

# Integrated Violence Prevention, Planning, and Governance: International and Victorian Perspectives

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**Abstract:** This paper will present the findings from the first stage of an ARC Linkage Grant between the University of Melbourne and the Victorian Health Promotion Foundation (VicHealth) entitled “Gender, Local Governance, and Violence Prevention: making the links”. The project works with four local government-community organization partnerships in Victoria: the inner suburb of Maribyrnong, the outer suburb-rural interface locality of Casey, the regional centre of Bendigo, and the rural shire of Loddon. In their first year of work, the municipalities and key health and women’s agencies have strengthened partnerships on violence prevention, developed audits of current resources working to prevent violence in their localities, and have begun to work on both policy formation and the development of monitoring and evaluation systems. While work in planning around violence prevention has traditionally focused on Crime Prevention Through Environmental Design, these audits and evaluation plans suggest a broadened role for spatial planning, related to social service provision, evidence-based ‘whole of government’ coordinated action, and engendering changes in attitudes towards public and private space.

## Introduction

I carry out research and write on a broad range of topics related to the relationship between planning and positive health and wellbeing outcomes. However, this is the third presentation I have done at a State of Australian Cities conference on a specific subject: spatial planning and governance in relation to violence prevention. In 2003, I wrote about “the problem with problem definition” in Australian crime and violence prevention: the fact that the national, state, and local governments appeared to have no consensus about the main priorities they might face in a ‘whole of government’ approach to community safety (Whitzman, 2003). In 2005, David Mayes and I presented on community safety indicators in Victoria (Whitzman and Mayes, 2005). The Labour state government developed indicators on several key priorities in 2000, including ambitious goals for decreasing police-reported rates of violence and fear of violence, as part of a strategy to develop “Safer Streets and Homes” (Crime Prevention Victoria, 2002). Unfortunately, the Victorian government had not apparently considered that new policies on stricter reporting of intimate partner violence, combined with a national government campaign on violence against women, would increase reporting to the police of this previously hidden violence. Faced with this apparent policy failure, which was actually a policy success coupled with a failure to choose the correct method to evaluate success, the Victorian government abandoned that indicator, did not renew its “Safer Streets and Homes” policy, and disbanded Crime Prevention Victoria. It also retreated from a commitment to address violence in both the public and private spheres, continuing a commitment to family violence prevention as part of its human services department, but largely reverting to a focus on reacting to property crime, rather than preventing crimes against the person, in its justice department. This can be seen as the latest example of the progress of Australian national and state crime prevention being, at best, “cyclical” (Sutton and Cherney, 2002).

This current paper broadens out the discussion by turning away from the state and national scales of governance, towards a discussion of international trends, and local governance innovation in Australia and elsewhere. Having just completed a book on community safety, gender, and violence prevention (Whitzman, forthcoming), I will discuss how the relationship of spatial planning to violence prevention is being re-conceptualized internationally. I will then report on the findings from the first year of a three year Australian Research Council Linkage Project between the University of Melbourne and the Victorian Health Promotion Foundation (VicHealth), which is trying to apply these international ideas to four local government-community partnerships in Victoria.

## Recent International Approaches to Violence Prevention and Community Safety

The origins of an international approach to the issue of crime prevention, with coordination of activities happening at the local governance level, are in the riots that took place in several US and European cities during the mid to late 1960s (Sherman et al, 1997). Two approaches, both based in criminology, were developed in the 1970s and 1980s to tackle so-called urban crime and violence. One is Crime Prevention Through Environmental Design, which focuses on changing the physical environment to

promote “defensible space” within multiple unit housing and neighbourhoods (Newman, 1972, Poyner, 1983). The other is Crime Prevention Through Social Development, which concentrates on changing the social environment, through programs with children and youth at risk of later delinquency (Podolefsky and Dubow, 1981). Both programs have limited themselves to the problems of crime and fear of crime in the public sphere, and both programs emphasize the problems of low-income and racialized individuals and communities. Also during the 1970s and 1980s, grassroots feminist organizations were developing services and strategies to prevent violence against women, particularly wife assault and rape (Wilson, 1983, Gordon and Riger, 1989). These latter programs focused on hitherto hidden violence in the private sphere of families and homes, and tend to take a more universalist approach, targeting the general population.

