

Forum outcomes paper

A focus on men and masculinities in preventing violence against women

A summary of two June 2021 National Primary Prevention Hub events

Executive summary

International and Australian research shows there are clear links between dominant forms and patterns of masculinity and violence against women, and that addressing masculinities and effectively engaging men in prevention efforts is essential to reducing and preventing this violence.

This paper reports on two events hosted by Our Watch as part of the [National Primary Prevention Hub](#) (the Hub) in June 2021 which sought to explore how practitioners across Australia are already doing this vital work, and opportunities to strengthen focus for future efforts:

1. a webinar with panel discussions of case studies to explore current approaches to addressing masculinities and engaging men in preventing violence against women
2. a discussion forum with practitioners to reflect on opportunities and challenges in this work.

The discussion forum focused on the following key themes:

- why effectively working with men and addressing masculinities is an important aspect of our national approach to primary prevention
- the evidence-based principles that can guide how we do this work
- examples of promising practice, including work that centres an intersectional approach.

This paper summarises the case studies and key themes that emerged from the two events in order to promote knowledge sharing across the sector.

This forum paper was prepared for Our Watch and the National Primary Prevention Hub by Sarah McCook.



Key points

Addressing masculinities is central to primary prevention work

1. Achieving the long-term prevention of men's violence against women requires coordinated efforts across every level of Australian society, in line with [Change the story: A shared framework for the primary prevention of violence against women and their children in Australia](#) (Change the story). Work to address masculinities and engage men must be repositioned as fundamental to a gender transformative approach, rather than separate.
2. Intersectionality identifies and addresses the power dynamics operating across all levels of society and for everyone. It helps to understand how power creates and shapes differing experiences of inequality and privilege. Intersectionality needs to underpin all the guiding principles, including in approaches to accountability and adopting strength-based initiatives.

Engaging men as allies in prevention

3. It is critical to avoid reinforcing the rigid gender stereotypes and unequal relations that our work actually wants to transform when we engage men in prevention. Allyship for men is centred on listening to and remaining accountable to women, and in making sure that they stand with, not for women.
4. Strategic messaging is vital to engage men and address masculinities in prevention. Sometimes this means balancing initial buy-in without decentering men's violence and gender inequality. A strengths-based approach to messaging offers opportunities for building solidarity based on shared values.

Supporting practitioners to engage in this work

5. Practitioners must work reflexively and with care for themselves and others. Practitioners and organisations can reflect on how they position themselves in relation to privilege and those who are disproportionately affected by violence. Promoting collective care is part of directing transformative work and critical self-reflection internally as a sector.

Introduction

In June 2021, the [National Primary Prevention Hub](#) (the Hub) held an online, interactive forum that explored emerging work to address masculinities and engage men in preventing violence against women. This paper provides a summary of the two events in order to share knowledge and identify strategic opportunities to inform the national primary prevention agenda.

The delivery of a series of webinars, forums and online discussions is a key activity of the Hub. Findings from feedback surveys from the five Hub events prior to the June 2021 webinar and forum identified that participants appreciated relevant and practical case studies profiled in Hub events. Stakeholders also identified that they wanted opportunities to connect with other participants and presenters in order to learn from the experiences and expertise of others. Participants also expressed that neither the exploration of case studies or discussions with other participants should be rushed.

The design of the masculinities events therefore separated these elements into two separate events, to allow a deeper engagement with the content and connections. Previously, participants had expressed mixed experiences of breakout rooms. Therefore, different methods of engagement were trialled at the masculinities and engaging men discussion forum.

The webinar examined these themes through three case studies: [Tangentyere Family Violence Prevention Program](#) (TFVPP) - a multi-faceted initiative led by the [Tangentyere Council](#) in the regional Town Camps and the wider Alice Springs community; [ARC Gender Relations](#) (ARC) - a multi-tiered prevention project that was established in 2018 as part of [Men and Family](#), a domestic and family violence organisation in the northern rivers region of New South Wales; and [Rainbow Health Victoria](#) who alongside other family violence work, have recently published [Pride in prevention: A guide to primary prevention of family violence experienced by LGBTIQ communities](#).

