MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Community Mobilisation Toolkit

Preventing family violence and/or sexual violence within ethnically diverse communities in Aotearoa New Zealand

Acknowledgements

The Ethnic Communities Violence Prevention (ECVP) Team at the Ministry of Social Development developed this toolkit for community partners in collaboration with Change Strategy and Research. The toolkit incorporates a co–design approach in partnership with Wāhiwhakaaro ThinkPlace.

This final version has been refined through collaboration with Change Strategy and Research, ThinkPlace, and valuable reviews and feedback from community partners involved in the ECVP programme, expert individuals from the community, and prevention specialists from government agencies.

We extend our sincere gratitude to everyone who contributed – your collective effort made this toolkit possible.

Ngā mihi nui,
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Kia ora Welcome

Welcome to the Community Mobilisation Toolkit for ethnically diverse communities. This resource reflects our commitment to preventing and eliminating family violence and sexual violence (FVSV), particularly in ethnically diverse communities and beyond.

This work has taken a community-led approach, focusing on learning through developing, implementing, and evaluating new initiatives that are responsive to the unique needs and aspirations of the communities we serve. While this work has been centered on ethnically diverse communities, the insights and approaches in this toolkit can be adapted and applied across a range of social groups and community settings.

By working together to design and deliver culturally responsive, community-driven initiatives, we can continue to mobilise communities and strengthen collective efforts toward preventing and eliminating violence. Our shared vision is a society free from FVSV, where all communities, particularly ethnically diverse communities, can thrive in safety and dignity.

Thank you for being part of this collaborative journey and for your commitment to creating safer, more inclusive communities for everyone.

He rau ringa e oti ai
Many hands make light work

Introduction

The Ethnic Communities Violence Prevention (ECVP) work programme was introduced by the Ministry of Social Development (MSD) to reflect a commitment to addressing and preventing FVSV across ethnically diverse communities. The work programme contributed to the national strategy to eliminate family violence and sexual violence, Te Aorerekura, with a focus on developing prevention programmes for ethnically diverse communities. The programme's primary goal was to increase understanding of what works to prevent FVSV, particularly within ethnically diverse communities, while sharing insights and data that can inform broader violence prevention efforts.

This toolkit has been developed to support a wide range of community groups and organisations in Aotearoa New Zealand, especially those working with ethnically diverse populations – in their efforts to prevent FVSV. The focus is on community mobilisation, an evidence-based strategy that has been proven effective in violence prevention and can be adapted to different community contexts.

We hope this toolkit will serve as a valuable resource for communities across Aotearoa New Zealand.

The purpose of this toolkit

The purpose of this toolkit is to support a wide range of community groups and organisations – especially those working with ethnically diverse populations – in developing and implementing community mobilisation initiatives aimed at preventing FVSV. It also provides guidance on assessing progress and measuring change.

We recognise that for many, community mobilisation may be a new approach in the context of FVSV prevention. By using this toolkit, you will learn about evidence-informed community mobilisation strategies, and you can apply the activities to plan and strengthen your initiatives. The goal of the toolkit is to help you and your community focus your efforts and resources on the areas that will have the greatest impact in preventing FVSV.

> "Overall, we found the community mobilisation toolkit to be a comprehensive and effective resource for working with our community to prevent family violence. It was a roadmap taking us step by step towards creating, texting, and applying our initiative." (Community Partner)

Who is this toolkit for?

Community mobilisation goes beyond practitioners and involves all members of a community. While practitioners play an essential role, successful community mobilisation taps into the voluntary efforts of diverse community members. It includes everyone, not just those with direct experience of violence, and brings together individuals with different knowledge, skills, and perspectives to create meaningful change.

This toolkit is designed for community groups, organisations, and individuals who are actively working in the community to address FVSV. For example, it is intended for:

- Community groups already engaged in this field.
- Social workers, practitioners, and volunteers within communities whose core focus is on FVSV prevention and/or intervention, and who hold expertise in FVSV.
- Community members who have strong relationships and trust with a wide range of people in their community, and can bring people together for collaboration. These individuals can work alongside others who hold important knowledge about the issue.

While community mobilisation is a collective effort involving all, the safest and most effective practice is for this toolkit to be used by individuals and organisations who have prior knowledge and experience in addressing FVSV. This ensures the toolkit is used in a responsible and informed way to create meaningful and safe impact.

> **Important:** Anyone using this toolkit in community engagements must be aware of available help-seeking pathways and support services in case there is a disclosure of family violence, sexual violence, or any other risks during their work.

Available support

We understand that due to the high prevalence of FVSV in Aotearoa New Zealand, it is likely that readers of this toolkit, their loved ones, or those in their circles, may have experienced or are experiencing FVSV, or are affected by violence in other ways. We encourage individuals to prioritise their well-being, seek appropriate support, use coping strategies that work for them, and reach out to national helplines if needed.

If you or someone you know is experiencing FVSV or if you are working with a community member who is at risk, here are some support services you can contact:

- **National Family Violence Helpline/Women's Refuge:** 0800 733 843
- **Shakti:** 0800 742 584
- **Are You OK?:** 0800 456 450 | areyouok.org.nz
- **Change is Possible:** changeispossible.org.nz
- **Police:** 111

> **Safety disclaimer:** Always prioritise the safety and well-being of community members during your engagements. If any risk of harm or violence arises during a session, please take appropriate steps to ensure the safety of all involved and refer them to the appropriate services for support.

How to use this toolkit

It is up to you how you use this toolkit.

This toolkit is a brief introduction to community mobilisation. It is a resource you can use and share with anyone who is interested.

We suggest that you use it as a resource and workbook to:

- Learn about community mobilisation and FVSV particularly if this is a new area for you.
  - Access key information and evidence in one place.
  - Learn about prevention as it is quite different from delivering crisis intervention services.
- Support you to plan your initiative.
  - Working through the activities.
  - Using the suggested steps and tools, and adapting these for your preferred ways of working.
- Learn about assessing progress and change.
  - Set up your initiative to enable evaluation and assessment now or in the future.

The toolkit can be used in different ways (such as during workshops, community meetings, and engagements) to help mobilise the community in preventing and addressing FVSV.

If you are planning to translate this toolkit, please contact MSD for approval before doing so. You can reach out to ECVP@msd.govt.nz

Throughout the workbook you will find symbols that indicate:

Activity

Additional resources to read
Section 6 provides links to in-depth tools and resources if you want more information

Reflection questions

How to use the reference section

The reference section includes literature that has been used throughout the toolkit.

References are numbered within the text. Each number is linked to its corresponding reference.

Note: A Glossary is included at the end of this document, providing helpful information.

Te Tiriti o Waitangi, tangata whenua, and tangata tiriti

An integral part of violence prevention is to honour our responsibility as tangata Tiriti to act in a way that is consistent with the principles of Te Tiriti o Waitangi.

To learn more about MSD's Strategic Direction, Te Pae Tawhiti, our Māori Strategy and Action Plan – Te Pae Tata, and our Pacific Strategy and Action Plan – Pacific Prosperity, please use this link Te Pae Tawhiti[1]

Reflection: aligning our actions with Te Tiriti o Waitangi

- How does your organisation/community group actively honour Te Tiriti o Waitangi in its daily practices?
- Which of the principles of Te Tiriti o Waitangi do you think your organisation/community group upholds best? Why?
- Does your organisational structure reflect a commitment to equitable partnership with Māori communities? How can it be strengthened?
- What are some challenges your organisation/community group faces in aligning with Te Tiriti o Waitangi, and how can they be addressed?

1 https://www.msd.govt.nz/about-msd-and-our-work/about-msd/strategies/te-pae-tawhiti/index.html

Section 1: Community mobilisation

In this section you will learn about:

- community mobilisation and its key aspects
- why community mobilisation is a recommended FVSV prevention strategy
- examples of community mobilisation from Aotearoa New Zealand.

"True change starts when communities define it for themselves. Through community mobilisation, we've been able to lift up our values, challenge harmful beliefs, and take ownership of protecting our children."
(Community Partner)

What is community mobilisation?

> Practitioners are a part of community mobilisation, but this method goes far beyond those working in paid roles to enable voluntary efforts of diverse community members to address violence prevention. Community mobilisation can involve all members of a community and is not limited to those who have experienced or used violence.

Community mobilisation is a recommended approach to preventing FVSV. For many, it is an exciting new way of working as it can involve community members in all aspects of planning and implementation.

Community mobilisation is:			
Long term	Promoting positive social norms	Complex	Community-led
Fostering activism	Involving large numbers of community members	Stimulating critical thinking	Holistic and inclusive
Strengths-based	Focused on the drivers of violence	Developmental and organic	A struggle for social justice

Figure 1 Adapted from Michau, 2012

Community mobilisation is multifaceted (1), meaning that a number of different projects, activities, and techniques are used at the same time to create change. For example, you may develop a **leadership programme** for a specific group while also stimulating **community conversation** about these issues through art, media, music, and creating spaces to talk.

Over time, community mobilisation enables community members to get active and involved in preventing FVSV. As confidence and skills in the community build, communities can take more leadership and start to shift decision-making from external organisations to community members and groups, supported by local, regional, and national organisations (2). Community mobilisation builds the capability of communities to address their own issues and concerns.

Why community mobilisation to prevent and eliminate FVSV?

Community mobilisation is an evidence-based and recommended primary prevention strategy for FVSV internationally (1, 2, 6-12).

The rationale for community mobilisation to prevent FVSV is supported from several perspectives (14).

Community mobilisation can:		
Change social norms and structures that cause violence (12)	Strengthen social connections and community influence (15)	Shift attitudes and behaviours (16)
Increase local resources to respond to violence (17)	Address the needs of specific communities (17)	Reduce intimate partner violence when well-resourced (18)

Figure 2 How community mobilisation can impact FVSV prevention

Evidence shows that:

- People experiencing family violence prefer seeking help from friends and family over specialist services (19).
- Informal support systems (e.g., family, friends, neighbours) can provide ongoing support, protection, and empowerment (20).
- Engaging communities to understand the issue and develop diverse leadership strengthens informal support systems (12, 17, 21, 22).

This aligns with the approach of Te Tokotoru (see Section 2).

Activity: Community mobilisation

Think about mobilisation in your community.

Fill in the table below with examples of what community mobilisation looks like for your community.

What does mobilisation to address FVSV mean to you and your community?		
Example: A social worker, who is also an active community volunteer among South Asian communities, connects with different community groups and members to discuss concerns around FVSV.		

Key aspects of community mobilisation

Evidence shows that to mobilise communities for change, initiatives must enable action across seven key aspects (2-5). These aspects are connected and all contribute to community mobilisation.

Key aspects of community mobilisation	Focus	Examples of what this can involve
Leadership	Developing leadership skills of community members to lead mobilisation efforts	Identify community members who have leadership potential and invite them to join a group. Ask them what they need to develop their leadership on violence prevention and develop a capability building plan linked to prevention action the group will run/support in the community.
Organisation, networks, and resources	Activating systems, structures, resources, and relationships to support mobilisation	Identify the key relationships that will support your initiative and foster these. Join or form networks that will support your plans. Develop tools to communicate with your community and support conversations.
Participation	Engaging increasing numbers of community members in action over time	Run events – online, in person, big, small – where people can come together and show their support for the initiative, get involved, bring their families, learn, and share. Focus your events around things that attract your community.
Shared concern	Increasing the relevance of the issue across the community and motivation to act	Engage diverse community members to make art, films, music, podcasts, and radio shows that stimulate conversation about healthy relationships to prevent violence/celebrate culture and identity etc.
Critical consciousness	Increasing understanding of lived experiences, issues, and solutions through conversation	Create small groups in your community to talk about why violence happens, who is most affected, and what can be done to prevent it. These conversations help people think critically about the root causes of violence, question harmful beliefs, and challenge the normalisation of violence in everyday life. To make these discussions more comfortable and inclusive, those who lead the initiative may bring people together around activities they enjoy, such as sharing food, having coffee, or attending cultural gatherings. This relaxed environment encourages open and honest conversations where people can reflect on their experiences, learn from each other, and start to imagine positive changes in their community.