Since the mid-1980s, there have been several developments in the international movement to prevent violence and promote community safety. A number of international organizations have decided that crime and violence prevention is a priority, particularly in developing nations, and support both national and local scale interventions. The World Health Organization (WHO) initiated a “Safe Communities” movement from the late 1980s onwards, which seeks to address the root causes of both unintentional injuries such as accidents and the intentional injuries of violence (Mohan, 2000). In 1996, WHO declared violence to be a large and growing public health problem, which led to the ground-breaking *World Report on Violence and Health* (Krug et al, 2002) and a Global Campaign Against Violence. The World Bank co-funded the initial report on the burden of disease in 1996 which found violence to be a major public health problem (Murray and Lopez, 1996), and has continued to fund innovative research that promotes the prevention of violence as a poverty reduction tool (Moser and McIlwaine, 2006, World Bank, 2006). The United Nations (UN) supports national research and policy-making around trafficking of drugs, guns, and people through its Office on Drugs and Crime (UNODC, 2003), and local governance initiatives on crime and violence prevention through its Commission on Human Settlements (better known as UN-Habitat), which has a Safer Cities Programme (Vanderschuren, 2006, UN-Habitat, 2005). An international non-governmental organization called the International Centre for the Prevention of Crime (ICPC) has provided research, training, and other forms of support to local, national, and international good practices in community safety and violence prevention (Waller and Sansfacon, 2000, Shaw, 2006 and 2001).

Within these organizations, there is a growing consensus on a number of issues: the definition of violence as a problem, the importance of ‘gender mainstreaming’ within research and action on violence prevention, the importance of locally-based partnerships as a basis of comprehensive strategies, and the development of better evaluation techniques allowing generalizations of “what works, what doesn’t work and what is promising” (phrase from title of Sherman et al, 1997). In terms of the growing consensus on ‘the problem’, WHO has developed a broad-ranging definition of violence, which includes self-directed violence and suicide; family violence, including child abuse, intimate partner violence (wife assault), and elder abuse; community violence, which includes stranger and acquaintance assault; and collective violence such as wars and internal conflict (Krug et al, 2002). Caroline Moser and her colleagues, in their work for the World Bank, use a similar approach to defining the extent of violence in Latin America, with a greater emphasis on economic and institutional violence (Moser, 2004, Moser and McIlwaine, 2006). The Commonwealth Secretariat uses a life stage approach in its discussion of gender-based violence (2003), moving from pre-natal violence against pregnant women, to child physical and sexual abuse, bullying at school, ‘date rape’ and intimate partner violence as well as community violence in youth and adults, and elder abuse. Both UN-Habitat (2005) and the ICPC (Shaw, 2006) are shedding emphasis on relatively minor property crimes, in order to focus on violence as a cause of poverty, and violence prevention as a vital aspect of good governance.

All of these international organizations have begun to implement “gender mainstreaming” into their research and strategies on community safety. The UN defines gender mainstreaming as:

“...the process of assessing the implications for women and men of any planned action, including legislation, policies, or programmes, in any area and at all levels. It is a strategy for making women's as well as men's concerns and experiences an integral dimension in the design, implementation, monitoring, and evaluation of policies and programmes in all political, economic, and societal spheres so that women and men benefit equally and inequality is not perpetuated. The ultimate goal is to achieve gender equality.” (UN Economic and Social Council, 1997, cited in Butchart et al, 2004, pp. 51-52).

In 2000, Soraya Smaoun published a discussion paper for UN-Habitat, in which she argued that violence against women, which takes place primarily in the private sphere of the home, needed to be addressed as an aspect of urban security, particularly in developing nations (Smaoun, 2000). In 2002, Margaret Shaw, from the ICPC, wrote an analysis of the extent to which a gender analysis was incorporated in existing

crime prevention policies and practices in both rich and poor countries. Both organizations assisted in developing the First International Conference on Safer Cities for Women and Girls (Women In Cities International, 2002). The WHO Global Campaign Against Violence addresses the prevention of sexual assault and family violence as well as “youth violence” in the public sphere. It has commissioned further research on intimate partner violence (Garcia-Moreno et al, 2004), and considers “gender and social equity” a necessary pre-condition to the effective prevention of violence (Butchart et al, 2004, chapter four). Reports on international good practice in relation to the prevention of gender-based violence have been forthcoming from all of these organizations (Shaw and Capobianco, 2004, World Health Organization, 2005, UN-Habitat, 2005), Women in Cities International (Whitzman et al, 2004), the charity Oxfam (Pickup, 2001), and the Commonwealth Secretariat (2003).