The forum was designed to be interactive over both days. Participants engaged in a question and answer session with panellists during the webinar, and multiple break-out rooms and large group discussions were included during the second day.

Following the masculinities events, the Hub has received a high response rate to the feedback surveys. Respondents communicated they found value in:

- connecting with others
- hearing diverse perspectives
- understanding the practical implications of theories and concepts
- the sharing of tools and resources.

The Hub team will continue to listen to participant experiences from the feedback surveys to inform event development.

Men in focus: Guiding principles for engaging men and addressing masculinities in prevention

International research emphasises that primary prevention must include work to address masculinities and engage men for long-term social change.¹ This is recognised in the **gendered drivers** of violence as set out in the national prevention framework, [Change the story](#). Research shows that these particular expressions of gender inequality consistently predict higher rates of violence against women.

The [Men in focus: Unpacking masculinities and engaging men in the prevention of violence against women](#) evidence review synthesises and analyses existing research on masculinities and violence against women to develop a deeper understanding of the links between socially dominant forms and patterns of masculinity and violence against women. It explores how primary prevention efforts can best address and challenge these patterns and effectively engage men in the prevention of violence against women. Our Watch is currently developing a practice guide that translates *Men in focus* into an evidence-based framework for practitioners working in this space, due to be available in late 2021.

Men in focus outlines guiding principles that should be considered fundamental for any prevention work that aims to address masculinities and engage men. The Hub forum emphasised and explored five overarching guiding principles:

1. **Intersectionality:** A concept first developed by Kimberlé Crenshaw,² intersectionality refers to the complex ways that gender and race interact with other axes of identity such as class, sexuality, religion, ability, age and so forth, to shape lived experiences of power and oppression. In the context of prevention work to address masculinities and engage men, intersectionality is a crucial lens because it helps us to reflect on and recognise how men and others have different relationships to power and gender inequality that must be addressed through tailored approaches to the work.³ In practice, this includes having open discussions about privilege (including our own as practitioners), sexism, racism and other intersecting forms of discrimination; enabling community-led approaches through meaningful engagement and consultation; and ensuring prevention initiatives are culturally relevant and community-building. This paper explores below how and why an intersectional approach is also an important aspect of the other guiding principles.
2. **Aim to be gender transformative:** Ensuring our efforts are gender transformative means actively challenging and transforming the gendered drivers of violence. In practice this may include the targeting of rigid ideas about men/women and masculinity/femininity that we know contribute to men's violence in different ways. This is also about making sure we avoid reinforcing gender stereotypes through the work (e.g. through messaging like 'real men don't ...' or calls to 'man up') and within the sector.⁴ Recognising the need for an intersectional approach, gender transformative work should also aim to challenge binary views of sex and gender, and to address other forms of discrimination such as homophobia, biphobia and transphobia.⁵
3. **Use strengths-based approaches:** Often, work on men's violence starts from a gap, problem, or 'deficit discourse'. Taking a strengths-based approach means flipping this to start with the recognition of the existing connections and expertise we as individuals, communities and a society already have. In practice, this can include promoting positive and respectful relations between men that are premised on empathy and compassion for others. This is also about recognising existing prevention efforts within communities that may intersect with wider forms of social justice, such as among Aboriginal and Torres Strait Islander people, and amplifying and consolidating those community-led approaches.⁶
4. **Maintain accountability to women:** While engaging men and addressing violence-supportive masculinities should be a central part of all prevention work, there must be an ongoing focus on women's leadership, safety and empowerment. In practice, this includes centring women's voices and concerns, working in consultation with women and women's organisations, and being mindful of how men's privilege and rigid ideas about masculinity can be present within the work (e.g. prioritising the 'men will benefit' approach to get men on board as allies).⁷ Centring intersectionality in this principle means reflecting on which women our work may specifically need to be accountable to, or how accountability in practice may need to look different for different groups of women (e.g. recognising the particular concerns of women with disabilities, Aboriginal and Torres Strait Islander women, and refugee women).

