.e., tested); relevant to strategic opportunities in Victorian primary prevention</li> </ul> </li> <li>SMART program-level impact indicators <ul> <li>report being positively influenced by the EbE Team through the co-design process, with specific examples of how e.g., in final outputs that are high quality, evidence informed</li> <li>demonstrate how WDPGD (&amp; by extension WDV's work as a whole) was better aligned with the latest research &amp; frameworks e.g., <i>Change the Story</i>, workforces capabilities framework</li> </ul> </li> <li>As a result of their involvement in the co-design process, EbE Team members can identify ways in which their expertise has been or is being sought by Programs other than those of WDV</li> </ul>	Review of documents e.g., co- design notes, EbE group minutes, draft & final outputs, Program Team documented reflections Focus Group B with EbE Team during scheduled meeting Wed 12 May Focus Group C with Program Team	Evaluator reviews all documents May 2021 Evaluator conducts FGs Apr to Jun 2021
	Program-level (i.e., two-year) impacts as per WDPGD Logic Model Increased diversity of WWD for policy/program design Improved pathways (opportunities) for WWD's leadership, employment Increased integration of workforces capacity building efforts within WDV Improved alignment of programs to evidence, policy Improved quality of programs		
	Free from Violence population-level outcome 'line of sight'		

Activities	Indicators of success	Data collection methods	Who leads & when by
Program promotion	Process (outputs, reach, quality) 1 x EOI process to engage a suitable consultant (or 1 x internal process) for the promotion strategy 1 x promotion strategy comprising 2 x action plans per year targeting relevant settings	<b>Review of documents</b> e.g., EOI (or internal) process, promotion strategy, action plans, record of requests incl. 'How did you hear about the WDPGD?' i.e., info source <b>Focus Group C</b> with Program Team	Evaluator reviews all documents May 2021 Evaluator conducts FG Apr to Jun 2021
	<ul> <li>SMART program-level impact indicators</li> <li>As a result of the Program promotion activity (i.e., by Jun 2021) members of the Program Team can: <ul> <li>report being supported in their reach to &amp; engagements with workplaces settings required for the Program to meet its delivery targets (see 'Program delivery' for outputs)</li> <li>demonstrate an increase in requests for workforces capability development services from disability &amp; social services sectors (increase commensurate with WDPGD's capacity &amp; resources to meet demand)</li> </ul> </li> </ul>		
	Program-level (i.e., two-year) impacts as per WDPGD Logic Model Improved capacity of WDV to target desired settings		
	Free from Violence population-level outcome 'line of sight' Increased number of organisations & institutions that model & promote inclusive behaviour		

Activities	Indicators of success	Data collection methods	Who leads & when by
Program delivery i.e., EbE professional development	<ul> <li>Process (outputs, reach, quality)</li> <li>4 x professional development sessions for the EbE Team</li> <li>Program Team can provide evidence that the sessions were</li> <li>responsive to EbE women's learning needs</li> <li>informed by evidence in their design &amp; content</li> <li>appropriate, sensitive, engaging etc., in their delivery</li> <li>relevant to strategic opportunities in Victorian primary prevention</li> <li>Of the women participating in the sessions, the majority report that</li> <li>participation was time well spent; delivery mode/s were inclusive</li> <li>materials/resources for building capacity were relevant to their learning needs</li> <li>facilitation was appropriate, sensitive &amp; engaging; facilitators were approachable</li> <li>content of activities/discussions was appropriate, stimulating &amp; engaging</li> </ul> SMART program-level impact indicators As a result of participating in the sessions, the majority of EbE Team (i.e., > 50% feedback form respondents) report <ul> <li>increased understandings of gender &amp; disability equity, PVAWD</li> <li>increased awareness of how lived experience can be brought to their experts role</li> <li>increased confidence &amp; skills in providing consultancy &amp; advice as 'experts by experience'</li> </ul>	Review of documents e.g., session plans or outlines; communications with EbE Team; documented facilitator reflections; Zoom recorded sessions/chat box; reflective discussions as documented; comments post session Participant feedback form Focus Group B with EbE Team during scheduled meeting Wed 12 May Focus Group C with Program Team	Evaluator reviews all documents May 2021 Facilitator/s administer participant feedback form at the end of each session Evaluator conducts FGs Apr to Jun 2021
Progra	Program-level (i.e., two-year) impacts as per WDPGD Logic Model         Improved confidence & skills of WWD in their experts role         Free from Violence population-level outcome 'line of sight'         Increased awareness of what constitutes violence         Increased recognition of the significant impact of violence on victim survivors         Increased awareness & understanding of the extent & impact of gender inequality		4