There is a growing consensus, acknowledged by all these organizations, on what works. An ambitious meta-evaluation of all programs funded by the US National Institute of Justice, known as *The Sherman Report* (Sherman et al, 1997), has had a large impact internationally in focusing attention on the importance of rigorous evaluation of the impacts of crime and violence prevention program. One of the primary findings of that report is that coordinated strategies dealing with seven local settings – communities, families, labour markets, schools, specific premises, police, and justice – were most likely to be successful, but that evaluation techniques for coordinated partnerships were underdeveloped. WHO has published *Preventing Violence* (Butchart et al, 2004), which uses a similar approach to evaluating what works, to suggest how national governments can best support evidence-led strategies. Moser (2004) and VicHealth (2004) have also developed typologies of approaches to successfully prevent violence. Based on these models, I have suggested a hybrid typology to suggest the range of interventions that can be undertaken at the local level (Whitzman, forthcoming): (1) early childhood interventions to prevent child abuse, usually aimed at parents; (2) school-based interventions, developing norms of mutual respect and conflict resolution skills and also seeking to keep at risk kids in schools; (3) community economic development, aimed at offering resources to at-risk youth, and also to adults who require income support to escape violent situations (eg., women, youth and older people abused in their homes); (4) public awareness, especially aimed at bringing ‘hidden violence’ into public discourse in streets and workplaces; (5) community mobilization and capacity building (eg., local leadership development); (6) service coordination; (7) planning initiatives, not based on protecting individuals or communities from ‘others’ but on creating spaces that are accessible to all members of the public; (8) policing and justice initiatives, aimed at increasing trust in the justice system, increasing reports of ‘hidden’ violence through better response to violent incidents, and attaining more equitable and effective outcomes of criminal cases.

Finally, there is a growing consensus on what constitutes a good process of violence prevention. The process begins with the establishment of local-level partnerships between all levels of government, the private sector, and civil society. These need to be supported by senior government with funding, training, recognition of and peer learning from good practices, assistance with evaluation, and a clear sense of state and national priorities. There needs to be some local diagnostic of prevalence and characteristics of the violence problem, and identification of resources, followed by establishing priorities for action using measureable and realistic goals, each with a lead agency or government department. Implementation of the plan should be accompanied by regular monitoring of indicators, and eventual mainstreaming or integration of community safety into both government and agency policies and practices. Ideally, indicators would be based on objective indicators – a triangulation of police statistics with agency/health service data and victimization surveys – coupled with subjective indicators measuring changes in insecurity in homes and streets, along with increased reporting of violence and changing attitudes towards violence. Evaluation would also include social network analysis, or a set of process indicators measuring how well local partnerships are working (Whitzman, forthcoming, based on Butchart et al, 2004, Michau and Naker, 2004, Dame and Grant, 2002, Shaw, 2001).

Despite the growing consensus between these international organizations, regional groups such as the European Forum on Urban Security, and some national and local governments (notably, New Zealand and the Netherlands at the national level, and London and Bogota at the local level), there still remains a ‘silo effect’ in most efforts to prevent violence, separating ‘crime prevention’ from ‘violence against women’. This is true at all scales of governance – neighbourhood, locality, state, nation, region, and globe – and in both rich and poor nations. Family violence in the private sphere is treated as a separate phenomenon from community and collective violence in the public sphere, despite overwhelming evidence that the two are closely related in terms of causes and impacts (Krug et al, 2002, Shaw, 2002). WHO’s public health approach to preventing violence, which is very strong on diagnosis, evaluation, and developing partnerships at the national level but weak on spatial analysis and local governance partnerships, is still poorly integrated with the ICPC and UN-Habitat’s urban planning and governance

