# Preventing violence through sport

We're Game Evaluation Report

**Professor Emma Sherry May 2024** 







### Research Background



The research was conducted by RMIT University in partnership with Merri Health to gain an understanding of the impact of the design and implementation of We're Game, a project delivered by Merri Health and its partners.



This research aimed to evaluate this Project to assist both Merri Health, and the Victorian Government to better understand how sport can be used as a context for prevention of gender-based violence.



This research has been funded by Merri Health via Sport and Recreation Victoria grant funding.



#### **Evaluation Aims**



To test the effectiveness of key components of the gender equity audit tool and other resources included in the Victorian Government's Guidelines for Preventing Violence against Women from an intersectional perspective.



To understand changes within participating settings over the duration of the Project.



To understand the usefulness and effectiveness of the Guidelines as a tool for driving change within diverse community sports settings.



#### **Data Collection**



# Focus Group Interviews with Setting Participants.

Active Merribek – YMCA: Oak Park, Coburg and Brunswick

**Tennis** 

Netball

Australian Rules Football

(a VFL club was initially engaged however left the Project in the first year)



Merri Health case notes and participant surveys



#### **Data Analysis**

- → Inductive coding (guided by framework analysis).
- → Deductive coding (coded to evaluation outcomes).
- → Deductive Evaluation (program logic model; inductive codes applied to this framework).

The evaluation has been conducted to systematically assess the value, significance and responses to the Project.

The analysis considered project implementation inputs, activities, outputs, and the intended outcomes in relation to the Guidelines.

The Project was implemented at a meso level across organisations, but change processes were associated and facilitated at the micro level, both levels have been considered when evaluating efficacy.



#### **Presentation of Results**

The evaluation is broken down into the following sections:

#### **INPUTS**

Project resources and raw materials. including participant responses to Project Activities., frameworks, educational materials, technical expertise, relationships and personnel.



#### **ACTIVITIES**

Gender equity activities

- Gender equity audit,
- Gender equity action plan,
- Planned actions from GE action plan,
- Workshops delivered to settings,
- Surveys completed by participants in a setting.

Sports and Recreation Victoria's "Guidelines for Preventing Violence Against Women: Taking **Action Through Community** Sport" (The Guidelines)

#### Inputs:

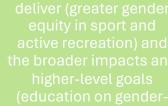
- Gender equity audit tool,
- Gender equity action plan template.

#### **OUTPUTS**

The tangible and intangible products that resulted from activities, as reported in Project Theory of Change.



#### **OUTCOMES & IMPACTS**





### **Project Inputs**

The following section provides the results of the evaluation focused on the Project support provided by Merri Health and delivery partners.



### **Project Inputs**

Through the evaluation, all participants in all settings discussed the value and positive perceptions towards Merri Health and the Merri Health lead as a delivery partner.

The education, resources and support provided were beneficial for education purposes and provided tangible actions to improve gender equity.

However, the timeline of contact points and lack of momentum experienced in some settings reduced the impact of some activities.

It was evident from the focus group participants that project implementation takes time and can be a slow process.

#### **INPUTS**

- Positive response and effective
- •Impacts on delivery timeline and structure, and key participant turnover reduced effectiveness



### Positive Perceptions and Engagement

The settings participating in the Project provided positive responses and engagement with the Project.

Support, resources, and co-ordination from Merri Health and their delivery partner Women's Health in the North (WHIN) were valued across the settings and by participants. Information and education provided new insights and challenged gender equity assumptions.

Being able to connect to a network and liaise with the Merri Health lead supported successful outputs and enabled activities to be implemented. "The Merri Health team are really passionate in this area and that energy is incredible ... it comes in and it rubs off on the other people in the room"

"I thought that [Merri Health lead] and Women's Health in the North did quite a good job of creating a two-hour session to give as much information on why this work is really important ... I found those sessions really valuable"



#### **Timeline and Structure**

The timeline and structure of the Project activities reduced the effectiveness of some activities and the overall project engagement:

- Lag between activities and contact points.
- When engagement and input from Merri Health was limited, engagement and actions were less impactful.
- Participants from Centres found it challenging to navigate delivery timelines and to find opportunities to pass their learning on (or share key messages) to/with their subordinates (or to their staff).
- Project activities were not always considered as core business, therefore without continuous inputs gender equity activities became less prioritised.
- The availability of lead participants and key personnel changes also impacted the timing of activities.

"... it definitely has been a long time. I know I was away, I think for the audit ... to keep that staff engagement and keep this issue and topic front of mind is difficult for a lot of people because they have such busy schedules and it's not our main focus of work..."

"I think for me, I'm a very like, organized structured person. And I think I feel like I didn't know what the process was and what each session was... I feel like there were gaps in between the meetings, but it would have been good to know at the beginning or every three weeks they're meeting and discussing this or that part, whatever it is."