# APPENDIX 2 REFINED EVALUATION PLAN FINAL 5 MAY 2021

Activities	Indicators of success	Data collection methods	Who leads & when by
Program delivery i.e., EbE consultancy or advice services	<ul> <li>Process (outputs, reach, quality)</li> <li>At least 8 x EbE consultancy or advice engagements (within WDV &amp; externally) per year opportunities identified through Program activities</li> <li>Of the EbE women providing consultancy or advice services, their overall view is:         <ul> <li>they felt adequately prepared for the engagements</li> <li>the engagements were worthwhile &amp; meaningful to them (e.g., they felt heard, respected, etc.)</li> <li>WDV's best-practice consultancy guidelines were met</li> </ul> </li> <li>Of those receiving the consultancy or advice services, their overall view is:         <ul> <li>their needs as clients were understood during planning discussions</li> <li>WDV best-practice consultancy guidelines helped them understand what was in/out of scope i.e., set clear expectations about the services provided</li> <li>the consultancy or advice provided was relevant to &amp; met their needs; was appropriately delivered</li> <li>engaging these services was time &amp; money (if applicable) well spent</li> <li>they would recommend this service to others</li> </ul> </li> <li>EbE Team &amp; Program Team can also speak to how those receiving the consultancy or advice services found the experience in terms of the above indicators</li> <li>SMART program-level impact indicators</li> <li>Program Team &amp; EbE Team can provide examples of how the consultancy or advice services</li> <li>were valued by clients i.e., were genuinely heard by them</li> <li>have continued to build the confidence &amp; skills of EbE Team members in their experts role</li> <li>Those receiving consultancy or advice services can also give examples of how the services have helped them or can describe ways in which they have valued the expertise of EbE women</li> <ul> <li>As aresult of providing consultancy or advice services, the expertise of EbE women</li></ul></ul>	Review of documents e.g., reflections on coaching & mentoring (as documented); informal client feedback Focus Group B with EbE Team during scheduled meeting Wed 12 May Focus Group C with Program Team Qs via email for collection of client feedback	Evaluator reviews all documents May 2021 Evaluator conducts FGs Apr to Jun 2021 Evaluator collects clien feedback via email Qs May 2021
	Program-level (i.e., two-year) impacts as per WDPGD Logic Model Improved confidence & skills of WWD in their experts role Improved pathways (opportunities) for WWD's leadership, employment		<b>A</b>
	Free from Violence population-level outcome 'line of sight' Increased number of organisations & institutions that model & promote inclusive behaviour		

# APPENDIX 2 REFINED EVALUATION PLAN FINAL 5 MAY 2021

Activities	Indicators of success	Data collection methods	Who leads & when by
Program delivery i.e., workforces training & cross-sector CoP	<ul> <li>Process (outputs, reach, quality)         <ol> <li>x schedule of disability &amp; social services workforces training incl. webinars; flexible delivery modes &amp; modules; 150 participants per year</li> <li>x schedule of WHS workforces training to strengthen their intersectional prevention lens</li> <li>x regional cross-sector (i.e., prevention &amp; disability) CoP</li> <li>WDPGD Team can give evidence of sound practice in training delivery, e.g.,</li> <li>s sessions were appropriate, responsive, flexible, accessible to the workforces or sectors concerned</li> <li>facilitation was inclusive &amp; constructive with respect to learning; co-facilitators were approachable</li> <li>technological delivery aspects were well handled (given online training environment for 2020–21)</li> <li>collaboration with WDV's WHS Capacity Building Project enriched delivery (for WHS training only)</li> </ol></li></ul> <li>Of those attending the training sessions or participating in the CoP meetings who return feedback forms:         <ul> <li>80% agree that attending was time well spent</li> <li>80% agree that activities &amp; discussions were inclusive (in the context of the online training environment)</li> <li>80% agree that activities &amp; discussions were inclusive, appropriate, stimulating &amp; engaging</li> </ul> </li> <li>SMART program-level impact indicators</li> <li>Of those attending the training sessions or participating in the CoP meetings who return feedback forms:         <ul> <li>75% report increases in awareness &amp; knowledge of the intersecting drivers to prevent violence against WWD;</li> <li>75% report increases in confidence &amp; skills to act on the intersecting drivers to prevent violence against WWD from happening in the first place</li> <li>70% conmit to undertaking at least 1 x PVAWD action over the next 12 months within their</li></ul></li>	Review of documents e.g., training sessions records, session plans or outlines, CoP agendas; documented co-facilitator reflections; comments post session Participant feedback form Focus Group D with training & CoP facilitators Shared interview with up to 3 x selected CoP members (30 mins) from week beginning 17 May	Evaluator reviews all documents May 2021 Facilitator/s administer participant feedback form at the end of each training session or CoP meeting Evaluator conducts FG & int. Apr to Jun 2021