approach to preventing violence, which is strong on local partnership building but weak on evaluation. Both streams of community safety and violence prevention are still struggling with the issue of gender mainstreaming, tending to include 'family violence' as an add-on item to a laundry list of concerns, rather than an integral aspect of "everyday violence" against children, women, and older people (phrase from Council of Europe, 2003). All aspects of crime and violence prevention struggle to obtain funding in the face of an overwhelmingly punitive approach which sees hundreds of billions of government dollars, in both rich and poor nations, spent annually on more policing and longer prison sentences, in the absence of any evidence that these approaches prevent further offending (Vanderschuren, 2006, Sherman et al, 1997). The state of evaluation, particularly in the area of victimization surveys and agency screening for incidence of violence, is still in its nascent stages (Butchart et al, 2004, Sherman et al, 1997). The full extent of family violence, which includes elder abuse and child abuse as well as intimate partner violence, remains a largely 'hidden' phenomenon within public discourse (Krug et al, 2002, Butchart et al, 2004, Shaw and Capobianco, 2004). In terms of planning and governance approaches, there is still an emphasis on designing safer public spaces to prevent 'one-off' criminal acts, rather than providing spaces of refuge, healing and safety, or enabling spaces that would allow hidden violence to enter the realm of public discourse (Whitzman, 2007).

### **Applying International Lessons to Victorian Localities: the GLOVE Project**

The objective of the Gender, Local Governance and Violence Prevention (GLOVE) Project is to develop Australian local and senior government policy that can apply an integrated approach to violence prevention in both the public and private spheres. We are analyzing current local government community safety policies in the light of international good practice on violence prevention. We are also working with four local government/ community organization partnerships in Victoria to develop and evaluate violence prevention programs. Lessons from these case studies will inform training materials and workshops for local government officials, community agencies, urban and social planners, and health professionals, in the final phase of the project.

The project was developed over the course of 2005, with the help of a University of Melbourne Early Career Researcher grant, with the formal start for the ARC Linkage Grant being July 2006. The first phase of the project involved developing a background paper on Gender, Local Governance, and Violence Prevention (Hayes, 2006), and choosing four localities to work with. In order to be involved, each locality had to commit to: (1) taking a government-community organization partnership approach, and designate one 'local government' and one 'community organization' leader to the project, who will undergo additional training; (2) assist in an audit of current violence prevention activities and capacities; (3) hold at least one day-long local consultative workshop within a year on how best to support integrated violence prevention, that involves at least six community organization members and at least six government (council officers, police, locally working state government) members; (4) help develop baseline indicators for violence prevention; and (5) undergo an external evaluation of this initiative one year after the consultative workshop. In addition, we were seeking a range of localities, in terms of location and socio-economic status. In all cases, the localities were identified by state level organizations as places where there was strong interest in addressing family violence as part of a community safety or municipal public health strategy, but which needed a little extra assistance in getting started.

The City of Maribyrnong is located immediately west of the City of Melbourne. Its population of 60,000 people within 31 square kilometers makes Maribyrnong the most densely populated municipality in the state. It is one of the most diverse parts of Metropolitan Melbourne, with 40 per cent of the population born overseas. The largest new migrant community is from Vietnam, but Maribyrnong is also experiencing an influx of newcomers from the Horn of Africa. Braybrook, one of the nine suburbs in this municipality, is ranked lowest in the state on a series of socio-economic indicators, while other suburbs, such as Footscray and Yarraville, are rapidly gentrifying. Maribyrnong has a community safety taskforce, and family violence has been brought up as a priority issue in public forums of this taskforce. There is now a family violence subcommittee, led by Women's Health West, the community partner for this project. The City of Maribyrnong's community safety policy and action plan are currently being updated, and this is an excellent opportunity to integrate public and private violence in their new policy and action plan.