5. **Look for solutions across all levels of society:** As emphasised in [Change the story](#), prevention work must be holistic and take a coordinated approach across all levels of society.⁸ This recognises that the gendered drivers play out at all levels of society, and therefore our work to address masculinities and engage men in prevention must also be multi-faceted and whole-of-community. For practitioners and organisations, in practice this can mean avoiding focusing only on single factors or individual causes of men's violence; identifying how our initiatives are situated within broader efforts across community, institutional and policy levels; and actively working to build partnerships with government and non-government stakeholders, including across other sectors.

These principles should not be considered in isolation. Rather, they interact and support each other in important ways, and as the forum emphasised, **intersectionality represents an overarching principle that should guide our attention to each of the other principles**. For example, any efforts to address rigid gender stereotypes as a driver of violence against women should also consider how these stereotypes closely intersect with heteronormativity and cisnormativity, all of which help to drive violence experienced by LGBTIQ communities. We are therefore **accountable to** LGBTIQ people, and must recognise that **gender transformative change** also needs to take **intersectional, strengths-based** and **whole-of-community** approaches to preventing violence. The following case studies illustrate how practitioners in different parts of Australia are already using these guiding principles in their efforts to address masculinities and engage men in primary prevention.

Translating principles into practice: Examples of promising practice

These case studies are developed from the panel discussions in the webinar. For more information or contact details for these programs, please visit the relevant organisation's website (links provided below).

Case study 1: Tangentyere Family Violence Prevention Program

[Tangentyere Family Violence Prevention Program](#) (TFVPP) is a multi-faceted initiative led by the Tangentyere Council in the regional Town Camps and the wider Alice Springs community. TFVPP incorporates specific, tailored activities for men, women and children to understand the drivers and contributors of family violence, in turn empowering and healing community. These activities span **across multiple levels**, and include the Marraka Mbarintja Men's Behaviour Change Program (MBCP), the Tangentyere Women's Family Safety Group and Men's Family Safety Group, as well as specialist domestic violence services for children, policy advocacy, and outreach work.

The work of TFVPP is informed by both [Change the story](#) and [Changing the picture: A national resource to support the prevention of violence against Aboriginal and Torres Strait Islander women and their children](#) (*Changing the picture*). This **intersectional approach**⁹ enables TFVPP to address the gendered drivers alongside other factors like colonisation that contribute to higher rates of violence experienced by Aboriginal and Torres Strait Islander women. TFVPP also prioritises a **strengths-based approach** to their work that centres the lived experience, knowledge and relationships of Aboriginal communities, and the leadership of Aboriginal women in preventing violence and building community safety. **Accountability to Aboriginal women** is therefore fundamental to the work of TFVPP, and the Women's Family Safety Group in particular enables Aboriginal women from Town Camps to be front and centre in driving the work from the ground up.

TFVPP have developed two prevention projects in partnership with Town Camp community members to take an inter-generational, **gender transformative approach**¹⁰ towards some of the rigid gender stereotypes around men, women, and children. [Mums Can, Dads Can](#) promotes equality between mums and dads by sharing messages like ‘mums can be strong’ and ‘dads can be gentle’. Resources have been created through direct engagement and leadership of Aboriginal men and women to ensure the project is situated within and relevant to community. The [Girls Can, Boys Can](#) project has also been developed in partnership with Larapinta Child and Family Centre. Resources include toolkits for work in early childhood and schools that celebrate Aboriginal families and culture, and transform gendered stereotypes around girls and boys. The project aims to support modelling of respectful relationships, with key messages like ‘kids thrive when they are free to be whoever they want to be’.

The *Mums Can, Dads Can* resources are available to download from the TFVPP website [here](#), and *Girls Can, Boys Can* resources are available to download from the Tangentyere Council website [here](#).