#### **Varied Needs and Contexts**

All settings varied in terms of their capacity and readiness to implement various activities. Each setting type had different aspects of the Project and activities that did not necessarily fit with the context and nature of their setting, their volunteers or staff, or for their members or community participants. This variation makes the Project complicated in that, each setting required different inputs to suit the needs of their capacity, structure and workforce.

#### **Bespoke Activities**

Depending on if they are traditionally male or female sports, or both. Different settings need different messages, for example, behaviour change vs. protective factors.

### Demographic Differences

Each setting, the demographics their local community and their members/community participants requires potentially different goals.

### Centres vs. Sport Clubs

There were key differences between the different types of settings. Compared to volunteer sport club settings, Centres have paid workforces and extensive teams made up of different types of staff that can deliver different actions (i.e., casual vs. leadership vs. operational etc). In Centres where there are lots of paid staff, volunteer capacity does not present as a barrier for implementation, however large casual staff profiles leads to high staff turnover who may come and go throughout stages of project implementation.

#### **Varied Needs and Contexts**

"... some of the questions may not have been that relevant considering we're a sport ... a lot of the questions I think were also targeted more for like a football club or a soccer club, whereas the tennis club is more, is already set up to cater for men, for women and for males and females."

"...the initial tool that they were using was mainly tailored for sporting clubs, for the footy clubs, and a club environment. And then I think, because recreation is different in that we have kids coming in all the time, families coming in the swimming lessons, and people in the gym ... some of the categories or criteria may not be relevant for us."



# **Project Activities**

The following section provides the results of the evaluation focused on the Project activities delivered by Merri Health and delivery partners in each setting.



### **Project Activities**

Participating in the Project involved a range of activities aimed at improving gender equity.

There was inconsistent implementation of activities across settings.

The gender equity audit was a critical activity across all settings, however needed to be tailored to the context and setting.

Some activities were challenging to implement depending on the capacity of each setting.

#### **ACTIVITIES**

- Useful for education, knowledge and understanding and provided insight to guide change
- •Activities not maximized for effectiveness as not universal across settings.



### **Gender Equity Audit**

The gender equity audit was a key activity that supported and guided further implementation of gender equity activities. It allowed each setting to identify priority areas and provided a starting point for activity implementation. A measured assessment brought attention to key priority areas and enabled project participants to be educated on the opportunities where gender equity could be improved. As the results of the audit were reviewed, setting leads could engage in informed conversations with fellow staff and club members. The results from the gender equality audit provided validation for already discussed challenges and changes needed within settings, as well as a rationale for implementing new actions. However, the gender equity audit was not specific to the needs and relevance of the beneficiary i.e., differences between settings as well as between sports. The focus groups shared these differences in the relevance of the questions and areas of the audit.

"The audit has been really really good to bring out some of those ideas and get them thinking about potential actions."

"...There was a lot of questions that probably didn't sit well within our leisure and rec facility, which was then really hard to balance between what is stuff that's controllable within a staff environment ... versus focusing on our community participants ...So that's where I think the complexity kind of got missed because of that sporting based question."



#### Alignment with current operations and capacity

The focus groups highlighted a variation in the capacity of each setting.

Specific barriers to implementation included:

- limited resources or control for creating gender diverse physical spaces.
- Survey overload.
- Engaging community members and collecting feedback to assess the impact of activities.
- Prioritization and resource allocation.

It is important for the Project to align with the capacity, current work and activities of the settings.

"... it's okay for new stadiums that have gender neutral toilets, but we're an old building and how do we make sure we have that ... we had people coming in using the canteen as a prayer room. Well, hey, maybe we need a prayer room. Yeah, you know, things like that, that we found as we went along. How can we facilitate for everybody".

"So do we focus on trying to get new communities in or do we just focus on providing more access for the ones that are already coming? Because with obviously limited operating costs and hours and budgets and all that people, you can't do everything? So where hopefully that's what the action button has for us is a bit of where we're going to spend that little bit of money"



### Project Outputs

The following section provides the results of the evaluation focused on the Project outputs as discussed with each setting.



### **Project Outputs**

Although the Guidelines were not directly discussed throughout the focus groups there was evidence of the Guidelines being implemented and achieved through the Project across all settings.

Despite inconsistent implementation across the different settings, and barriers to implementation the Project resulted in several gender equity activities undertaken.

#### **OUTPUTS**

- •All evaluation outcomes were achieved to some extent. For example, increased knowledge and understanding, increase in gender equity activities, increased confidence, increase in partnerships.
- •Ineffective lack of clarity of priority areas; lack of control; practical and resource capacity challenges



## Increased understandings of gender equity and GBV and increased positive attitudes towards gender equity

A key output was an increased understanding of gender equity actions, reported across the surveys and focus groups. The Project predominantly led to increased knowledge about gender inequality and increased awareness on the necessity of purposeful action.