The City of Casey is approximately 35 kilometres southeast of Melbourne's central business district. Located in the south eastern suburban growth corridor of Metropolitan Melbourne, Casey has been Victoria's fastest growing municipality. The current population of approximately 225,000 is growing at the rate of 50 households a week, making Casey the most populous municipality in the state. While some of the suburb is zoned for residential and commercial development, the City also includes farms and coastal villages. There are significant pockets of poverty and socio-economic disadvantage in Casey, and

although home ownership is high, the rate of affordability stress (the proportion of income spent on rent or mortgage) is the highest in the state. The City of Casey has a Healthy Families Taskforce, a partnership of community agencies and local government that work together on issues of family breakdown and contributing causes. Age and gender related injury such as family violence has been brought up as a priority issue in this group and through public forums. There is a Safer Casey Partnership, with various government department representatives including Victoria Police and non government agencies that have a focus on community safety, both in the public and private domain, and crime prevention. The City of Casey also co-hosts a regional Southern Family Violence Network, consisting of family violence service provider agencies that have an action and local prevention focus. The City of Casey's Municipal Public Health Plan is to be updated in 2008 which raises the opportunity to integrate public and private violence. The Community Safety Plan has just been completed and incorporates strategies and actions related to family violence. Cardinia Casey Community Health Service has been the community leader in this work with the City of Casey, and the Federal Government has recently funded a partnership project to improve public awareness approaches to family violence using local religious leaders.

The City of Greater Bendigo, one of Victoria's regional cities, is located approximately 150 kilometres northwest of central Melbourne. Its population of 94,000 includes both the regional centre and surrounding rural villages. Unlike Maribyrnong and Casey, the population is overwhelmingly Australian born, with half of the six per cent born overseas coming from the United Kingdom or New Zealand. Like many regional cities, Bendigo is seeing an influx of older residents and a net loss of people in their 20s. Some parts of Bendigo are amongst the most disadvantaged in the state, while others have high incomes and homeownership rates. Bendigo's Safe City Forum is a partnership between approximately 26 local agencies, including the State government, Victoria Police, and local businesses. The Chairperson of the Bendigo Safe City Forum was, until recently, Carolyn Wallace who was Manager of the Loddon Campaspe Region Centre Against Sexual Assault until taking on a position with the Victorian Council of Social Services in July 2007.

The Shire of Loddon, located immediately northwest of Bendigo (approximately 175 kilometres northwest of central Melbourne), covers 6,700 kilometres, making it one of the largest municipalities by area in Victoria. Its population of 9,000 is scattered in over 50 settlements, all of which have less than 1,000 people. At present, there is no safe community forum or action plan, but there is interest in developing such a plan in an appropriate manner for a relatively remote and poorly funded locality. The Loddon Campaspe Region Centre Against Sexual Assault, whose region encompasses Loddon Shire, is the community partner in this locality as well.

The GLOVE Project also has a state-level advisory committee, which includes VicHealth as our Linkage Partner; the Victorian Local Governance Association; Victoria Police; the Departments of Planning and Community Development and Human Services; the Immigrant Women's Domestic Violence Service; and the Victorian Coalition of Social Services. The advisory committee is intended to assist with direction of the project, but also to relay information from the project back to the state-wide services.

Aside from the background paper on international good practice, the first year of the GLOVE project has involved a range of training opportunities for locality leaders. Four locality leaders attended the World Urban Forum in Vancouver in June 2006, where they met with counterparts from a parallel Canadian project working on local government-community organization partnerships, and also participated in a series of workshops on gender mainstreaming, violence prevention, and local governance organized by Women In Cities International. There was money to publish the background paper, but it was diverted into the development of a website that allows the four localities and other interested parties to download local and international reports related to the project (<http://www.abp.unimelb.edu.au/research/fund/glove/>). An external evaluation expert was hired to assist the project in developing a logic-based model for monitoring and evaluation, and two workshops in October 2006 allowed both locality leaders and the advisory committee to develop evaluation skills. A PhD student and part-time RAs have also been hired to assist the project.