Case study 2: ARC Gender Relations, Men and Family

[ARC Gender Relations](#) (ARC) is a multi-tiered prevention project that was established in 2018 as part of Men and Family, a domestic and family violence organisation in the northern rivers region of New South Wales. The ARC team works to challenge the gendered attitudes, beliefs and social systems that enable men’s violence against women. ARC has delivered workplace development and training, communities of practice for people working with men, groups for men in the community, and an ongoing community development violence prevention and allyship project with people who identify as men in the region. The ARC team also emphasise personal self-reflection and organisational development as a core part of their efforts to prevent men’s violence against women. This **multi-level approach** is strongly informed by the gendered drivers and socio-ecological model for understanding men’s violence against women, which identifies factors and opportunities for change across the individual, community, institutional and societal levels.¹¹

Across each initiative, ARC recognises the different experiences and **intersecting** forms of inequality that may be present within the region. In practice, this has included a specific focus on developing relationships with and listening to First Nations elders and leaders from Bundjalung country, and on tailoring inclusive approaches with LGBTIQ communities that do not reinforce homo-, bi- and transphobia or binary thinking. For example, ARC actively recognises colonisation as a key context for domestic and family violence within all group work and training, and have developed specific workplace training for LGBTIQ experiences of violence. Part of this **intersectional** approach is also about understanding that men are not all the same, and hold different relationships to power, privilege and violence. In this way, ARC recognises that power operates in multiple and compounding ways across society, which includes, but is not limited to, gendered power.

ARC is currently engaging men directly through the ARC Communities project. This allyship and community development project is guided by the [HealthWest Partnership](#) resource developed by Shelley Hewson-Munro, [Working Together with Men: How to create male allies for gender equity in your community](#) (*Working Together with Men*). This model is fundamentally grassroots, supporting men within communities to develop and deliver their own prevention projects with a focus on allyship.

A core part of this model is establishing a women's **accountability panel** that provides oversight and feedback to men's individual projects throughout design and implementation, as well as the ARC Communities project as a whole. The panel for this project includes a representative from Men and Family alongside several community women who identify as LGBTIQ and First Nations, which has been vital for ensuring the work remains accountable to **intersectional** feminist principles and practices.

The panel also functions to challenge gender stereotypes and relations around men's 'natural' authority and is therefore part of a holistic **gender transformative approach**. By focusing on engagement and accountability, the ARC team is able to take **strengths-based approaches** that build on the expertise of local communities and link into work that people are already doing.

Case study 3: Pride in prevention, Rainbow Health Victoria

[Rainbow Health Victoria](#) provide support to lesbian, gay, bisexual, trans and gender diverse, intersex and queer health and wellbeing through efforts like research, knowledge translation, policy advocacy and service accreditation through the Rainbow Tick. Rainbow Health Victoria is part of the Australian Research Centre in Sex, Health and Society (ARCSHS) at La Trobe University. By working across these different settings, Rainbow Health Victoria prioritises holistic efforts **across all levels of society**.

Alongside their other family violence work, Rainbow Health Victoria have recently published [Pride in prevention: A guide to primary prevention of family violence experienced by LGBTIQ communities](#) (*Pride in prevention*). *Pride in prevention* is an evidence review that proposes a similar model to the socio-ecological model outlined in [Change the story](#), but with an explicit focus on addressing rigid gender norms, heteronormativity and cisnormativity, which drive violence experienced by LGBTIQ communities.¹² These social perspectives/systems support binary ideas about sex and gender, exclude or reject LGBTIQ experiences and relationships, and often entail violence to reinforce heterosexuality and *socially* dominant masculinities.¹³

As with all the work of Rainbow Health Victoria, *Pride in prevention* is underpinned by a strong **intersectional** understanding of how masculinities and gender inequality can be shaped by other social positions like marginalised sexualities and gender identities, alongside race, ability, age, socio-economic status, religion, Aboriginality and migration status.