Key aspects of community mobilisation	Focus	Examples of what this can involve
Social cohesion	Strengthening connections across the community to enable collective action	Invite people from diverse parts of your community and outside your community to get together over food, sport or whatever people enjoy to build relationships. Ask people “what should we do next time we get together?” and run things regularly.
Cultural connection	Increasing community connections to culture including concepts, beliefs, practices, language, spaces, arts, and traditions	Build connection to culture into all your events, conversations, and activities. Ask people “what are the parts of our culture and traditions that support healthy relationships and safety that you want to see more of and celebrate?”

Figure 3 (2-5) Focus areas and examples of community mobilisation

Activity: Community mobilisation within your community

Looking at the key aspects of community mobilisation, which areas will you focus on? How would you engage your community? What is already happening that you could build on?

Key aspects of community mobilisation	In our community we are planning to...
Leadership	
Organisation, networks, and resources	
Participation	
Shared concern	
Critical consciousness	
Social cohesion	
Cultural connection	

Examples of community mobilisation from Aotearoa New Zealand

E Tū Whānau

E Tū Whānau is a movement for positive change developed by Māori for Māori. It's about taking responsibility and action in your community and supporting whānau to thrive etuwhanau.org.nz

Pasefika Proud

Pasefika Proud is a social change movement – 'by Pacific for Pacific' – to boost wellbeing for Pacific families and transform attitudes, behaviours, and norms that enable violence through a strengths-based and community-led approach. Pasefika Proud delivers a complementary programme, where community mobilisation is central to their family violence and sexual violence prevention work pasefikaproud.co.nz

Change is Possible

Change is Possible is a movement that encourages men in Aotearoa to become changemakers, levelling up as partners, fathers, brothers, and mates. Change is Possible is supporting community mobilisation in communities and online: changeispossible.org.nz

Le Va

Le Va focuses on supporting Pasifika families and communities to achieve their full potential by providing evidence-based resources and support services for health and well-being leva.co.nz

Village Collective

Village Collective aims to empower Pasifika youth with knowledge and resources for informed decisions on well-being and sexual health, emphasising the importance of prevention villagecollective.org.nz

Diversity Counselling New Zealand (DCNZ) Child Sexual Abuse Prevention Project

The Child Sexual Abuse Prevention Project was a community-led initiative where DCNZ and Hohou te Rongo Kahukura adopted a community mobilisation approach to address child sexual abuse. Resources were co-designed by community, for community, with the support of dedicated community mobilisers.

diversitycounselling.org.nz/courageous-chats-resource/

➔ *Check out Section 6 for additional resources and webinars on community mobilisation*

Reflection: A conversation for people leading your project

- Have you been involved in community initiatives like the community mobilisation approaches described on the previous page?
- What worked well?
- What was hard?
- Were there key people leading your community initiative?
- What makes for good leadership-leaders in community mobilisation? For example, safe trusted people, mana-enhancing leadership.

Section 2:
Evidence on family violence and sexual violence prevention

In this section you will learn about:

- the risk and protective factors for FVSV, including for ethnically diverse communities
- intersectionality
- FVSV prevention models
- essential ingredients for meaningful FVSV prevention in ethnically diverse communities.

Risk and protective factors in ethnically diverse communities

Effective prevention and community mobilisation works to address the drivers of FVSV.

This means addressing the risk factors that make it more likely for people to use or experience violence, and strengthening the protective factors that make violence and abuse less likely to occur.

The image below (Figure 4) highlights the difference between the drivers of violence (root causes) and other risk factors that increase the likelihood of FVSV or make it worse. The image on the right (Figure 5) shows key protective factors that, when strengthened, can help address risk factors and reduce the likelihood of FVSV occurring and/or recurring.

Meaningful community mobilisation and prevention initiatives consider risk and protective factors across all levels – individual, relationship, community, and society (see Figures 5 and 6) while maintaining a constant focus on root causes, including gender inequities and colonisation.

The socio-ecological model

The socio-ecological model recognises that interactions between risk and protective factors at the individual, relationship, community, organisational, and societal levels influence why some individuals or groups face higher rates of violence while others are more protected.

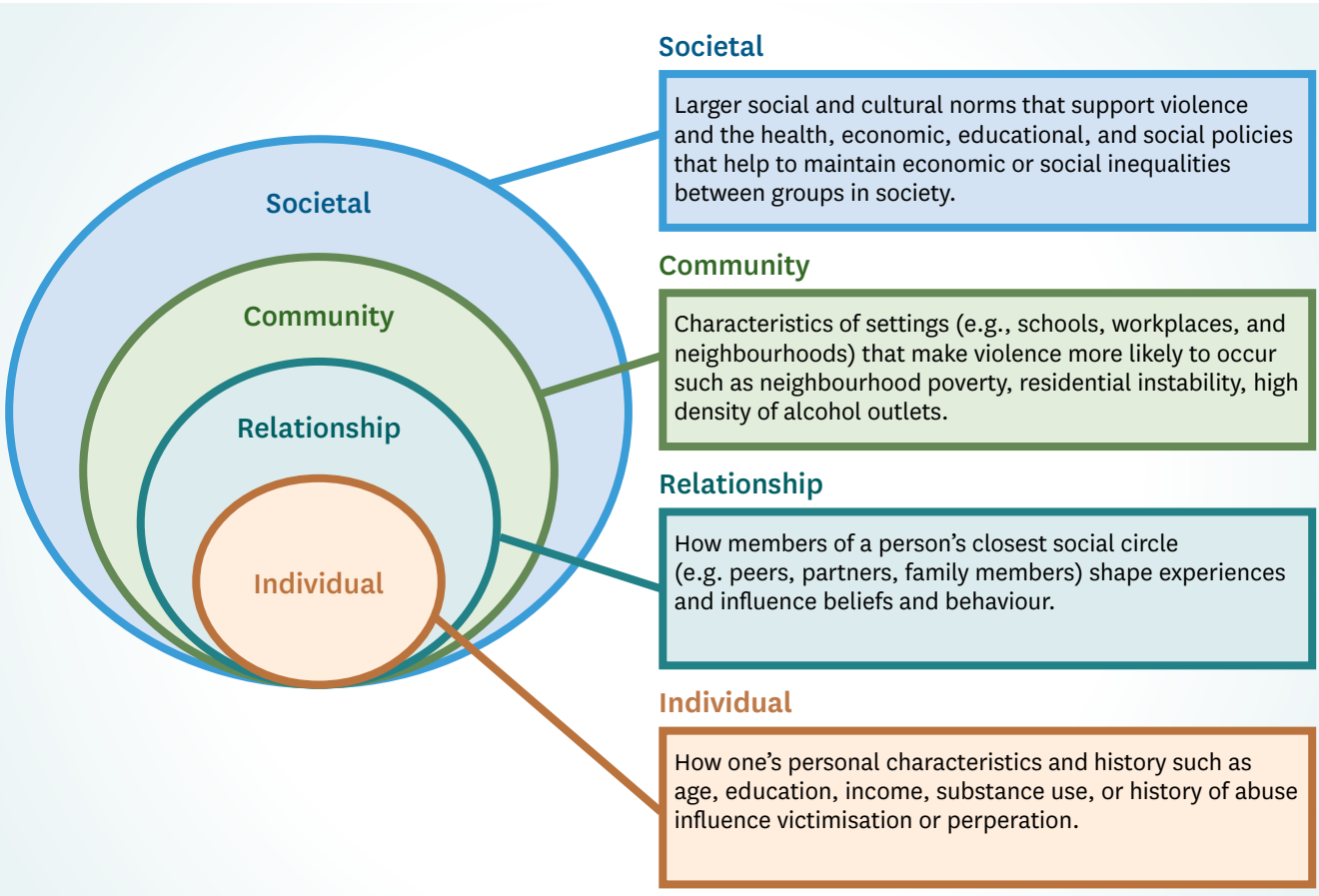


Figure 4: Four-level socio-ecological model for violence prevention (44, 45).

Risk factors

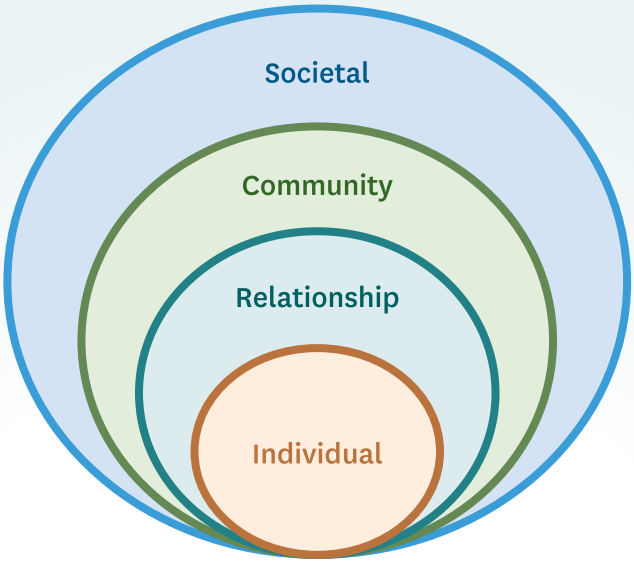
As mentioned earlier, risk factors are elements that increase the likelihood of people experiencing or using violence (adapted from 24).

Effective prevention and community mobilisation address risk factors and the root causes of FVSV, particularly gender inequality, harmful gender norms, and structural inequities, such as the impacts of colonial violence. FVSV is not just an individual issue – it occurs within a broader social and systemic context. People are shaped by their relationships, communities, and the wider society. Successful prevention efforts go beyond addressing individuals and instead focus on changing the societal and systemic conditions that allow violence to occur and/or recur.

The images in Figure 5 below illustrate some of the more common risk factors across all levels – individual, relationship, community, and society - that contribute to FVSV, including child abuse and neglect.

Figure 5 (6) Risk and protective factors

Risk factors for family and sexual violence



Societal

- Colonisation
- Social and structural inequities
- Racism
- Capitalism
- Patriarchy
- Immigration status
- Intergenerational trauma
- Socio-economic status
- Misuse of culture/faith
- Rapid social change
- Economic inequality
- Gender inequality
- Policies that increase inequalities
- Poverty
- Weak economic safety nets
- Poor rule of law
- Social norms that support violence
- Harmful gender norms
- High firearm availability
- Conflict/post-conflict events
- Weak sanctions for violence from society, justice, and police
- Media violence

Community

- Poverty
- High crime levels
- High residential mobility
- High unemployment
- Local illicit drug trade
- High density of alcohol outlets
- Weak institutional policies
- Community violence
- Poor social connections
- Widely accepted gender norms
- Strong patriarchal values

Relationship

- Compromised parenting practices and lack of child supervision
- Marital/relationship discord
- Violence between parents
- Access to finances
- Overcrowding
- Peers that engage in violence
- Gang involvement
- Social isolation
- Whānau and family disorganisation and dissolution
- Widely accepted gender norms, strong patriarchal values
- Migration factors
- Employment

Individual

- Childhood abuse, neglect or adversity
- Mental ill health
- Substance misuse
- History of violent behaviour
- Lack of parenting knowledge and skills
- Exposure to violence
- Disability
- Poverty
- Traumatic experiences
- Parent thoughts and emotions support maltreatment behaviours
- Parental characteristics such as young age
- Lack of education
- Single parenting
- Large number of dependent children and low income
- Language barriers
- Isolation

Figure 6 Risk factors from a socio-ecological lens (24).