### **Analysis of the first year of the GLOVE project**

Maribyrnong is the most advanced locality of the four. A likely reason for its success is the fact that it is based in a very strong regional network of seven municipalities, who together with regional offices of state and federal government, and community based services, have been working effectively in a family violence network for several years. In 2003, Women's Health West and the Western Region Network Against Family Violence published *Measuring the Tides of Violence*, an attempt to establish baseline indicators of family violence. The report used statistics garnered by the police, courts, violence against women agencies (mainstream and immigrant women's crisis services, centres against sexual assault, and

refuges), the regional women's health agency, and men's behaviour change programs, to get a sense of prevalence, trends, and particularly vulnerable groups. They also used data from community legal services and the Supported Accommodation and Assistance Program (SAAP) to discover the extent to which these organizations were used by women and children in crisis because of family violence. The SAAP data suggested that overall, 24 per cent of clients used this service because of family violence crises, rising to 55 per cent of women with dependent children and 70 per cent of women without children (Women's Health West, 2003, p. 44). Throughout the latter half of 2006, there have been a series of workshops in the Western Metropolitan Region, with efforts to improve the violence screening capacities of community legal services and mainstream health agencies (hospital emergency rooms, general practitioners, and community health centres), provide more culturally sensitive services to new migrants and indigenous people, improve the links between violence prevention and homelessness prevention services, further links between physical and mental health services, and monitor legal and judicial responses to family violence. Research and training initiatives have been supported by the state Department of Human Services, but the City of Maribyrnong and Women's Health West have worked together to take a regional leadership role, which in turn makes attracting funding more likely.

The membership of Maribyrnong's family violence working group has been expanding over the past year. It includes not only the local government, police, courts, family services, women's services, and health services, but also a growing number of ethnospecific and multicultural agencies, indigenous organizations, employment and income (Centrelink) agencies, local public education officials, anti-homelessness organizations, and groups with linked issues. For instance, its public meeting on the next steps for the family violence strategy in March 2007 included Alcoholics Anonymous, several youth organizations, and migrant services groups (notably from the Horn of Africa) who had not previously been involved. As part of the scoping component of the local GLOVE project, Maribyrnong Council commissioned an analysis of four strategic documents: the Council Plan, Municipal Public Health Plan, Safer Communities Policy and Action Plan, and the Culturally and Linguistically Diverse Policy and Action Plan. The analysis was intended to discover the extent to which the policies directly or indirectly addressed the prevention of violence against women, and identify gaps where the prevention of violence could be broadly addressed. Maribyrnong's City Council recently adopted a resolution that "The City of Maribyrnong creates and promotes a violence free community". At an evaluation workshop in January 2007 set local project goals: first, increased policies and practices for preventing violence against women and its impact, with ownership shared between local government and other partners; and second, that the Maribyrnong community has an increased awareness of the varying forms of violence against women and its impact. The project will achieve these goals, by influencing a range of potential actors, from local politicians to employers and retailers; by developing better networks between services; by creating synergies with regional health promotion strategies; and by Maribyrnong City Council taking a leadership role (Elkington, 2007). The project was also successful in obtaining a VicHealth grant to undertake a Health Impact Assessment of its draft Violence Against Women Prevention plan, which as of September 2007 is in its final draft form.

One of the ways in which we are evaluating success of the GLOVE project is improved policies and programs related to violence prevention from participating local governments. The Maribyrnong Safer Communities Policy is presently being updated, in part based on the family violence workshop in March 2007. The previous policy, from 2003 to 2006, included a very long list of priority issues, from graffiti and vandalism, to burglaries and vehicle theft, to traffic safety, fire safety, and other unintentional injuries, to community violence related to alcohol and drugs, as well as family violence. The most recent progress report showed an increased commitment to improving reporting of violence and other crimes, particularly by CALD communities, and a decreasing emphasis on more generic injury and insecurity prevention (Maribyrnong City Council, 2006).

In the past year, Cardinia Casey Health Services and the City of Casey have collaborated on an audit of family violence services, which was completed in November 2006. Using the existing regional family violence network and a web search, 26 organizations were identified as providing services, including counseling and welfare. These organizations range from health services, to youth services, men's services, religious-based services, the regional centre against sexual assault, and family support services. Sixteen of these services indicated that they have a family violence philosophy or protocols in place, and only 13, or half, had ties to formal family violence networks. The survey also found that services for the following group was underrepresented: Aboriginal and Torres Strait Islanders, Gay Lesbian Bisexual Transgender and Intersex people, people with disabilities, elderly people, and women newly released from prison. The organizations indicated a range of training and other networking initiatives that would be useful, and almost all were willing to share information on incidence and prevalence on family violence. However, subsequent discussions in Casey suggest that there appears to