As part of the broader *Pride in prevention* project, Rainbow Health Victoria is also developing pilot projects to develop the conceptual approach to preventing domestic and family violence for LGBTIQ communities. These pilots are community-led and emphasise **accountability** to these communities. For example, Rainbow Health Victoria are supporting a project with Starlady and the [Zoe Bell Gender Collective](#) which has been created from community consultation and works with men who are in intimate relationships with trans women and trans feminine people. Projects like this work to both empower members of the trans and gender diverse community through a **strengths-based approach**, while working to understand and challenge trans- and homophobia among men.

Importantly, *Pride in prevention* emphasises that there are clear relationships between the gendered drivers of violence against women identified by [Change the story](#), and the drivers of family violence experienced by LGBTIQ communities.¹⁴ For example, patriarchal notions such as socially dominant, binary ideas about what a man or woman should be, and expressions of power through control and violence to reinforce these norms, contribute to violence in both instances. Homophobia has also been identified as a central part of reinforcing masculinities within men's peer relations alongside sexism and disrespect for women, which can play out as aggression and violence towards men, women, and LGBTIQ people.¹⁵ In other words, Rainbow Health Victoria are contending that the question is not 'how can we include LGBTIQ communities in preventing men's violence?', but 'how can we *not* be including LGBTIQ in all prevention efforts?'. This is about advocating for an **intersectional, gender transformative approach** to prevention that can address multiple expressions of gender inequality.

Key themes emerging from practitioner discussions

Across both of the online events, participants had the opportunity to ask questions and share their own experiences of addressing masculinities and engaging men in the prevention of violence against women. These discussions led to rich reflections on some of the key challenges and opportunities in this space, and practitioners identified some meaningful strategies for strengthening our work in line with the guiding principles from [Men in focus](#).

There are still questions and tensions that remain prevalent in work on men and masculinities, indicating potential areas for the future national primary prevention approach to focus on. Some of the key themes that emerged from these discussions are summarised below, with links to further resources that were shared where available.

Addressing masculinities and engaging men is central to all prevention work

- Often, programs with men are considered separate to the main body of prevention work or engage men in isolation. We need to reposition this work to see it not as separate, but as fundamental to preventing violence against women.
- There are strong links between masculinities and violence against women, and this is recognised across the gendered drivers identified in [Change the story](#). We also know that men are overwhelmingly the perpetrators of violence against women (in 95% of cases).¹⁶ Therefore, addressing masculinities and engaging men must be central to any prevention efforts.
- As the Rainbow Health Victoria case study illustrates, there are also strong links between the gendered drivers of men's violence against women, and domestic and family violence experienced by LGBTIQ communities. Rather than considering how to include LGBTIQ people in our work to prevent men's violence, we need to be taking a holistic approach to **gender transformative change** that can address the common root cause: patriarchal violence. For practitioners, this can include avoiding language and framing in our work that reinforces binary views of gender or sexuality, and making clear links between shared issues like homophobia, masculinities and violence.

- Opportunities for this work are everywhere, and achieving the long-term prevention of men’s violence against women requires coordinated efforts across **all levels of society**. Often programs with men focus on a single context, such as sport, which can ignore non-individual pathways for engagement, as well as how gender inequality is reinforced in complex ways in all settings. Alongside the case studies discussed above, practitioners discussed how they are challenging these isolated or individual-level efforts through coordinating community work with organisational development, policy advocacy, and building relationships for multi-sectoral initiatives.

Intersectionality must underpin prevention, and guide other principles of practice