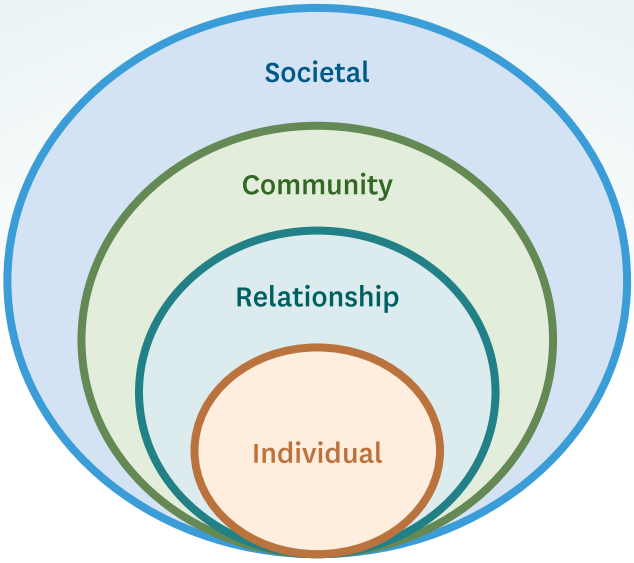
> ***"While there are similarities between violence against ethnic and non-ethnic women, violence in ethnic communities can take particular cultural forms, have distinct profiles of presentation, and arise from a specific constellation of risk factors"*** (23).

Protective factors

Meaningful community mobilisation takes a strength-based approach to FVSV prevention and focuses on strengthening protective factors to encourage healthy, respectful, and equitable relationships. Identifying protective factors and focusing on them helps foster more and easier conversations about healthy relationships and positive change.

Figure 7 on the next page illustrates some of the more common protective factors across all levels – individual, relationships, communities, and societies. If strengthened, they protect individuals, family, whānau, the community, and society against FVSV.

Protective factors for family and sexual violence



Societal

- Gender equity
- Positive social norms: healthy and respectful relationships, non-violence, and celebrating diversity
- Child well-being is supported
- Connections and celebration of cultures
- Helping and healing is supported
- Stable immigration status

Community

- Strong social connections in communities
- Healthy relationships encouraged
- Strong cultural identities
- Community support and connectedness
- Coordination of community resources and services
- Access to mental health and addiction services
- Safe relationships free from violence
- A safe and supportive physical and built environment
- Culture providing a sense of identity and belonging

Relationship

- Secure attachment of infant to parents/ caregivers
- High levels of paternal care during childhood
- Strong and warm parent–child relationships
- Sufficient whānau and family finances
- Time with parent
- Whānau and family support and connectedness
- Pro-social peers
- Connection to a caring adult
- Stable responsive relationships

Individual

- Self-regulation
- Positive parental health and well-being
- Positive physical and cognitive development
- Positive social behaviour
- Skills in solving problems non-violently
- Connection and commitment to school
- Food security
- Sufficient whānau and family finances
- Secure and appropriate nutrition from pre-conception onwards
- Faith/religion, culture, and/ or spirtuality
- Independant visa, access to resources (e.g., financial rresources)
- Language proficiency and/ or language support

Figure 7 Protective factors from a socio-ecological lens (23-24).

➔ ***See Section 6 for insights from ethnically diverse communities on risk and protective factors, as well as evidence from the literature on effective FVSV prevention strategies in these communities***

Activity: Risk and protective factors for your community

Have a conversation with your community to identify risk and protective factors at different levels within your community.

Risk factors		Protective factors	
Individual	How do these risk factors impact...?	Individual	How do these protective factors support...?
Relationship	How do these risk factors impact...?	Relationship	How do these protective factors support...?
Community	How do these risk factors impact...?	Community	How do these protective factors support...?
Societal	How do these risk factors impact...?	Societal	How do these protective factors support...?

Intersectionality

> ***"Intersectionality is a way of seeing or analysing the dynamics of power and social inequality in our society"*** (42).

Intersectionality shows how people experience problems differently, and why people who experience multiple forms of discrimination are at increased risk of harm. Intersectionality is an important lens to understand risk factors for violence for ethnically diverse women (23).

Intersections of race/ethnicity, indigeneity, gender, class, sexuality, geography, age, disability/ability, migration status, and religion can compound experiences of discrimination, disadvantage, and barriers, and can contribute to an increased risk of FVSV and abuse. Intersectionality is complex. For example, people can experience privilege and oppression at the same time, depending on the specific context or situation (42).

Intersectionality is an important consideration in planning and implementing effective and holistic FVSV prevention initiatives for ethnically diverse communities.

A way of understanding intersectionality is by thinking about the multiple layers of oppression or discrimination a person may experience and the supports required in relation to these.

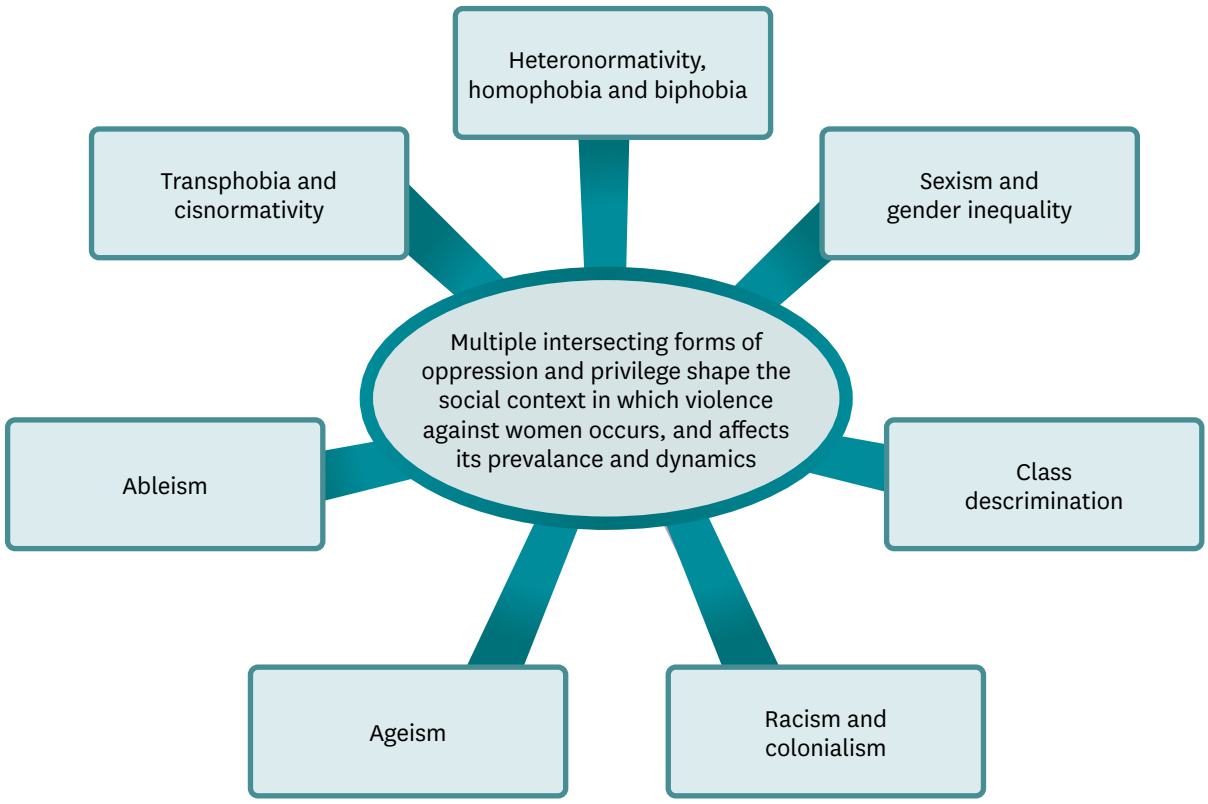


Figure 8: Violence against women occurs in the context of multiple intersecting forms of oppression, discrimination, power, and privilege (adapted from 44).

➔ ***Check out Section 6 for more resources on intersectionality***

Activity: Can you think of additional examples of intersectionality and how they impact your community?

Family violence and sexual violence prevention model

Now that we've explored risk and protective factors in your community, it's important to integrate them into your prevention planning. Aligning your community mobilisation efforts with the socio-ecological model will help address the interaction between risk and protective factors effectively.

Te Tokotoru – prevention is interconnected

Te Tokotoru encourages us to think beyond the limits of formal health and social services and programmes and describes an ecology of supports focused on intergenerational well-being. It emphasises relationships and collaboration among individuals, communities, and knowledge systems.

Te Tokotoru recognises the important connections between primary prevention, secondary prevention, and tertiary prevention for a holistic approach to FVSV (see Figure 9).

It connects to community mobilisation by fostering collective action, shared responsibility, and culturally grounded leadership.

Te Tokotoru is aligned with the socio-ecological model developed in in Aotearoa New Zealand by the Auckland Co-Design Lab with whānau and rangatahi, Māori researchers, and services (47).

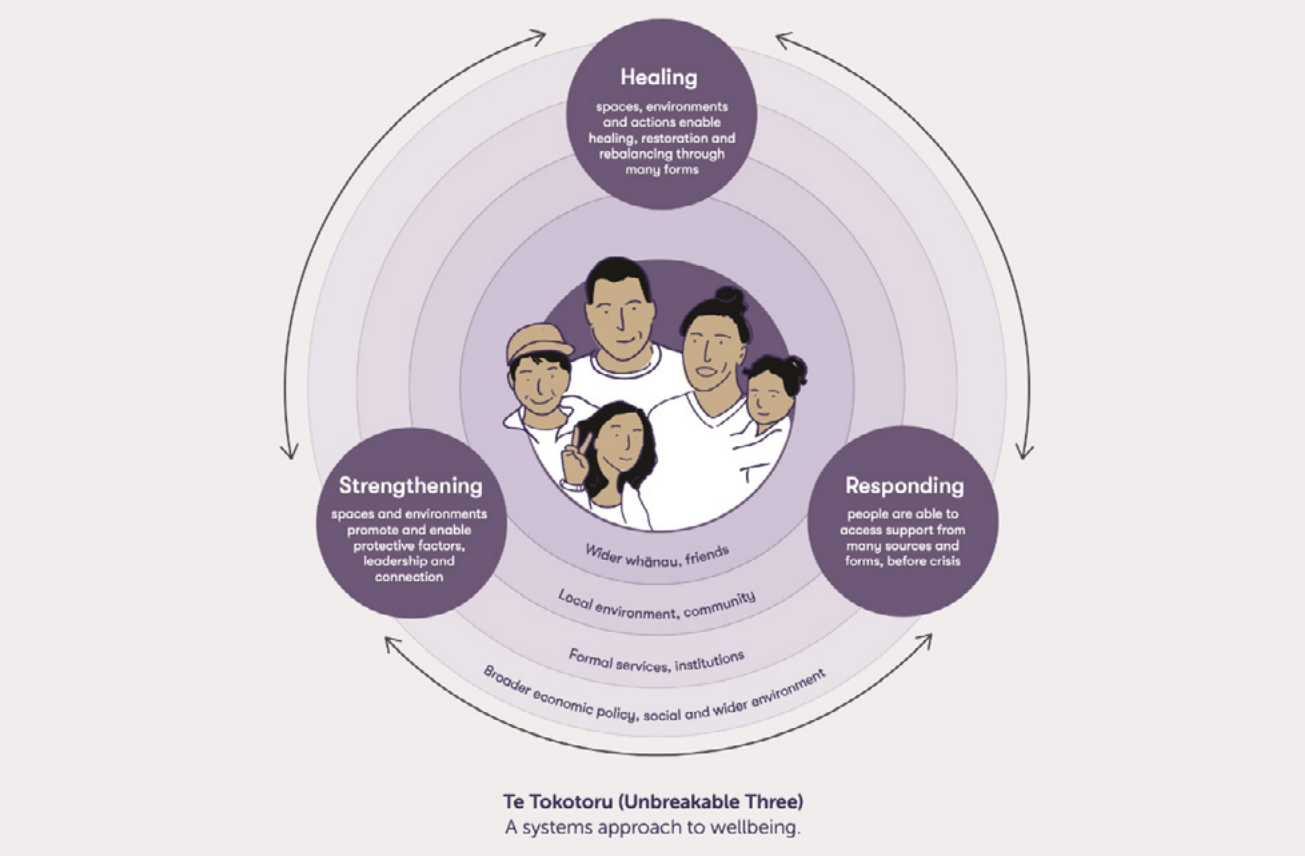


Figure 9 Te Tokotoru model (47).