"I have learned more about the different needs of the diverse demographic groups in the area, and there is no one size fits all approach to community engagement when it comes to sporting clubs."

"We're just used to what things are, and don't really see it from an outsider's perspective ... So I think it was good for us to sit down and go through a bit of a framework and step away, look at it from the outside, do we actually do this or how does this look?



# Increased confidence and skill of setting participants to drive gender equity

Project activities provided validation and objective information to drive change. The Project generally enhanced motivation to implement purposeful actions and continue to drive gender equity across the settings. Participant reflections that emerged throughout the focus groups, also brought attention to the uncertainties that settings need to address.

"Our audits have now all been completed and [we're] working on an action plan ... the funding obviously finishes up I think it's June next year, and then we will carry on and this will sit with me to make sure that we are still making our spaces really inclusive because we've identified a couple of things that we could do better at. But yeah, it's really important. I want to continue the work to make sure that women and girls feel safe in our centres"

"... sometimes we can't always control their behavior and how they make other patrons feel ... that'll be a really big challenge for us, especially moving forward is how we how we sort of give our staff to training and support they need to be able to identify when behavior is really inappropriate.... and when we need to sort of take some action..."



### Increased gender equity activities

The gender equity audit was completed in all settings with participants engaged in and implementing various activities supported by the gender equity plan.

Settings noted some challenges in putting the plans into action.

"... now we are at our second stage., we've collected most of our feedback, we did a survey we sent that out to some of the clubs. [Merri Health lead] helped us collate the feedback together and put that in their web document. And we did notice, you know, common, you know, recurring themes."



### Increased knowledge and awareness

A key message delivered through the Project was challenging gender assumptions. The Project created opportunity for learning across the settings. Some of the settings demonstrated a clearer understanding of the different community groups and members. Others discussed initiatives aimed towards inclusivity across different cultures and religious groups, providing safe and welcoming environments as well as opportunities for sport and recreation participation.

"Thinking more actively about the barriers for women and girls in sport, and actively perceiving behaviours and practices in the [sport] club that are generally accepted from the perspective of an outsider or woman"

"I think the feedback that we've all received is [our club is] safe, it's welcoming. It's like a family here and it's so important to us ... doesn't matter how big [our club] gets it that is our core value."



### Increased relationships and partnerships

The Project elicited partnerships and relationship building between settings, setting participants, and project partners. In particular, the primary prevention sector organisations (Merri Health and Women's Health in the North) supported the implementation of gender equity activities and provided a local contact for setting participants to seek support and guidance. Similarly, through participating in the Project there were opportunities for shared learning and network building.

"I've been on the committee for a long time ... but now we have our contacts with someone local. I mean, as a result of [participating in this project] we got an invite to have an International Women's Day with another club."

"... it's good to know that there's somebody there that you can call on for support. If you get stuck. Run ideas by thinking of this? Have you heard another club do this? They're good to bounce ideas and get their support? ... you can tap into the support groups that can actually give you ideas or give you greater reach. They always add value".



# Outcomes and Impacts

The following section provides the results of the evaluation focused on the perceived outcomes and impacts of the Project as discussed with each setting.



#### **Outcomes & Impacts**

#### **OUTCOMES & IMPACTS**

- Project outcomes and impacts were not directly measured at stage of implementation and outcomes not easily assessed – complex interactions within a theory of change.
- •Some anticipated issues centered around setting participants uncertainty on the outcome goals, and understanding how they can have impact.
- •Further feedback needs to be gathered at check points throughout the Project to allow for better monitoring and evaluation of progress.
- Member engagement can be difficult and inconsistent.

### **Monitoring and Evaluation**

A level of uncertainty was expressed by setting participants regarding the impact of the activities and changes implemented, noting it was a challenge to ensure impact and positive outcomes. Setting clear goals relative to specific outcomes measures would be beneficial to provide assessment measures for the settings, for example tracking indicators that include established intersectionality criteria.

"... our programs are really inclusive and accessible ... but we don't have gender neutral change rooms, and we don't have this and we don't have that. So are we accessible or are we not?"



### **Capacity and Role**

The settings all had varying levels of capacity to carry out different gender equity actions. This was reflected in imperfect control over outcomes and how gender equity activities can facilitate the prevention of gender-based violence. Clarifying the design and outcome of the Project would be beneficial, particularly in the early stages.

"I guess I didn't understand what the end goal of it was. Are we just doing the audit for an understanding of where we are at or are we supposed to take actions from it? And then put that in place in real life?"