be problems in linking the services under a family violence network umbrella, which are related to enmities between organizations developed during recent opposing bids for state-level family violence funding. Cardinia Casey Health Services also collaborated with Women's Health in the South East to develop a CALD outreach project in 2005-06, which led to Promoting Peace in Families Project. The latter project is working with religious leaders in Casey to identify, prevent, and respond to family violence, since several new migrant communities engage primarily with their religious communities. However, the City of Casey appears to have less political commitment than the City of Maribyrnong, with no council resolutions on violence prevention, and little political participation in workshops and taskforces. Casey's Community Safety Strategy for 2006-2011 includes family violence within a list of injury prevention priorities, including motor vehicle theft, burglary, assaults (ie., alcohol related community violence), and property damage. It does not, however, go beyond the standard perceptions of public safety surveys and police-reported incidents to provide particular indicators to monitor success of programs and policies.

In Bendigo, a service audit of council and community initiatives that contribute to violence prevention has been completed, and a new community safety plan developed by the Bendigo Safe Community Forum, after a day long public workshop. While the previous three year strategic direction document did not include family violence prevention, focusing instead its original mandate of alcohol-related violence in and around licensed premises, the current strategy has violence prevention, along with alcohol-related harm and safer and more inclusive public spaces, as the three priorities. The plan resolves to develop baseline indicators of violence in the municipality, and to monitor progress on those indicators. The Bendigo Safe Community Forum is also specifically linking its initiatives to a Child Friendly Cities strategy in Bendigo, as well as the overall strategic plan for the City, Bendigo Plus 25 (City of Great Bendigo, 2006).

The Forum is also pursuing funding for a prevention and education campaign through local football clubs as part of the Australian Football League Respect and Responsibility Program, is seeking state government support for incorporation of violence prevention within its Municipal Public Health Plan, and has integrated both sexual assault and family violence prevention within the state Primary Care Partnerships and Mental Health Planning initiatives. In fact, the Bendigo Loddon Community Health Plan for 2007-2009 states that:

"The first 12 months of the plan will focus on freedom from violence with the goal to raise community and organizational awareness of the prevalence and impact of sexual assault and family violence and to develop gendered interagency violence prevention policies and programs" (Bendigo Loddon Primary Care Partnership, 2007, unpaginated)

The Primary Care plan includes training on screening and individual risk assessment for GPs, mental health clinicians, women's health services, maternal health nurses, and housing workers; skill development around counseling, protective behaviours, and providing information to parents; public awareness and social marketing in relation to Federal Strategies like No to Violence and Child Safety Week; advocacy with police and the legal system; and policies in schools to better respond to disclosures of sexual assault and family violence; protocols with a range of services.

Why has Bendigo moved ahead so effectively? Like Maribyrnong but unlike Casey, there is a strong and cohesive regional service network that tendered for state government family violence prevention services cooperatively rather than competitively (Wallace, 2006). Like Maribyrnong, Bendigo enjoys considerably cross-party political support for its Safe Community Forum. Also, in Carolyn Wallace of the Loddon Campaspe Centre Against Sexual Assault, Bendigo has been fortunate in having a savvy community leader able to identify policy and funding enablers, who was also able to provide considerable free research as part of her Master's course in Public Policy.

Finally, in Loddon Shire, an inaugural workshop for family violence prevention was held in December 2006, with representation from the mayor, the Chief Executive Officer, three agencies that serve Loddon, Victoria Police, and four community leaders. Several ideas on tracking incidence of violence and building community capacities to prevent violence and respond better to incidents were discussed. Interestingly, although the forum was advertised as being on family violence, the range of issues was perhaps the widest of the four localities, ranging from bullying in schools to suicide prevention on farms. The audit mapping which resulted also included the widest range of potential resources, ranging from maternal and child health services to drought recovery officers, from the local aboriginal healing centre, to schools and a children's network (Loddon Shire Council, 2007). Loddon Shire has been successful in obtaining money from Bendigo Loddon Primary Care Partnership to further their work plan.