Figure 9: Te Tokotoru model (47).

Strengthening

Strengthening involves increasing the factors that protect against violence, including investing in relationships that enable whānau and communities to thrive, lead, and pursue their aspirations.

Responding

Responding includes many forms of support, not just through formal services and programmes and not only during or after a crisis. Responding starts early when there might be signs of conflict, abuse or violence. Responding includes indigenous customary and culturally grounded practices, family and local community support, and specialist services and supports. It also recognises the important role of informal helpers and support that may come through family, friends, and community.

Healing

Enabling involves healing, protection, respite, recovery, rebalancing, and restoration for people and environments. This includes personal opportunities to heal such as access to natural environments and spaces of respite, customary healing practices, and rongoā (traditional medicine), as well as mental health and trauma informed support. Importantly it includes the normalisation and recognition of cultural and indigenous healing practices. Families, whānau, and communities often want to start their change journey with healing.

How does Te Tokotoru model connect to community mobilisation?

Te Tokotoru is a very helpful model when planning and implementing community mobilisation, as community members and organisations often want to work across strengthening, healing, and responding. Te Tokotoru also helps us to think about the many reasons people want to get involved in community mobilisation and that many will be on their own journey of strengthening, responding, and healing.

A key aspect of community mobilisation is strengthening the protective factors (such as social connection, sense of belonging, and strong cultural identity). Te Tokotoru does a great job at describing this and the connections between strengthening the protective factors and healing.

For more see aucklandco-lab.nz/reports-summary/te-tokotoru

Reflection: Family violence and/or sexual violence

Looking at the socio-ecological model and Te Tokotoru, think about how you can apply these models to your community?

How do you interpret the socio-ecological and Te Tokotoru models?	
How would you use these models for your community to support meaningful violence prevention work?	
Would you make changes to these models to make it more culturally appropriate for your community?	
What is your connection to the specialist organisation/s in the response and healing sector?	

➔ *Check out Section 6 for more resources on violence prevention in ethnically diverse communities*

Section 3:
Community readiness

In this section you will learn about:

- the community readiness model
- the dimensions of community readiness
- the community mobilisation assessment.

Community readiness

> ***Community readiness can be understood by how prepared your community is to take action on an issue*** (48).

Understanding how ready your community is to make change is an important aspect of planning an effective community mobilisation initiative (14). Matching your project to the level of readiness in your community means that you can target your approach and resources effectively.

It is important to start where your community is at on these issues – jumping ahead or wishing they were further along the change journey will be ineffective and may create negativity around the work. Change can be slow, but working at the pace of your community is key to sustainable change.

"The most transformative part of the toolkit for us was the Community Readiness Assessment Tool. It helped us uncover where our community truly stood, not just in awareness, but in willingness to act. That clarity allowed us to meet people where they were, mobilize communities, and embed child sexual violence prevention within our existing community structures. It turned conversations into commitment".
(Community Partner)

The community readiness assessment model

The community readiness assessment model is a great tool for planning new initiatives and tracking change over time. It helps communities move forward by:

- measuring a community's readiness levels on several dimensions to understand where we need to focus our initial efforts
- helping to identify our community's weaknesses and strengths, and the obstacles we are likely to meet as we move forward
- developing appropriate actions that match our community's readiness levels
- working within our community's culture to come up with actions that are right for our community
- aiding in securing funding, cooperating with other organisations, working with leadership, and more (48, p. 5, 52, 53).

One result of a community readiness assessment is identifying the stage of community readiness for your community on FVSV prevention at that time (see Figure 10).

Figure 10 Stages of community readiness.

Readiness levels for an issue can increase and decrease over time. The amount of time it takes to increase readiness varies in every context by the intensity and appropriateness of community efforts. Readiness is impacted by external events such as an incident of family violence which creates more focus on the issue.

➔ ***Check out Section 6 for resources on community readiness, community-friendly step-by step guides to data collection, and and evaluation.***

Here is a brief explanation of each stage:

Stage	Description	Example
Stage 1: No Awareness	• The community and leadership see no issue. • No knowledge, concern, or resources exist.	"Kids drink and get drunk."
Stage 2: Denial/ Resistance	• The issue is dismissed or seen as unsolvable.	"We can't (or shouldn't) do anything about it!"
Stage 3: Vague Awareness	• A few community members have at least heard about issue/s, but know little about them. • Some acknowledge the issue but lack motivation to act. • Limited knowledge and resources exist.	"Something should probably be done, but what? Maybe someone else will handle it."
Stage 4: Preplanning	• A few community members have at least heard about issue/s, but know little about them. • Some acknowledge the issue but lack motivation to act. • Limited knowledge and resources exist.	"This is important. What can we do?"
Stage 5: Preparation	• Most people know about the issue. • Community members have basic knowledge about causes, consequences, and signs. • The attitude in the community is – we are concerned about this and we want to do something about it • Leadership actively supports action. • Some resources are secured, and planning begins.	"I will meet with our funder tomorrow."
Stage 6: Initiation	• Community members have basic knowledge about the issue and are aware that the issue occurs locally. • The community takes responsibility and starts acting. • Leadership plays a key role in planning, developing, and/ or implementing new, modified, or increased efforts. • Resources are obtained and/or allocated.	"This is our responsibility; we are now beginning to do something to address this issue."
Stage 7: Stabilisation	• Community members have more than basic knowledge about the issue. • Strong community involvement. • Leadership ensures long-term efforts. • Resources are secured for sustainability.	"We have taken responsibility."
Stage 8: Confirmation/ Expansion	• High community support and participation. • Leadership plays a key role in expanding and improving efforts. A considerable part of allocated resources is expected to provide continuous support. • Community members are looking into additional support to implement new efforts.	"How well are our current programmes working and how can we make them better?"
Stage 9: Community Ownership	• Efforts are deeply embedded in the community. • Community members have detailed knowledge about the issue. • Leadership is continually reviewing evaluation results of the efforts and is modifying financial support accordingly. • Diversified resources and funds are secured, and efforts are expected to be ongoing.	"These efforts are an important part of the fabric of our community."

Figure 11 Community readiness stages (48, pp. 7-9).

The five dimensions of community readiness

Community readiness is composed of five dimensions or aspects that can help guide the community in moving their readiness levels forward. These dimensions of community readiness are:

1. **Community knowledge of efforts:** How much does the community know about the current programmes and activities?
2. **Leadership:** What is the leadership's attitude toward addressing the issue? (e.g., FVSV)?
3. **Community climate:** What is the community's attitude toward addressing the issue?
4. **Community knowledge of the issue:** How much does the community know about the issue?
5. **Resources:** What are the resources that are being used or could be used to address the issue?

Each dimension can be at a different readiness stage. For example, the community readiness might look like:

Dimension	Readiness stage
Knowledge of efforts	Vague awareness
Leadership	Denial/resistance
Community climate	Denial/resistance
Knowledge of efforts	Vague awareness
Resources	Planning

A full community readiness assessment takes some time and resourcing which may not be a realistic for your initiative. However, a brief assessment is a quicker way to run a collective community assessment that is practical and can be part of the process of mobilising your community.

How to conduct a brief assessment

If your community is not able to conduct a full assessment, you can estimate your community readiness levels by conducting a brief assessment using the following procedure. You may choose to do this in a variety of settings – as an online survey, face-to-face in a group setting, or through email. The procedures may be somewhat different depending on the method of delivery (48).

1. Select respondents – choose at least 10 key community members.
2. Define the issue – clearly explain the issue and community scope. Provide a form or space for respondents to record scores (e.g., 1-10).
3. Prepare your questions – the questions are organised by five dimensions and may use a scale 1-10 (e.g., how much of a concern is the FVSV to your community with 1 being – not a concern at all and 10 being – a very great concern; why?).
4. Explain the rating process – ask respondents to rate the current state of the community (not their ideal vision). Emphasise that there are no "good" or "bad" scores.
5. Present the rating scale – ensure they understand the issue and community context. Respondents should score individually, without discussion.
6. Repeat for each dimension.
7. Optional: gather written explanations – ask respondents to explain their scores using interview probing questions.

Scoring methods

- Group setting:
  - Each person writes their score on a board (no discussion).
  - Individuals explain their score.
  - The group discusses for up to 15 minutes and reaches a consensus score.
  - Repeat for all dimensions.
- Non-group setting:
  - Average the scores across respondents.
  - Summarise written comments for insights.
  - These form your final community readiness scores (48).

The community mobilisation assessment

Now that you have assessed your community's readiness, you can look at community mobilisation and identify strengths to build on. Community mobilisation and community readiness are interconnected. The tool in Figure 12 below below helps you understand community strengths across the seven key aspects of community mobilisation introduced in Section 1. It's time to better understand your community strengths and use this insight to take action.

To gain a deeper understanding of your community's strengths in mobilisation, consider using the tool alongside the community readiness assessment model. This tool helps measure community strengths across the seven key aspects of community mobilisation introduced in Section 1.

Using the tool below think about the seven key aspects around the image and plot where you think your community's strengths are that could be built upon.

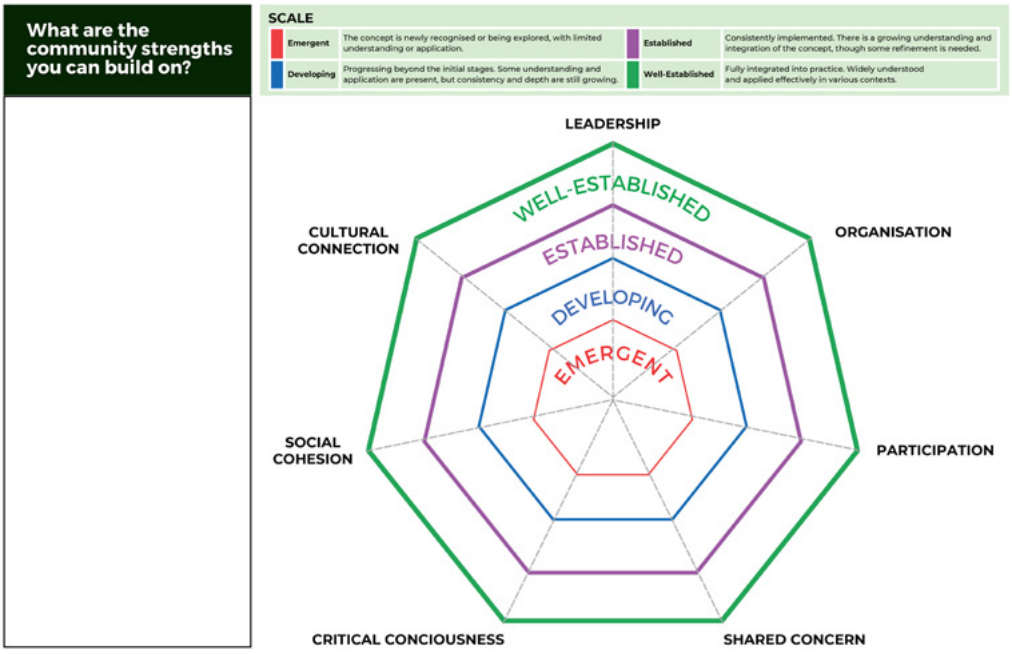


Figure 12 Community strengths assessment.