- Intersectionality is a tool for identifying power and oppression, not difference. This isn’t something we only do when working with marginalised groups, it should be a starting point for examining how power and privilege might be shaping the experiences of our communities, and individuals within those communities, in specific ways. This is vital for prevention work that addresses masculinities and engages men. As one practitioner commented, “I’m thrilled that this is a focus for masculinities”.
- Translating intersectionality into practice can be challenging. It means thinking about how we go beyond ‘diversity and inclusion’ to including meaningful intersectional approaches. The case studies above provided strong examples of how this can be integrated across community, research and policy, and practitioners also contributed their own experiences with intersectionality in practice. For example, establishing relationships through consultation with Aboriginal and Torres Strait Islander leaders and Aboriginal Community Controlled Organisations, integrating recognition of colonisation, heteronormativity and cisnormativity as a basis for any prevention work, and working with faith-based communities to develop resources and workshops on respectful relationships. These examples also illustrate the close links between intersectionality and using **strengths-based approaches** that are community-led, culturally relevant, and informed by the lived experiences of community members.
- Intersectionality also needs to underpin our approaches to the other guiding principles. For example, we can’t do **accountability to women** in a meaningful way without also being intersectional in our approach. In practice, accountability has to mean balancing our accountability to *all* women with our accountability to the specific women that may be affected by our prevention initiatives. This again means starting with a strong understanding of our community or audience, and asking the question ‘who is the work for?’.

Engaging men as allies in prevention is about standing *with*, not *for* women

- Sometimes as women and as women’s or feminist organisations, it can be difficult to this work because of societal beliefs or assumptions about men as ‘natural’ leaders and sources of authority. Practitioners reflected on experiences where men can be resistant to listening to women but might more easily accept the same messages when they come from other men. This both reflects and reinforces rigid gender stereotypes and the exclusive potential of men’s peer relations. This is something we need to be really careful with to make sure the work remains **accountable to women** and is **gender transformative**.

- This reflects the importance of having men as allies in prevention work, and of ongoing reflection on how we might contribute to unequal gender relations even within the sector. Allyship for men is centred on listening to and remaining accountable to women, and in making sure that they stand with, not for women.
- The [Working Together with Men](#) resource provides some practical strategies for incorporating men's allyship and accountability into our prevention activities.

Strategic messaging is vital to address masculinities and engage men in prevention

- Often the language we use in prevention can be technical and academic, and difficult to apply in practice. We need to keep working on how we translate concepts, like the guiding principles, so that they can be more accessible and engaging.
- Strategic messaging should also be community-led, and integrate the framing of guides like [Change the story](#) and [Changing the picture](#) with the language, values and experience of the communities and organisations that we work with. At the same time, we should see this as two-way learning, and recognise the potential opportunities for bringing grassroots approaches from 'marginalised' communities into the 'mainstream' — grassroots approaches work.
- Practitioners reflected on the need to really challenge ourselves on the language that we might be using that can sustain harmful gender stereotypes, or that may be present within partner organisations. For example, there is a concern for how we can challenge our own assumptions to make sure we're not reinforcing or reproducing the gender binary in our work. At the same time, we need to centre men's violence against women, which is an inherently binary idea. There is a felt need to recognise how prevalent these binary ideas still are within 'mainstream' prevention work, and to challenge ourselves to move beyond this thinking so that we can better support coordinated prevention with LGBTIQ communities. This point recognises that our personal, self-reflective work must also adopt **gender transformative approaches**, as well as our community-facing efforts.
- This also reflects a key tension in messaging and framing prevention work. In some contexts, starting with binary ideas of men, women and gender equality is needed to get initial buy-in, or the content will be quickly rejected. Practitioners reflected on the challenges of sometimes needing to approach this work indirectly or covertly through the language of 'gender equality', not 'preventing violence against women'. **Intersectional** approaches to messaging can also be challenging, as there is a need to acknowledge different forms of discrimination without decentering men's violence.
- Practitioners voiced concerns around how prevention messaging can generate feelings of shame among men (and others), which can lead to resistance and rejecting the work.
- There was also a recognition of the need to move beyond a one-size fits all approach and for messaging to be tailored for men from a diverse range of backgrounds, such as with Aboriginal men, with men from different faith-based communities, and with boys in schools, each of whom may feel disenfranchised or alienated by the dominant framing of prevention work on masculinities.
- Taking a **strengths-based approach** to messaging means looking for common values, and learning how to use positive messaging around those values. We can think of this as 'what values do we share?', rather than 'what divides us?'. A follow-up question then becomes, 'how do we reach people to activate the values that are already there?'. This can be a key strategy for mitigating potential feelings of shame among men and other audiences in this work.