## Discussion

In its first year of operation, the GLOVE Project has been successful in supporting local government-community partnerships to develop policies and programs aimed at integrated violence prevention. Integration has been defined as consisting of several aspects: combining environmental design with social development approaches; using aspects of health promotion with planning and governance approaches; finding links between family and community violence; and gender mainstreaming in regards to identifying problems, approaching potential partners, and developing programs and policies. Success has been defined in four ways: (1) building local leadership that will give a greater priority to violence as a problem; (2) the inclusion of gender mainstreaming approaches; (3) developing and deepening partnerships and sustainable resources for violence prevention work; (4) improving monitoring and evaluation techniques and practices.

In the case of Maribyrnong, the local council has retained a leadership role in the region, and has expanded its range of partners working to prevent violence. Casey has done some innovative work in relation to outreach to religious leaders, but the local project has been beset with difficulties, due to ongoing lack of local political support and tensions between agencies. Thus far, the state government has been unsuccessful in assisting either better regional partnerships or better local leadership in the South East Metropolitan Region. Bendigo has been very successful in using state government policies and other funding opportunities to change the direction of their Community Safety Forum to encompass family violence, build new partnerships, and leverage funding for violence prevention. Loddon has gone from no partnership or policies whatsoever, to the start of a strategy that has obtained state-level funding. All four of these localities have used the fact that they are part of this state-wide research and action project, with potential national relevance, to add prestige to their policy, partnership, and grant application work.

There still remains a poor understanding in some of these strategies of potential links and synergies between preventing violence in the private and public spheres. There is a long history of parallel 'crime prevention' and 'violence against women' initiatives in Australia (Egger, 1997), and this project is no exception to this rule. In general, all four localities have decided to start by prioritizing relatively hidden family violence, and work outward. As the City of Maribyrnong put it:

"There was some discussion about the group's understanding of the intent and scope of the project regarding violence. It was noted that while it was important that the project incorporated a broad view of violence as part of its vision and goals at the local level, in practice the local level project may give a main focus to a specific 'type' of violence within this broader view" (Elkington, 2007).

The fact is that there is some state government funding and policy support for integrated family violence prevention, but a policy and funding vacuum on integrated crime and violence prevention from both the state and national governments. Ideally, the state government would be providing training, guidelines and support to these local initiatives on integrated violence prevention, but leadership on the issue at the moment rests with these local government-community partnerships. There is a critical mass now of local partnerships working on family violence; aside from the four participating in the GLOVE project, there are at least eight others who have been identified through an audit of Metro Melbourne community safety plans, and the snowball effect of the project itself (Whitzman and Zhang, 2006).

Specific initiatives thus far have focused on service coordination, some capacity building within agencies, a modicum of policing and justice reform, and public awareness. There is the beginning of discussions around the links between child abuse and intimate partner violence, which may lead to links with early childhood and school-based interventions. Several localities are working on making public spaces safer and more inclusive, and on community economic development, but thus far the links with family violence prevention are limited. However, the development of 'safe spaces' where people can discuss and act on violence in the private sphere is starting to occur, through for instance, Casey's initiative with faith leaders. Previously hidden violence in the private sphere has entered the public discourse, and has begun to affect planning and governance priorities. This migration of violence-related "needs talk" into the public discourse is similar to other previously 'private' health issues such as depression and obesity (phrase from Fraser, 1989). The localities are at the beginning stages of ability to identify the prevalence of violence in their communities, and to develop indicators to measure progress on the issue. But the fact that they are accomplishing significant progress at all, in the absence of any particular state-level support for this work, is encouraging.

## Conclusion

Funding for the GLOVE Project will continue until 2009, and I look forward to yet another presentation on planning for violence prevention at the next State of the City conference! In the meanwhile, the project will continue to assist local government-community partnerships in developing

policy, programs, and indicators related to violence prevention, from a perspective that recognizes gender differences in the experience of crime and violence. As there is considerable interest from other municipalities and from international organizations like UN-Habitat and the ICPC in this work, my hope is that the GLOVE Project will be an example of bottom-up advocacy and policy development work that has a positive impact on how senior governments in Australia respond to crime and violence.

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