By assessing these community strengths alongside community readiness you can develop a clearer picture of where your community stands and determine the best starting point for mobilising efforts to prevent FVSV.

Where to go from here?

By assessing the five dimensions of community readiness alongside community strengths in mobilisation, you now understand:

- where the community stands
- its strengths and weaknesses in mobilisation to prevent FVSV
- obstacles to action/s
- available resources and limitations
- appropriate next steps based on community readiness and strengths.

Now, it's time to plan an action and develop an initiative in the next section, and you'll learn how to do this effectively.

Activity: Assessing your community's readiness and strengths in mobilisation

Now that you've explored the community readiness and assessment models/tools, take a moment to reflect on your own community.

1. Consider the nine stages of community readiness. Identify which stage best represents your community for each of the five dimensions of readiness (current stage, not your ideal). Record your response in the table.
2. Using markers, plot your community's current level for each of the seven key aspects of mobilisation on the scale. Then, connect the dots on the web-shape diagram.
3. Use your two assessments and fill in the table to deepen your understanding and develop actionable insights.

Dimension of community readiness	What stage of readiness is your community at?	What factors contribute to this?	What are the strengths?	What are the weaknesses?	How can you build on strengths?
1. Community knowledge of efforts	e.g., vague awareness				
2. Leadership	e.g., denial/ resistance				
3. Community climate					
4. Knowledge of the Issue					
5. Resources					

Section 4:
Planning your community mobilisation initiative

In this section you will learn about:

- planning your initiative – understanding a co-design approach and process
- building evaluation into your practice.

"One of the most effective tools in the community mobilisation toolkit was creating a prototype to give our initiative a concrete and tangible presence. We designed a strong green tree as our prototype, symbolising our women, and invited them to share the characteristics and qualities they would like to have in their lives by writing them on the tree's leaves. We then facilitated a discussion around what trees need to grow—such as water and soil—and explored the resources and support our women need to thrive." (Community Partner)

Plan an initiative – a co-design approach

If you have developed and run community projects before, use the processes you know that work for your community. If you are new to community mobilisation or want to try a different approach, here are some suggested steps to plan your community mobilisation initiative using a co-design approach as an example.

If you already have some ideas for an initiative, great! Hold these ideas loosely and test these out using the evidence and community input to inform your next steps. Agreeing on an idea too early can result in great ideas being missed.

> Co-design brings community into the design and decision-making processes from start to finish, as part of a shared team, combining many perspectives to make sure the outcome works for everyone. The co-design process can be simplified down into four key phases. Community should be involved from the beginning and engaged throughout in a way that is safe and comfortable for them.

Phases of the co-design process

1. Explore
Connect with community and define your evidence and opportunity

2. Generate ideas
Generate and select an initiative idea with your community

3. Develop, test, refine
Evolve your initiative through testing and feedback

4. Launch
Bring your initiative to life and continually improve based on feedback

1. Explore
Connect with your community and define your evidence and opportunity

A. Building relationships

- Build relationships within your community and take time to strengthen existing relationships.
- Form a project team to lead the co-design process.
- Connect with people who have the knowledge and expertise you need.
- Connect with others doing similar work to learn together as your initiatives develop.
- Set up ways you will communicate with people so they can stay up to date and be involved throughout the process.
- Establish shared principles, values, and communication approaches from the start to ensure consistency in planning and implementation.
- Agree on how to manage conflict early on to help maintain respectful and healthy relationships. A clear conflict resolution process models safe and peaceful problem-solving and ensures issues are handled constructively. Consider both the processes and people who will facilitate resolution.

B. Identify the evidence base

- Gather existing information, data, and stories related to FVSV to review – note evidence included in Section 2 of this toolkit.

Assess this information with your project team and discuss the stories it tells. Take note of any trends and patterns, themes, behaviours, and challenges and record these. Here is a short guide[2] to theme finding. You may also want to develop design principles[3] to summarise key factors that will help guide your initiative development.

- Fill information gaps by hosting community conversations, connecting with people with knowledge and expertise, or doing research.
- Alongside your community, explore some of the big issues facing your community right now.

C. Define opportunity areas with community

- Alongside the community, define some opportunity areas that have surfaced through reviewing the evidence base. Framing the opportunities as 'How Might We' (HMW) questions can help set you up well for the next phase. Try this resource[4] to guide you in developing HMWs.
  - Ensure you can provide a safe, supported space where people feel comfortable thinking and learning together.
  - Build on strengths of the community organisations and community members who are involved.
  - Understand the readiness of your community. How ready is your community for change and what level of change will suit them? (see Community Readiness in Section 3).
- Pick one HMW/opportunity area you all want to explore further and take to the next phase. Consider your timeframe, resources, and any other constraints.

D. Identify the theory of change

- With this evidence base in focus and your opportunity area defined, what is your theory of change? Use this resource to learn more about Theory of Change[5].

A theory of change is a written document and/or a diagram that describes how change is expected to happen on an issue. Theory of change draws on evidence, expertise, experience, and critical thinking to develop a clear rationale for an initiative.

Developing a theory of change for your community mobilisation initiative strengthens effectiveness. It should draw on evidence to address the risk and protective factors for FVSV (14, 31, 49, 50).

To develop shared understanding and collective ownership of the work, its recommended that community members and practitioners who will be participating in the initiative are included in developing the theory of change.

Note: This step is closely tied to step C. If you cannot define your theory of change, you may need to revisit and redefine your opportunity area.

➔ ***Check out Section 6 for resources on community readiness, community-friendly step-by step guides to data collection, and evaluation.***

2 www.designkit.org/methods/find-themes.html
3 www.designkit.org/methods/design-principles.html
4 www.aucklandco-lab.nz/resources-summary/how-might-we
5 www.designkit.org/methods/explore-your-theory-of-change.html

2. Ideate

Generate and select an initiative idea with your community

A. Community idea generation

Set your community up to generate ideas in response to your selected opportunity area. These ideas should be big and ambitious ideas. Don't worry about barriers just yet.

- To support this:
  - complete *Community Mobilisation Within Your Community Activity* in Section 1
  - complete *Family Violence and/or Sexual Violence Prevention Activity* in Section 2
  - consider the range of *Protective Factors* in Section 2 as good prompts for where your ideas could focus.
- Use this IDEO resource[6] or the SCAMPER exercise (below) to help you and your community generate a broad range of ideas to choose from.

B. Identify the most promising idea

- With your community, choose one idea that you want to take forward to the next phase. Consider your theory of change and the feasibility of bringing your idea to life.
- Here are some exercises you can use to decide on one idea. You might choose just one or you may use one after another to help you choose one idea:
  - Go/no-go: rule out the ideas which are impractical, ineffective, or impossible to achieve based on your project constraints.
  - Dot-voting: every participant is given three dot stickers to vote for their three favourite ideas from those that remain (or multiple votes for a single idea they really like).
  - Scorecards: the top few ideas are then scored on criteria around desirability, feasibility, and viability (DVF). The highest scoring idea is the one that is developed further in the next stage. Here is a resource for more info on the DVF model[7] and how to approach this activity.

Activity: Idea generator

- SCAMPER is a tool to help you to come up with new ideas based on an existing process or solution by looking through different lenses. There are seven different lenses in the SCAMPER method:
- **Substitute:** What part in my process or solution can be substituted and for what?
- **Combine:** How can I combine two or more parts of my process or solution to achieve a different process or solution?
- **Adapt:** What can I adapt in my process or solution?
- **Modify:** What can I modify (change) in my process or solution?
- **Put to another use:** How can I put the thing to other uses? What are new ways to use the process or solution?
- **Eliminate:** What can I eliminate or simplify in my process or solution?
- **Rearrange:** How can I change, reorder, or reverse the process or solution? What would I do if I had to do this process in reverse?

6 www.designkit.org/methods/brainstorm-rules.html

7 medium.com/innovation-sweet-spot/desirability-feasibility-viability-the-sweet-spot-for-innovation-d7946de2183c

3. Develop, test, refine

Evolve your initiative through testing and feedback

A. Developing your initiative idea

- The ideas that have been selected are then developed by the project team with the help of the community.

Together you can create prototypes examples/drafts to bring the ideas to life. Do this by sketching or building your ideas to give them more detail and work through any issues. Here are some Storyboarding[8] and Role-Play[9] guides.

B. Testing your idea

- Testing early in the process might involve the co-design group presenting their prototype to someone external from the process for feedback. Here is a prototype report card[10] to prepare for this.
- Later in the iteration process, the prototype might be trialled in a live context for feedback with end users or an evaluation partner that could be involved in an early evaluation of the solution.
- Test your approach against your theory of change, design principles, and evidence base.

C. Making changes based on feedback

- Make changes and refine your initiative based on the learnings from the test round.
- Once refined, go back out and test to allow for further refining.
- This process of testing and iterating the prototype continues until the risks and kinks in the prototype are smoothed out and it is ready to launch.

4. Launch

Bring your initiative to life and continually improve based on feedback

A. Develop a launch plan

- Develop a plan which includes the key milestones you need to deliver to reach implementation. It can help map it out in practical terms using a guide such as this.[11]

B. Reflect, improve, repeat

- Invite feedback and create space for learning. Be curious and open and ask community members what they think of the initiative at regular intervals.
  - What's working well? What's not? Why?
  - Create safe avenues for feedback to be collected.
- Hold project team debriefs at regular intervals to review the feedback and reflect on what changes need to be made and how.

8 www.designkit.org/methods/storyboard.html
9 www.designkit.org/methods/role-play.html
10 design-kit-production.s3-us-west-1.amazonaws.com/Design+Kit+Method+Worksheets/DesignKit_prototypereportcard_worksheet.pdf
11 miro.com/project-management/what-is-a-release-plan/

Building evaluation into your practice

At times, funders will complete an evaluation of your initiative, or you may be able to lead your own evaluation. Whether or not a funded evaluation is in place for your initiative, you can develop your **evaluative thinking** – using critical thinking and curiosity to continuously test, learn, and adapt. You don't need to be an evaluator to use these skills.

Collaborating with community members and programme participants can help guide the evaluation process. Community input can help you consider how your evaluation design and interpretations may be impacted based on lived experiences.

Evaluation allows you to:

- Demonstrate the contribution and impact of your initiative
- Improve your overall plan and initiative
- Help make adjustments to your approaches during implementation of the initiative
- Maintain accountability to stakeholders
- Make the case for funding
- Ensure your programme is affecting participants and communities fairly.

Asking questions Good questions create openings, highlight assumptions, values, common ground, and show differences that, if not dealt with, could slow development.	**Facilitating** Good facilitation includes active listening, naming assumptions, clarifying, ensuring diverse voices are heard, and that the conditions in the room support learning.	**Sourcing information** Bringing information to the group, doing research around promising practices, alerting the group to a complementary initiative, or identifying a helpful resource to support learning.
Pausing There are times when a pause in the action is very helpful. Take a pause to clarify, allow thoughtful consideration, discussion or celebration.	**Reminding** Staying on track by reminding the group of the values and aims you have agreed to. Keeping track of past failures and successes so that the group can build on the learning that has gone before and inform new members of the group.	**Match-making** Connecting the group with people, organisations, resources, or ideas. Connect to social resources available (e.g. existing connections, potential champions or door-openers) that you are not yet leveraging.

Figure 13 Key elements for evaluating your practice (51)

To help you start planning an evaluation, you can download this evaluation plan checklist.[12]

12 vetoviolence.cdc.gov/apps/violence-prevention-practice/assets/pdf/evaluation-plan-checklist-508_0.pdf

Section 5:
Well-being and collective care

In this section you will briefly learn about:

- collective care and well-being
- examples of good practices.