- Part of the challenge with messaging and framing is addressing the backlash and resistance we inevitably face in prevention work. While we recognise that sometimes this resistance is an indication of our messaging taking hold, in many other instances resistance and backlash are draining and distracting. One strategy mentioned by practitioners was to respond to resistance or difficult questions with our own open questions and genuine curiosity. This offers a way to encourage self-reflection on assumptions, and encourages us to step back from defensive places of conflict. And sometimes, we can see people move from resistance, to processing, to coming back with different perspectives—so we can also witness the change, and celebrate these wins.
- In their work on masculinities and health, [VicHealth](#) has recently published a resource for strengths-based approaches to messaging: [Framing masculinity: Message guide](#). This can be used alongside the VicHealth guide on backlash and resistance in prevention work: [\(En\)countering resistance: Strategies to respond to resistance to gender equality initiatives](#). Eastern Health, Eastern Domestic Violence Service (EDVOS) and Queensland University of Technology have also recently published a guide on managing resistance in prevention work with men: [Engaging men: Reducing resistance and building support](#).

As practitioners, we also need to work reflexively and with care for ourselves and each other:

- As practitioners, we need to recognise that gender inequality—and other forms of privilege and inequality—also create lived experiences for us. This can mean we carry assumptions and biases about men, masculinities and the world, and that we may have personal blind spots about how we reinforce the norms, structures and practices that drive violence. **Intersectionality** and **accountability** are therefore also important for how we approach our own work within the sector. This is about reflecting on how we as practitioners and organisations position ourselves in relation to privilege and those who are disproportionately affected by violence and inequality. It is also about recognising the interconnected nature of the work between practitioners and society, and of the long-term processes required to achieve violence-free societies.
- There are a lot of challenges for us in this space, so recognising this, what can we do? We can lean into it, and have critical conversations—when we feel able to—with each other to be constantly reflecting on how we approach this work, and how we can move beyond these challenges. We can also be active in advocating for collective care over individualised approaches to self-care. It can be important and meaningful to remember that we are not alone in this work, and to intentionally celebrate wins together. This can bring us back to taking a **strengths-based approach** as a sector and to recognise the values we already share.
- There was a reminder that this collective resilience and community care is also what people of colour and other marginalised communities have always been doing for each other. As practitioners, we need to remember this and listen to our colleagues for what we can learn in this space.
- As practitioners in this space, we are all too familiar with how personally challenging and tiring, but also rewarding, this work can be. Part of directing the transformative work and critical self-reflection internally as a sector is also about promoting collective care for ourselves and others. Some links were shared for resources on these points, like the work of [Vikki Reynolds](#) on [Resisting burnout with justice-doing](#), and [Collective care & ethical pain](#).

Conclusion

These Hub events provided an opportunity for policy makers, practitioners and others working to prevent men's violence against women to connect and hear from others on a key part of this work; addressing masculinities and engaging men in prevention.

The guiding principles from *Men in focus* provided a framework for considering how we can strengthen these efforts. These include: applying intersectionality, aiming to be gender transformative, using strengths-based approaches, maintaining accountability to women, and looking for solutions across all levels of society. The panel discussion provided valuable and rich case studies from Tangentyere Family Violence Prevention Program, ARC Gender Relations and Rainbow Health Victoria that illustrated how organisations are applying these guiding principles in their work on men and masculinities. Practitioners also contributed their experiences of a number of tensions and challenges within the sector, and shared their insights on how we can do this work effectively over the long-term.

Many of the themes, challenges and opportunities that practitioners discussed throughout the forum will be expanded on in the upcoming *Men in focus* practice guide, due to be published by Our Watch in late 2021. The conversations from these Hub events will help to guide the future national primary prevention priorities and actions, and emphasise the importance of centring men and masculinities throughout all our efforts to prevent violence against women.