Activities	Indicators of success	Data collection methods	Who leads & when by
ed)	Program-level (i.e., two-year) impacts as per WDPGD Logic Model Enhanced awareness & knowledge among individuals of violence against WWD (dynamics prevalence drivers) Improved confidence & skills among individuals to act on the drivers; increased awareness of tools for action Demonstrated commitment among individuals to address the drivers & take PVAWD action Improved capacity among organisations to further their inclusive prevention practices or intersectional work	<u><u><u><u></u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u></u></u>	
ntinu	Enhanced opportunities for cross-sector collaborations		
(cor	Free from Violence population-level outcome 'line of sight' Increased awareness of what constitutes violence Increased awareness & understanding of the extent & impact of gender inequality		
	Increased number of organisations & institutions that model & promote inclusive behaviour		

Free from Violence population-level outcome 'line of sight'

#### APPENDIX 2 REFINED EVALUATION PLAN FINAL 5 MAY 2021

ivities	Indicators of success	Data collection methods	Who leads & when by
Program delivery i.e., presentations & PVAWD resources	<ul> <li>Process (outputs, reach, quality)</li> <li>Presentations incl. webinars for sector awareness building; those registering or participating reflect cross sectors (i.e., prevention, disability &amp; social services)</li> <li>At least 12 x PVAWD resources e.g., 4 x videos, 8 x online tools</li> <li>drivers of violence (video)</li> <li>webinar recordings of 16-days of activism 2020 &amp; IWD 2021 (videos)</li> <li>WDV/social model of disabilities (online tool) &amp; webinar recording (video)</li> <li>4 x drivers &amp; 5 x essential actions (online tool)</li> <li>16-days of activism 'tiles' (online tool)</li> <li>taking Action Guide (online tool)</li> <li>short course (online tool)</li> <li>short course (online tool)</li> <li>short course (online tool)</li> <li>appropriate to the intended audiences &amp; responsive to their needs i.e., tested</li> <li>relevant to strategic opportunities in Victorian primary prevention</li> <li>[NOTE the above SMART indicators are replicated from 'Program establishment &amp; design']</li> <li>Program Team can demonstrate that</li> <li>the uploading of videos &amp; online tools onto WDV's website was timely &amp; efficient</li> <li>each online tool was exposed to at least 130 unique individuals through webinars &amp; recordings</li> <li>16-days of activism 'tiles' received at least 300 views across Facebook, Twitter, Instagram</li> <li>presentations incl. webinars were a powerful demonstration of WDV's co-facilitation model &amp; positioning WWD as experts &amp; leaders; technological aspects were well handled (online context)</li> <li>SMART program-level impact indicators</li> <li>Of those attending presentations or webinars who return feedback forms:</li> <li>80% agree that the event were relevant to their work</li> <li>80% agree that the event helped build their awareness around PVAWD</li> <li>80% agree that the event helped build their awareness around PVAWD</li> <li>80% agree that the levent helped bu</li></ul>	Review of documents e.g., co-design records or notes; EbE group minutes; draft & final outputs; Program Team documented reflections; run sheets for presentation incl. webinar; comments from webinar participants & feed- back from presenters; video recordings/transcripts/chats; web-based analytics Focus Group B with EbE Team during scheduled meeting Wed 12 May Focus Group C with Program Team Participant feedback form	Evaluator reviews all documents May 2021 MCs administer participant feedback form at the end of each presentation or webina Evaluator conducts FGs Apr to Jun 2021

Enhanced awareness & knowledge among individuals of violence against WWD (dynamics prevalence drivers)

Free from Violence population-level outcome 'line of sight'

Activities	Indicators of success	Data collection methods	Who leads & when by
	Process (outputs, reach, quality)		Evaluator reviews all documents May 2021 Evaluator conducts int. Apr to Jun 2021; emails Qs or chats Apr to Jun 2021 Facilitators administer participant feedback form at the end of the
	1 x partnership with Our Watch for 1 x PVAWD conceptual framework	Review of documents e.g., MOU with WHV, partnership agreement with OW; consult notes for the needs analysis/ report; report Shared interview with WDV personnel involved in the expansion activity; Qs via email or chat with WDV staff the OW partnership	
	1 x partnership with WHV for 1 x disability & gender equity micro-credential & its pilot		
	1 x stakeholder/consultation plan for revising the industry needs analysis/report		
	1 x industry needs analysis/report to inform future directions		
expansion activity	WDV Personnel can report that the partnerships with Our Watch & WHV were beneficial & yielded high quality outputs through the expert contributions of WDV i.e., outputs are evidence informed; accessible & inclusive; appropriate to the intended audiences & responsive to their needs i.e., tested; relevant to strategic opportunities in Victorian primary prevention		
ansi	SMART program-level impact indicators		
	As a result of undertaking the expansion activity (i.e., by Jun 2021) WDV personnel can demonstrate how the organisation is better positioned for the transfer or scale up of WDPGD		
Υ i.	Of those participating in the micro-credential pilot who return feedback forms:		
iver	• 75% report increases in awareness & knowledge of the intersecting drivers of violence against WWD;		short course session
Program delivery i.e.,	<ul> <li>75% report increases in confidence &amp; skills to act on the intersecting drivers to prevent violence against WWD from happening in the first place</li> </ul>		
ogra	• 70% commit to undertaking at least 1 x PVAWD action over the next 12 months		
Pro	• 70% can identify at least 1 x best-practice resource to support PVAWD action		
	70% would recommend the short course to others		
	Program-level (i.e., two-year) impacts as per WDPGD Logic Model		
	Improved capacity to transfer or scale up WDV's work		
	Free from Violence population-level outcome 'line of sight'		
	Increased number of organisations & institutions that model & promote inclusive behaviour		