What is collective care and well-being?

To work authentically in violence prevention, we need to stay accountable to ourselves and the communities we serve (54). Collective care and well-being are essential in social justice and FVSV prevention work. Unlike self-care, which focuses on individual well-being, collective care is about communities supporting one another to sustain long-term advocacy and prevention work. It recognises that healing, resilience, justice, and non-violence are interconnected and must be nurtured collectively.

Why collective care matters?

Working in violence prevention can be emotionally demanding. Prioritising collective care helps prevent burnout, strengthens relationships, and fosters a culture where well-being is valued as much as action/s.

Examples of good practices

- Creating safe spaces – regular check-ins, supervision, debriefs, and spaces that are safe for open dialogue within teams and communities.
- Sharing responsibility – distributing tasks equitably to prevent overburdening individuals.
- Cultural and community practices – incorporating indigenous, spiritual, and/or cultural models that centre collective well-being. Some cultural models[13] of health/well-being include Te Whare Tapa Whā, Te Wheke, The Fonua Model.
- Healing practices – engaging in mindfulness, reflective practices, and creative outlets to sustain long-term engagement.

By embedding collective care and well-being into violence prevention efforts, we strengthen community mobilisation and collective actions, making them more sustainable and meaningful.

Can you identify additional good practices that would be relevant to your community?

Reflection: Conversations about well-being and collective care

Here some questions to explore yourself and with your community or organisation about well-being and collective care:

- what does collective care mean to you and your community?
- how do you understand your own well-being?
- what people, places, and practices contribute to your well-being?
- what have you got in place to support well-being and collective care?
- how do you understand well-being and collective care in relation to service to your communities?
- how do you contribute to social movements in healthy ways that demonstrate collective care?

13 manaake.health.nz/supporting-your-child/building-blocks-for-wellbeing/cultural-models-of-wellbeing

Section 6:
Resources

This section presents additional and more in-depth resources on:

- community mobilisation
- intersectionality
- violence prevention in ethnically diverse communities
- theory of change
- community readiness, evaluation, and assessing change.

Community mobilisation resources

Community Mobilisation – Te Whakaoreore Hapori is one of eight evidence-based prevention strategies within the emerging primary prevention approach for Aotearoa New Zealand outlined in Te Aorerekura, the national strategy on family violence and sexual violence (6) (see Figure 14).

The Primary Prevention System model shows that long-term change requires action across eight evidence-based areas. The model is underpinned by Te Tiriti O Waitangi. The dual framing creates space for both tangata whenua and tangata tiriti worldviews, which are distinct, yet mutually reinforcing.

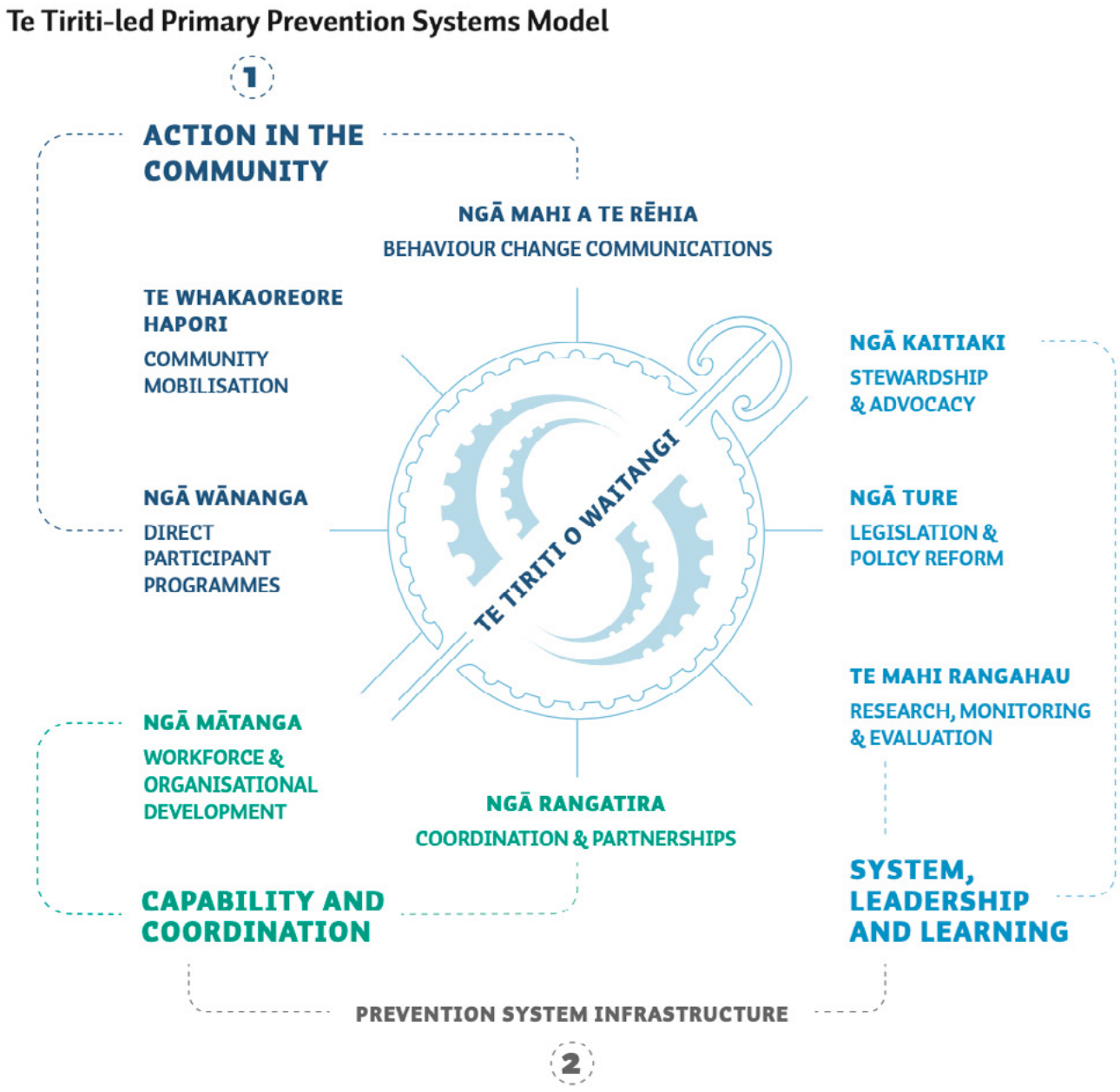


Figure 14 The emerging primary prevention system approach for Aotearoa (13).

➔ ***Check out these webinars on community mobilisation from Aotearoa New Zealand***

- Introduction to community mobilisation youtube.com/watch?v=h2OewpGhqsI
- A panel discussion on developing your community mobilisation initiative youtube.com/watch?v=EBlrWztiM-o

International community mobilisation toolkits

Below are links to comprehensive toolkits developed internationally. Use them in any way that works for you – as a step-by-step guide, as inspiration – and adapt as suits.

Sasa! Raising Voices Uganda

SASA! is an evidence-based approach that has shown that community mobilisation can affect attitudes and behaviours and reduce rates of intimate partner violence (18).

Developed with a combination of theory, practice, and relentless optimism, SASA! encourages communities around the world to personally and collectively use our power to create safe, violence-free communities for women. raisingvoices.org/women/sasa-approach/

raisingvoices.org/resources/the-set-up-guide-is-the-what-why-and-how-to-get-started-with-sasa-together/

Preventing violence against women: A primer for African women's organisations

raisingvoices.org/resources/preventing-violence-against-women-a-primer-for-african-womens-organizations/

Creative Interventions

Creative Interventions works to place knowledge and power among those most impacted by violence and build resources for community-based responses and transformative justice.

creative-interventions.org/toolkit/

Risk and protective factors

What ethnically diverse communities say about risk factors and protective factors

In July 2023, the ECVP team held several community engagement meetings nationwide. The aim was to listen and learn directly from ethnically diverse communities about the types of FVSV present in communities.

We sought insights into the interpersonal and systemic risk factors contributing to these issues, and effective strategies to address risks and prevent FVSV in ethnically diverse communities. These engagements and the input from communities have greatly influenced the ECVP programme of work.

Figure 15 below summarises what ethnically diverse communities shared about systemic and interpersonal risk factors during the ECVP's July 2023 community engagement session.

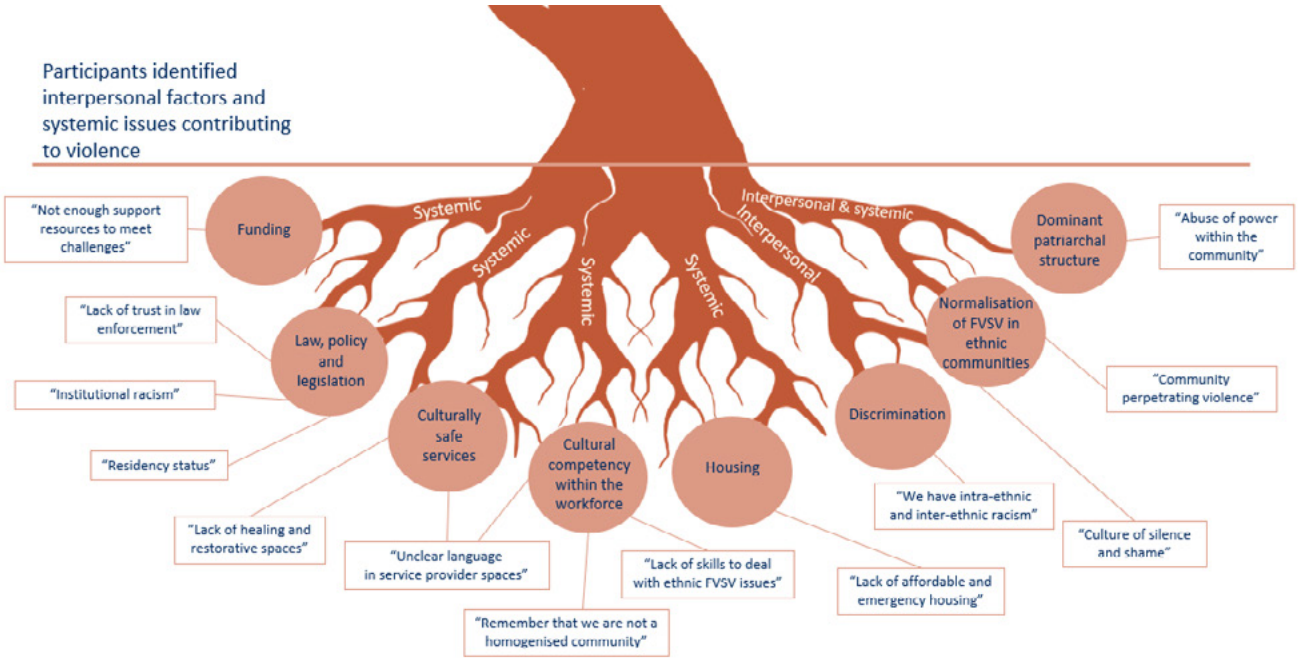


Figure 15 Systemic and interpersonal risks: Insights from community voices

Literature review

What do we know about FVSV prevention in Aotearoa New Zealand's ethnic communities and what are the gaps in the evidence?[14]

Protective factors specific to ethnically diverse communities are not well developed in the literature. However, Figure 16 shows key protective factors developed in Aotearoa New Zealand.

Figure 16 The factors that protect against FVSV (41).

Intersectionality

Taking an intersectional approach is important to understand the complex relationships between risk factors and protective factors for FVSV. Intersectionality contributes to understanding of peoples' lived experiences of FVSV and supports effective prevention initiatives in ethnically diverse communities.