Endnotes

- 1 Our Watch (2019) *Men in focus: Unpacking masculinities and engaging men in the prevention of violence against women*, Our Watch, Melbourne.
- 2 Crenshaw, K (1989) *Demarginalizing the intersection of race and sex: A black feminist critique of antidiscrimination doctrine, feminist theory and antiracist politics*, University of Chicago Legal Forum.
Crenshaw, K (1991) Mapping the Margins: Intersectionality, identity politics, and violence against women of color, *Stanford Law Review*, 43(6), pp. 1241-1299.
- 3 Our Watch (2019) *Men in focus: Unpacking masculinities and engaging men in the prevention of violence against women*, pp. 32-39.
Multicultural Centre for Women's Health (MCWH) (2017) *Intersectionality matters: A guide to engaging immigrant and refugee communities to prevent violence against women*, MCWH, Melbourne.
- 4 Our Watch (2019) *Men in focus: Unpacking masculinities and engaging men in the prevention of violence against women*, pp. 78-80.
Salter, M (2016) 'Real men don't hit women': Constructing masculinity in the prevention of violence against women, *Australian & New Zealand Journal of Criminology*, 49(4), pp. 463-479.
- 5 Our Watch & Horsley, P (2017) *Primary prevention of family violence against people from LGBTI communities*, Our Watch, Melbourne.
Carman, M, Fairchild, J, Parsons, M, Farrugia, C, Power, J & Bourne, A (2021) *Pride in prevention: A guide to primary prevention of family violence experienced by LGBTIQ communities*, Rainbow Health Victoria & the Victorian Department of Premier and Cabinet, Melbourne.

- 6 Our Watch (2018) [*Changing the picture: A national resource to support the prevention of violence against Aboriginal and Torres Strait Islander women and their children*](#), Our Watch, Melbourne.
- Fogarty, W, Lovell, M, Langenberg, J & Heron, M-J (2018) [*Deficit discourse and strengths-based approaches: Changing the narrative of Aboriginal and Torres Strait Islander health and wellbeing*](#), The Lowitja Institute, Melbourne.
- The Healing Foundation (2017) [*Towards an Aboriginal and Torres Strait Islander violence prevention framework for men and boys*](#), The Healing Foundation & White Ribbon Australia, Canberra & Sydney.
- 7 Our Watch (2019) [*Men in focus: Unpacking masculinities and engaging men in the prevention of violence against women*](#), pp. 90-91.
- HealthWest Partnership Victoria (2020) [*Working Together with Men: How to create male allies for gender equity in your community*](#), HealthWest Partnership Victoria, Melbourne.
- 8 Our Watch, Australia's National Research Organisation for Women's Safety (ANROWS) & VicHealth (2015) [*Change the story: A shared framework for the primary prevention of violence against women and their children in Australia*](#), Our Watch, Melbourne, pp. 21, 45.
- 9 An intersectional approach addresses the intersections between multiple forms of social inequality, rather than focusing on gender inequality in isolation. Intersectional prevention work requires a structural and systemic focus to address the social systems, structures, norms and practices that create complex intersecting forms of discrimination and privilege, and that influence patterns of perpetration as well as experiences of violence.
- 10 A gender transformative approach aims to transform the prevailing social systems and structures that produce and maintain gender inequality and drive violence against women. In order to be gender transformative, prevention work must actively challenge and change (rather than inadvertently reinforce or perpetuate) those harmful gendered social norms, structures and practices. See further: Our Watch (2019) [*Change the story three years on: Reflections on uptake and impact, lessons learned and Our Watch's ongoing work to embed and expand the evidence on prevention*](#), Our Watch, Melbourne.
- 11 Our Watch, ANROWS & VicHealth (2015) [*Change the story*](#), pp. 21, 33-34.
- 12 Carman, M, Fairchild, J, Parsons, M, Farrugia, C, Power, J & Bourne, A (2021) [*Pride in prevention*](#), pp. 9-10.
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