"Challenge is probably the overwhelm of how much that you could be doing and how much more we potentially should be doing but the reality of how much we can do. ... how do you make that decision of which is the most important thing to do first?"

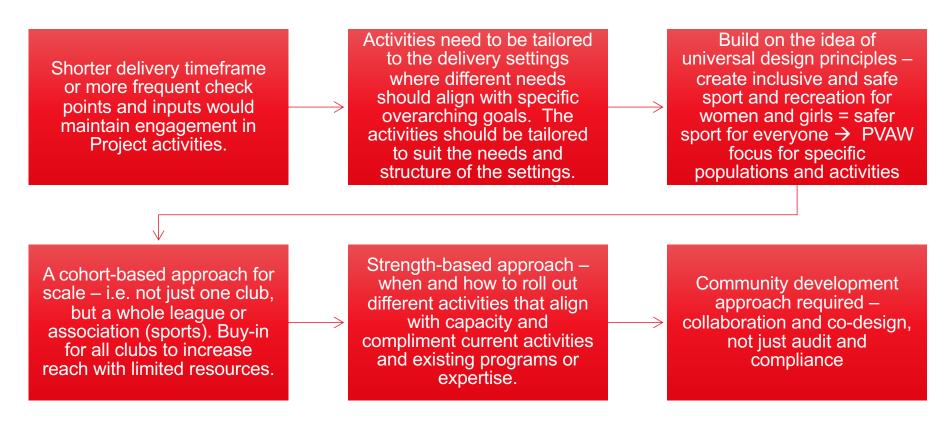


#### Recommendations

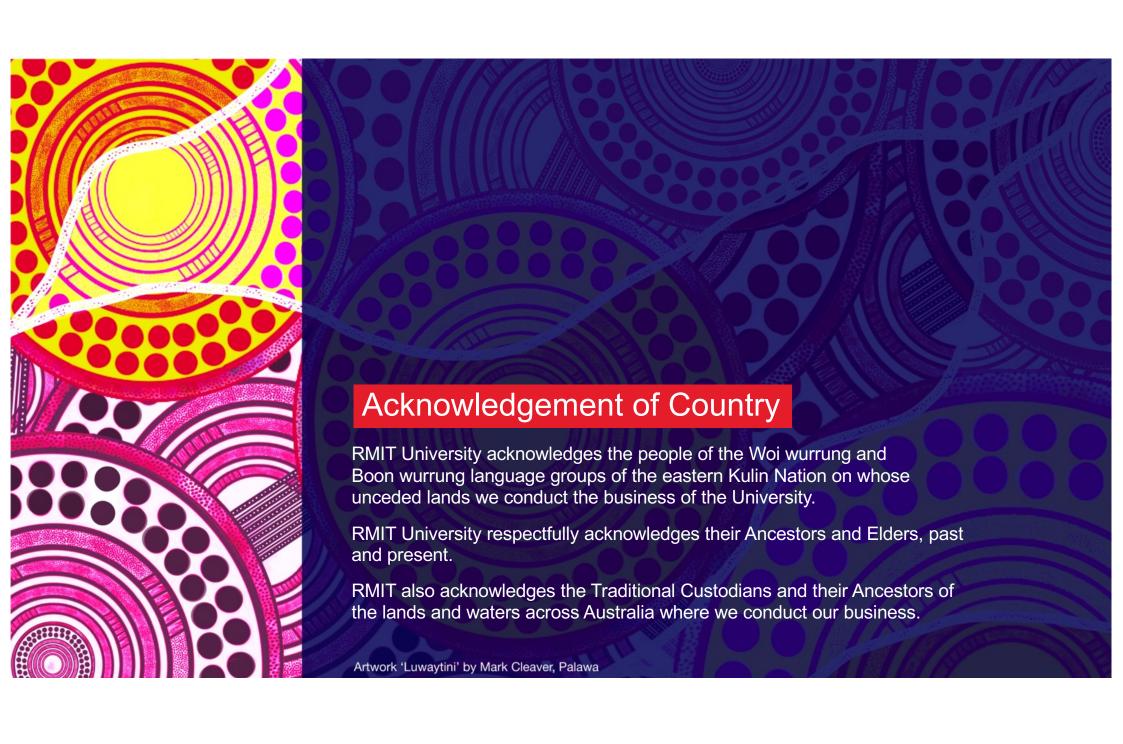
The following section provides the recommendations of the evaluation team resulting from the evaluation of the Project.



#### Recommendations







#### **Contacts**

#### **RMIT University**

Professor Emma Sherry emma.sherry@rmit.edu.au

#### **Merri Health**

communitywellbeing@merrihealth.org.au

https://www.merrihealth.org.au/get-involved/health-initiatives/active-living

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