Resource links:

- The National Strategy to Eliminate Family and Sexual Violence – Te Aorerekura (pp. 10-12)
- The Family Violence Entry to Expert Framework – tepunaaonui.govt.nz/assets/Workforce-Frameworks/Family-Violence-Entry-to-Expert-Capability-Framework-May-2022.pdf (pp. 34-36)
- Intersectionality Matters: A guide to engaging immigrant and refugee communities in Australia mcwh.com.au/intersectionality-matters-a-new-resource-for-preventing-violence-against-women

14 www.msd.govt.nz/documents/about-msd-and-our-work/work-programmes/initiatives/family-and-sexual-violence/a3-summary-of-rapid-review-of-evidence-on-violence-prevention-among-ethnic-communities.pdf

Violence prevention in ethnically diverse communities

The Australian Multicultural Centre for Women's Health identified these essential ingredients for meaningful violence prevention initiatives in refugee and migrant communities (42).

1. Migrant and refugee communities have leadership and ownership of violence prevention strategies in their communities	**2.** Organisations and individuals role model gender equitable, collaborative, and respectful relationships	**3.** Migrant and refugee women's leadership in violence prevention is centred and supported
4. Violence prevention strategies focus on institutions, systems, and policies	**5.** Intersecting forms of social inequality and disadvantage are seen as central and not additional to prevention strategies	**6.** Prevention initiatives contribute to new evidence and better outcomes

In July 2023, the ECVP team at MSD held hui across the country with ethnically diverse communities. The figure below highlights their insights on what is needed to prevent FVSV.

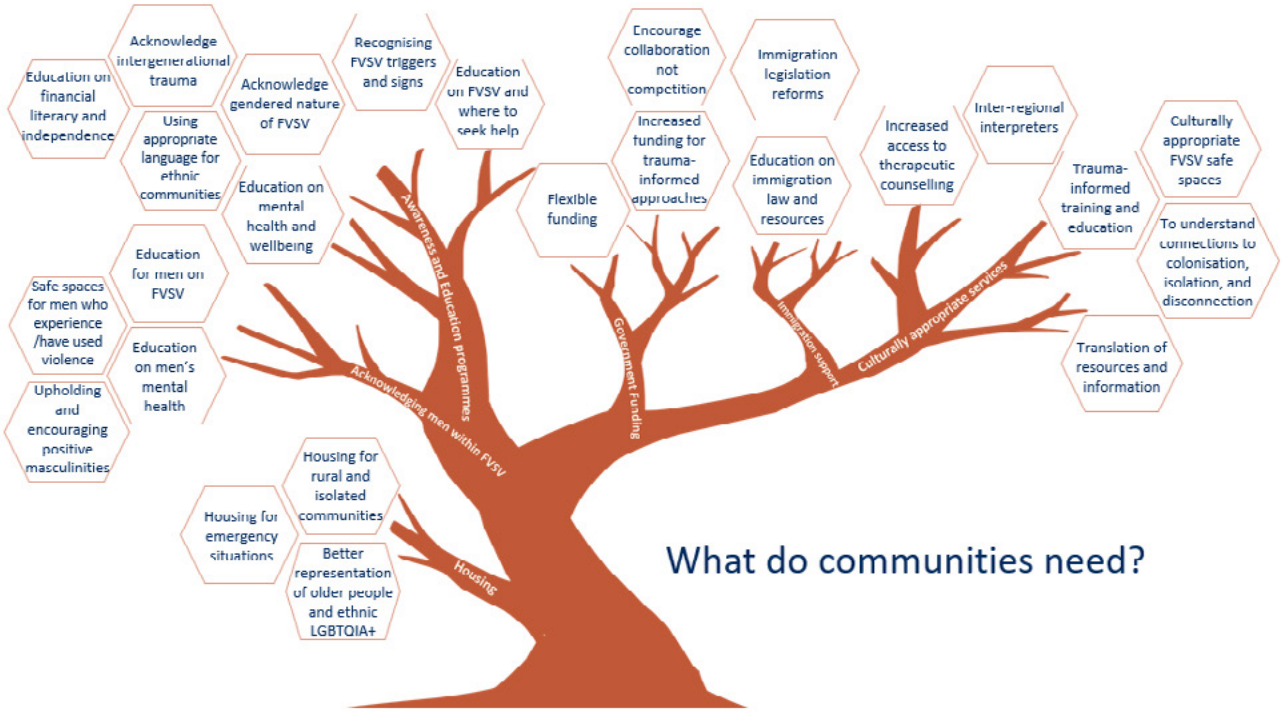


Figure 17 Summary of the needs expressed by ethnically diverse communities regarding FVSV prevention during the ECVP's July 2023 community engagement sessions for the ECVP programme (32).

Additional resources

Resources and research on FVSV in ethnically diverse communities on the New Zealand Family Violence Clearinghouse website nzfvc.org.nz/national-strategy-engagement/migrant-refugee-ethnic-communities

Research report by CARE Center for Culturally-Centered Approach to Research and Evaluation (2022). Community-led culture-centered prevention of FVSV carecca.nz/research/care-projects/care-jvbu-project-violence-prevention-needs-in-diverse-communities/

Theory of change

A theory of change is a written document and/or a diagram that describes how change is expected to happen on an issue.

Here is a useful guide to building a theory of change from The Aspen Institute Roundtable on Community Change – tailor your approach to suit theoryofchange.org/pdf/TOC_fac_guide.pdf

Community readiness, evaluation, and assessing change

- tec.colostate.edu/wp-content/uploads/2018/04/CR_Handbook_8-3-15.pdf
- What Works – an excellent Aotearoa New Zealand resource and step-by-step guides for data collection and evaluation, especially for small community groups from The Tangata Whenua, Community and Voluntary Sector Research Centre whatworks.org.nz/
- CDC Violence Prevention in Practice – evaluation tools and resources vetoviolence.cdc.gov/apps/violence-prevention-practice/evaluation#!/

Glossary

Word	Meaning
Capability development	Developing skills,knowledge, and behaviours.
Community mobilisation	Community mobilisation is a long-term approach that builds capability within communities to affect change (see Section 1).
Critical consciousness	Using dialogue/conversation to increase understanding of lived experiences,issues, and solutions.
Developmental	Supporting action with ongoing learning and reflection to build understanding and continuously improve. Early Intervention: or secondary prevention describes initiatives designed to stop early signs of abuse from escalating, and targeted interventions to shift attitudes and behaviours in ways that minimise immediate and long-term risk. Reference: What is primary prevention? – connecting across the continuum from prevention to response. (2023). In safeandequal.org.au. Safe and Equal. safeandequal.org.au/wp-content/uploads/Safe-and-Equal-What-is-Primary-Prevention-240223.pdf
Early Intervention	Early Intervention: or secondary prevention describes initiatives designed to stop early signs of abuse from escalating and targeted interventions to shift attitudes and behaviours in ways that minimise immediate and long-term risk. Reference: What is primary prevention? – connecting across the continuum from prevention to response. (2023). In safeandequal.org.au. Safe and Equal. safeandequal.org.au/wp-content/uploads/Safe-and-Equal-What-is-Primary-Prevention-240223.pdf
Ethnic communities	Aotearoa New Zealand's ethnic communities are an incredibly diverse group, representing over 200 ethnicities and speaking over 170 languages. Ethnic communities include anyone who identifies their ethnicity as: African; Asian; Continental European; Latin-American; and Middle-Eastern (55). Ethnic communities include migrants, former refugees, long-term settlers, and those born in Aotearoa (6).
Evidence	Community and academic research, data, information, reports.

Word	Meaning
Family violence	Family violence is against the law in New Zealand. It is a pattern of behaviour that coerces, controls, or harms within a close personal relationship (6, 56). Family violence includes intimate partner violence, elder abuse, child abuse, dating violence, stalking, and violence towards another family or whānau member, including child-to-parent violence. It can be physical, sexual, psychological, emotional, spiritual, and involve economic abuse or exploitation. Family violence often involves fear, intimidation, isolation, and loss of freedoms for people impacted by. It includes children being exposed to violence between adults or subject to abuse or neglect themselves. For older people, disabled people, children, or people dependent on others, family violence can also include not providing care, or preventing access to medicines or other care required support. Family violence in ethnically diverse communities can include immigration-related abuse, dowry-related violence, forced and under-age marriage, and female genital mutilation (6, 57). For more see ECVP's www.msd.govt.nz/documents/about-msd-and-our-work/work-programmes/initiatives/family-and-sexual-violence/msd-our-culture-our-pride-no-excuse-fo-abuse-english-2023.pdf booklet.
Intersectionality	Intersectionality is a way of seeing or analysing the dynamics of power and social inequality in our society (42).
Practitioner	A person who is actively engaged in work related to FVSV, whether in a paid or unpaid capacity. Practitioners play a key role in prevention, advocacy, support, and intervention within the FVSV space.
Primary prevention	Primary prevention is a public health approach that works to prevent harm by addressing the root causes, risk, and protective factors associated with harmful behaviour (58, 59). The emphasis is on preventing new harms by changing the social conditions, structures, and norms that perpetuate harm, and on building protective factors for safety, well-being and resilience.
Protective factor	Things that make it less likely that people will use or experience violence, or that increase their resilience when they are faced with risk factors. Examples of protective factors are: inclusive social norms and a safe physical environment (Adapted from 24).
Risk factor	Things that make it more likely that people will use or experience violence. Examples of risk factors are: gender and economic inequalities; rigid social norms about what is "masculine" and "feminine"; acceptance of violent behaviour (Adapted from 24).
Secondary prevention	Secondary prevention takes place immediately after a violent or abusive event. It deals with the short-term consequences and focuses on the immediate needs of the victim – such as emergency services or medical care (59).

Word	Meaning
Sexual violence	Sexual violence (also known as mahi tūkino, sexual abuse, sexual assault, or sexual harm) is any sexual behaviour towards another person without that person's freely given consent. Child sexual abuse includes any exposure of a child under 16 to sexual acts or sexual material. Sexual violence includes sexual violation, incest, rape, assault, exploitation, trafficking, grooming, sexual harassment, and any unwanted kissing or touching. Sexual violence also includes behaviour such as forcing someone to watch pornography or taking or sharing images of children for sexual purposes, non-consensual sharing of sexual images, and other forms of digital and online sexual harm through social media (summarised from TOAHNNEST Tauiwi caucus 2021, cited in 6).
Te Aorerekura	Aotearoa is New Zealand's national strategy to eliminate FVSV.
The socioecological model	The socioecological model (60) conceptualises violence as a product of multiple, interacting factors across the individual, relationship, community, institutional/ organisational and societal levels. Effective prevention requires action across all levels to address the risk and protective factors at each level.
Tertiary prevention	Tertiary prevention is a long-term approach after a violent event has occurred. Efforts may include rehabilitation of the perpetrator, or social services to lessen emotional trauma to the victim and support healing. (59)
Theory of change	A theory of change describes how an initiative is expected to make change on FVSV over time.