## Summary of main data collection methods

- Review of multiple WDPGD documents over the course of 2019–2021 May 2021
- Focus Group A PAG scheduled meeting Mon 7 Jun 2021
- Focus Group B EbE scheduled meeting Wed 12 May 2021
- Focus Group C Program Team date TBC
- Focus Group D training & CoP facilitators Wed 12 May 2021
- Shared interview with selected CoP members from week beginning 17 May 2021
- Shared interview with WDV personnel involved in the high-level strategic partnerships, Program partnerships & expansion activity date TBC
- Interviews with WHS Program partners & Qs via email to other Program partners Apr to Jun 2021
- Qs via email to capture feedback from clients of EbE consultancy & advice services May 2021
- Qs via email to capture feedback from those receiving Program Team expertise, consultancy & advice May 2021
- Post-session participant feedback form for EbE professional development; workforces training & CoP; webinars; short course pilot

## Video resources

Primary Prevention of Violence against Women with Disabilities lived experience compilation video and five individual chapters, featuring five women with disabilities and an ally speaking about the drivers of violence against women with disabilities and collectively calling viewers to take action to end violence once and for all, <<u>https://www.wdv.org.au/family-violence-resources/</u>>

Understanding Disability animated video presenting six keystones for understanding disability, <<u>https://www.wdv.org.au/family-violence-resources/</u>>

Preventing and Responding to Family Violence. Four videos with accompanying guides that cover the intervention spectrum of prevention, early intervention and response in relation to violence against women with disabilities. Developed in partnership with National Disability Services (NDS) Zero Tolerance Initiative, and available at WDV and NDS websites <<u>https://www.wdv.org.au/family-violence-and-disability-films/</u>> and <<u>https://www.nds.org.au/zero-tolerance-framework/considering-additional-risk</u>>

## Workbooks and self-paced learning tools

Gender and Disability short course, a micro-credential or certification-style online learning program available to students and practitioners to improve their skills in gender and disability <<u>https://womenshealthvictoria.otrainu.com/product/gender-and-disability/</u>>

Prevention of Violence against Women micro-webinar series, a two-part online self-paced micro-course to help understand violence against women with disabilities and actions to prevent it, <<u>https://www.wdv.org.au/family-violence-resources/</u>

10 Actions to be a Gender and Disability Equitable Organisation aimed at disability organisations and service providers, with an accompanying workbook titled Working Towards Gender and Disability Equality, both at <<u>https://www.wdv.org.au/family-violence-resources/#2021</u>>

Why Focus on Violence against Women with Disabilities: A self-guided activity for workers, <<u>https://www.wdv.org.au/family-violence-resources/</u>>

## Information and fact sheets

Taking Action series of nine poster-style information sheets on the drivers of violence against women with disabilities and actions to prevent it from happening in the first place, <<u>https://www.wdv.org.au/resources-to-accompany-prevention-of-violence-against-women-with-disabilities-workforce-resources-for-action/</u>>

Actions to Prevent and Reduce Violence against Women with Disabilities, <<u>https://www.wdv.org.au/family-violence-resources/</u>>

Violence against Women with Disabilities, <<u>https://www.wdv.org.au/family-violence-resources/</u>>

Intersectionality and the Primary Prevention of Violence against Women <<u>https://www.wdv.org.au/family-violence-resources/</u>>

## Social media resources

UN 16-days of Activism against Gender-based Violence and UN International Day of Persons with Disability 2019, 'Disability Respect: Call it out' social media campaign with accompanying tip sheet, 12 Principles of Respectful Communication with Women with Disabilities <<u>https://www.wdv.org.au/16dayscampaign/</u>>

UN 16-days of Activism against Gender-based Violence and UN International Day of Persons with Disability 2020, 'Respect Is' social media campaign, <<u>https://www.wdv.org.au/social-media-campaigns/2020-16-</u> days-of-activism-against-gender-based-violence-campaign/>