References

1. Michau, L. (2012). Community Mobilization: Preventing Partner Violence by Changing Social Norms. Bangkok, Thailand: UN Women.
2. Trewartha, C. (2020). Measuring Community Mobilisation. Auckland: NZ: University of Auckland.
3. Trewartha, C. (2020). He Awa Whiria, braiding the rivers of kaupapa Māori and Western evidence on community mobilisation. Psychology Aotearoa, 12(1): 16-21.
4. Lippman, S.A., Maman, S., MacPhail, C., Twine, R., Peacock, D. and Kahn, K. et al. (2013). Conceptualizing community mobilization for HIV prevention: Implications for HIV prevention programming in the African context. PLoS One, 8(10): 1-13.
5. Lippman, S.A., Neilands, T.B., Leslie, H.K., Maman, S., MacPhail, C. and Twine R. et al. (2016). Development, validation, and performance of a scale to measure community mobilization. Social Science and Medicine, 157: 127-37.
6. Te Kāwanatanga o Aotearoa – New Zealand Government. (2021). Te Aorerekura, The Enduring Spirit of Affection: The National Strategy to Eliminate Family Violence and Sexual Violence. Wellington, NZ: The Board for the Elimination of Family Violence and Sexual Violence.
7. PricewaterhouseCoopers (PwC), Our Watch, VicHealth. (2015). A High Price to Pay: The Economic Cost for Preventing Violence Against Women. Melbourne, Australia: PwC Australia.
8. PricewaterhouseCoopers (PwC). (2016). Investing in Primary Prevention of Family Violence: Discussion Paper. Melbourne, Australia: Victorian Department of Premier and Cabinet.
9. Contreras-Urbina, M., Heilman, B., Von Au, A.K., Hill, A., Puerto Gómez. M. and Zelaya, J. et al. (2016). Community-Based Approaches to Intimate Partner Violence: A Review of Evidence and Essential Steps to Action. Washington, DC: World Bank Group.
10. Michau, L. (2007). Approaching old problems in new ways: Community mobilisation as a primary prevention strategy to combat violence against women. Gender & Development, 15(1): 95-109.
11. Michau, L., Horn, J., Bank, A., Dutt, M. and Zimmerman, C. (2014). Prevention of violence against women and girls: Lessons from practice. The Lancet, 385(9978), 1672–1684. Retrieved from: https://doi.org/10.1016/S0140-6736(14)61797-9
12. VAWnet: The National Online Resource Center on Violence Against Women. (2008). Mobilizing Communities to Prevent Domestic Violence. Retrieved from: www.vawnet.org
13. Accident Compensation Corporation (ACC). (2021). Manini Tua Summary. Wellington, NZ: ACC.
14. Trewartha, C. (2010). It is OK to Help: Effective Community Mobilisation to Prevent Family Violence [Dissertation]. Auckland, NZ: Faculty of Medical and Health Sciences, University of Auckland.
15. Watson-Thompson, J., Fawcett, S.B. and Schultz, J.A. (2008). A framework for community mobilization to promote healthy youth development. American Journal of Preventive Medicine, 33(3S): 72-81.
16. Wolfe, D.A. and Jaffe, P.G. (1999). Emerging strategies in the prevention of domestic violence. Domestic Violence and Children, 9(3): 133-44.
17. VicHealth. (2006). Preventing Violence Before it Occurs: A Framework and Background Paper to Guide the Primary Prevention of Violence Against Women in Victoria. Carlton South, Victoria, Australia: VicHealth.
18. Abramsky, T., Devries, K., Kiss, L., Nakuti, J., Kyegombe, N. and Starmann, E. et al. (2014). Findings from the SASA! Study: A cluster randomized controlled trial to assess the impact of a community mobilization intervention to prevent violence against women and reduce HIV risk in Kampala, Uganda. BMC Medicine, 12(1): 122. Retrieved from: https://doi.org/10.1186/s12916-014-0122-5
19. Metzger, N. and Woodley, A. (2010). Report on Giving, Receiving and Seeking Help: The Campaign for Action on Family Violence. Wellington, NZ: Ministry of Social Development.

20. Budde, S. and Schene, P. (2004). Informal social support interventions and their role in violence prevention: An agenda for future evaluation. Journal of Interpersonal Violence, 19(3): 341-55.
21. Bowen, L.K., Gwiasda, V. and Brown, M.M. (2004). Engaging community residents to prevent violence. Journal of Interpersonal Violence, 19(3): 356-67.
22. World Health Organization (WHO), & London School of Hygiene and Tropical Medicine (LSHTM). (2010). Preventing Intimate Partner and Sexual Violence Against Women: Taking Action and Generating Evidence. Geneva, Switzerland: WHO.
23. Simon-Kumar, R. (2019). Ethnic Perspectives on Family Violence in Aotearoa New Zealand (Issues Paper 14). Auckland, NZ: New Zealand Family Violence Clearinghouse, University of Auckland.
24. Wilkins, N., Tsao, B., Hertz, M., Davis, R. and Klevens, J. (2014). Connecting the Dots: An Overview of the Links Among Multiple Forms of Violence. Atlanta, GA: Centers for Disease Control and Prevention and Prevention Institute.
25. World Health Organization (WHO). (2007). Expert Meeting on the Primary Prevention of Intimate Partner Violence and Sexual Violence: May 2-3 2007. Geneva, Switzerland: World Health Organization.
26. Ministry of Social Development (MSD). (2002). Te Rito: New Zealand Family Violence Prevention Strategy 2002. Wellington, NZ: MSD.
27. Heise, L. (2011). What Works to Prevent Partner Violence? An Evidence Overview. London, UK: UK Department for International Development.
28. Wilson, D. (2018). Transforming the normalisation and intergenerational whānau (family) violence. Journal of Indigenous Wellbeing, 1(2): 32-43.
29. Kruger, T., Pitman, M., Grennell, D., McDonald, T., Mariu, D. and Pomare, A. et al. (2004). Transforming Whānau Violence: A Conceptual Framework. Wellington, NZ: Second Māori Taskforce on Whānau Violence.
30. World Health Organization (WHO). (2004). Preventing Violence: A Guide to Implementing the Recommendations of the World Report on Health and Violence. Geneva, Switzerland: WHO.
31. Jewkes, R., Flood, M. and Lang, J. (2014). From work with men and boys to changes of social norms and reduction of inequities in gender relations: A conceptual shift in prevention of violence against women and girls. The Lancet, 385(9977), 1580–1589. Retrieved from: https://doi.org/10.1016/S0140-6736(14)61683-4.
32. Litmus. (2023). Family Violence and Sexual Violence Prevention in Aotearoa's Ethnic Communities: Summary of Community Engagement 9 October 2023. Auckland, New Zealand: Litmus.
33. Auckland Council, Ministry of Social Development, North Shore Family Violence Prevention Network, Te Rito Rodney and Waves Trust. (2016). Working Together to Achieve Whānau Wellbeing in Waitematā. Retrieved from: Waitemata-whanau-wellbeing-v2.pdf.
34. MacKay, M., Vincenten, J., Brussoni, M. and Towner L. (2006). Child Safety Good Practice Guide: Good Investments in Unintentional Child Injury Prevention and Safety Promotion. Amsterdam, The Netherlands: European Child Safety Alliance, Eurosafe.
35. Accident Compensation Corporation (ACC). (2017). Circumstances Surrounding Child Injuries in the Home: An Evidence Scan. Wellington, NZ: ACC.
36. Atlantic Collaborative on Injury Prevention. (2011). The Social Determinants of Injury. Halifax: Canada: Atlantic Collaborative on Injury Prevention.
37. Department of the Prime Minister and Cabinet (DPMC). (2019). Child and Youth Wellbeing Strategy. Wellington, NZ: DPMC.
38. Clark, T., Moselen, E. and Dixon, R., The Adolescent Health Research Group, Lewycka, S. (2015). Sexual and Reproductive Health and Sexual Violence Among New Zealand Secondary School Students: Findings from the Youth '12 National Youth Health and Wellbeing Survey. Auckland, NZ: University of Auckland.
39. Center on the Developing Child at Harvard University. (2010). The Foundations of Lifelong Health are Built in Early Childhood. Cambridge, MA: Center on the Developing Child at Harvard University.
40. Center on the Developing Child at Harvard University. (2015). In Brief: The Science of Resilience.

Cambridge, MA: Center on the Developing Child at Harvard University.

41. Auckland Council, Ministry of Social Development, North Shore Family Violence Prevention Network, Te Rito Rodney and WAVES Trust. (2016). Working Together to Achieve Whānau Wellbeing in Waitematā. Auckland, NZ: Auckland Council.
42. Chen, J. (2017). Intersectionality matters: A guide to engaging immigrant and refugee communities to prevent violence against women. Melbourne, Australia: Multicultural Centre for Women's Health. Retrieved from https://www.mcwh.com.au/wp-content/uploads/Intersectionality-Matters-Guide-2017.pdf.
43. Our Watch. (2017). Putting the Prevention of Violence Against Women Into Practice: How to Change the Story. Melbourne, Australia: Our Watch.
44. Our Watch. (2021). Change the Story: A Shared Framework for the Primary Prevention of Violence Against Women in Australia (2nd ed.). Melbourne, Australia: Our Watch.
45. The White House. (2023). National Plan to End Gender-Based Violence: Strategies for Action. Washington, DC: The White House.
46. Krug, E., Dahlberg, L., Mercy, J., Zwi, A. and Lozano, R. (2002). World Report on Violence and Health. Geneva, Switzerland: World Health Organization. Retrieved from: The world report on violence and health - The Lancet.
47. Hagen, P., Tangaere, A., Beaton, S., Hadrup, A., Taniwha-Paoo, R. and Te Whiu, D. (2021). Innovation Brief October 2021 – Designing for Equity and Intergenerational Wellbeing: Te Tokotoru. Auckland, NZ: The Auckland Co-Design Lab, The Southern Initiative, Auckland Council.
48. Plested, B.A., Edwards, R.W. and Jumper-Thurman, P. (2006). Community Readiness: A Handbook for Successful Change. Fort Collins, CO: Tri-Ethnic Centre for Prevention Research.
49. DeGue, S., Valle, L., Holt, M., Massetti, G., Matjasko, J. and Tharp, A. (2014). A systematic review of primary prevention strategies for sexual violence perpetration. Aggression and Violent Behavior, 19: 346-62.
50. Crawford, S., Lloyd-Laney, M., Bradley, T., Atherton, L. and Bryne, G. (2020). Final Performance Evaluation of DFIDs What Works to Prevent Violence Against Women and Girls Programme. Surrey, UK: UK Department for International Development (DFID), UK Aid.
51. Dozois, E., Langlois, M. and Blanchet-Cohen, N. (2010). DE 201: A Practitioner's Guide to Developmental Evaluation. Montreal, Canada: The J.W. McConnell Family Foundation and the International Institute for Child Rights and Development.
52. Oetting, E.R., Donnermeyer, J.R., Plested, B.A., Edwards, R.W., Kelly, K. and Beauvais, F. (1995). Assessing community readiness for prevention. International Journal of Addictions, 30(6): 659-83.
53. Oetting, E.R., Plested, B.A., Edwards, R.W., Thurman, P.J., Kelly, K.J. and Beauvais, F. et al. (2024). Tri-Ethnic Center Community Readiness Handbook (2nd ed.). Fort Collins, CO: Colorado State University.
54. Raising Voices and the African Women's Development Fund. (2019). Preventing Violence Against Women: A Primer for African Women's Organisations. Kampala, Uganda: Raising Voices.
55. Ministry of Ethnic Communities. (2024). Our Communities 2024. Retrieved from: ethniccommunities.govt.nz/our-communities/
56. Family Violence Death Review Committee. (2016). Fifth Report January 2014 to December 2015. Wellington, NZ: Family Violence Death Review Committee.
57. Ministry of Social Development (MSD), Shakti, Te Puna Aonui. (2023). Our Culture or Pride: No Excuse for Abuse. Wellington, NZ: MSD.
58. Davis, R., Parks, L. and Cohen, L. (2006). Sexual Violence and the Spectrum of Prevention: Towards a Community Solution. Retrieved from: Sexual Violence and the Spectrum of Prevention: Towards a Community Solution | National Sexual Violence Resource Center (NSVRC).
59. Centers for Disease Control and Prevention (CDC). (2019). Veto Violence: Principles of Prevention Guide. Washington, DC: CDC.
60. Bronfenbrenner, U. (1979). The Ecology of Human Development: Experiments by Nature and Design. Cambridge, MA: Harvard University Press.

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