

Toolkit for Elder Abuse Prevention Networks

“ Working Towards a
Community of
Practice Approach



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ECLC is an inclusive multidisciplinary legal service that works to prevent problems, progress fair outcomes and support the wellbeing and resilience of communities and community members in Melbourne's East.

ECLC acknowledges the Wurundjeri people of the Kulin Nation, the traditional custodians of the land across ECLC's region. We pay our deep respects to the elders, both past and present.



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Part I:

Primary Prevention of Elder Abuse Including Frameworks and Good Practice

Introduction

This Guide is intended as a practical resource to support and strengthen the role of Elder Abuse Prevention Networks (EAPNs) working to drive social change at a local level. Building on the success of a Community of Practice (CoP) model, and incorporating collective impact theory, the Guide provides practical tools to build sector capacity to undertake primary prevention of elder abuse and drive greater impact across Victoria.

Section 1 of this toolkit provides a snapshot of the elder abuse prevention sector, including key frameworks and good practice while Section 2 focusses on tools for strengthening sector capacity to drive change through a CoP approach.

Elder Abuse Prevention Networks

Following the Royal Commission into Family Violence (State of Victoria 2016), a number of prevention networks were established to support the development, implementation, and coordination of local prevention activities across Victoria. Among these, ten Elder Abuse Prevention Networks (EAPNs) were established and funded in 2017–18. Their purpose: “to build community and government capacity to prevent elder abuse, using a primary prevention approach” (EAPN accountabilities documents from 2019 – 2023).

The activities and strategies undertaken by EAPNs across the state vary considerably to ensure they reflect the unique needs of local communities. Activities range from stakeholder engagement, community education and events, through to raising awareness of elder abuse and local referral pathways. Another important role of EAPNs is to build sector capacity to understand, embed and undertake work to prevent elder abuse before it occurs. This approach delivers maximum reach by upskilling and equipping partners who are already working with communities, minimising reliance on EAPNs as the doer. Whilst much of this work sits within a primary prevention framework, EAPN activities continue to raise awareness about elder abuse and help increase community knowledge about where to find help.

Elder Abuse

Elder abuse is 'any act occurring within a relationship where there is an implication of trust, which results in harm to an older person' (Department of Human Services 2009, p.4). It can include physical, sexual, psychological, and emotional abuse; financial and material abuse; abandonment and neglect. It can be intentional or unintentional.

While elder abuse has been gaining recognition and public awareness and is now recognised as a form of family violence in Victoria (State of Victoria 2016), there are key differences between elder abuse and family violence experienced by the broader population. For example, elder abuse is most often intergenerational, perpetrated by an adult son or daughter against a parent, while broader family violence most often includes intimate partner violence, predominantly perpetrated by men against women (Joosten, Gartoulla, Feldman, Brijnath, & Dow 2020).

Data indicates that 75% of victim survivors of intimate partner violence reported their perpetrator as male (Australian Institute of Health and Welfare 2018). A review of elder abuse data shows that in Australia, elder abuse is perpetrated by 55% male and 45% female (Qu, Kaspiew, Carson, Roopani, De Maio, Harvey, Horsfall 2021). Clear gendered patterns become apparent when looking at the types of elder abuse. A review of the data commissioned by Respect Victoria and published in 2023, found that men are more likely to commit financial abuse (65% male 35% female), physical abuse (77% male 24% female) and sexual abuse (79% male 21% female).

In relation to intimate partner violence, older women are more likely to experience physical abuse by a male partner as compared to older men experiencing physical abuse by a female partner (this finding was statistically significant). Older women are also significantly more likely to report sexual abuse compared to men.

While we recognise gender as a driver in elder abuse, these gendered differences are less pronounced and therefore need to be considered alongside ageism and other intersecting forms of discrimination. These differences mean that the primary prevention of elder abuse does not fit neatly into family violence frameworks that focus on preventing violence against women and intimate partner violence. Elder Abuse prevention is a growing area of work and it is important to continue building evidence about the drivers of elder abuse to inform ongoing work in this space.



The Prevention Continuum

Ending family and gender-based violence, including elder abuse, is long-term work that must occur at all levels and all settings across the community (Safe & Equal 2022). This continuum of interconnected activities is often grouped into three broad categories: primary prevention, secondary prevention (early intervention) and tertiary prevention (response). See Figure 1 below.

Elder Abuse – Working Across the Continuum

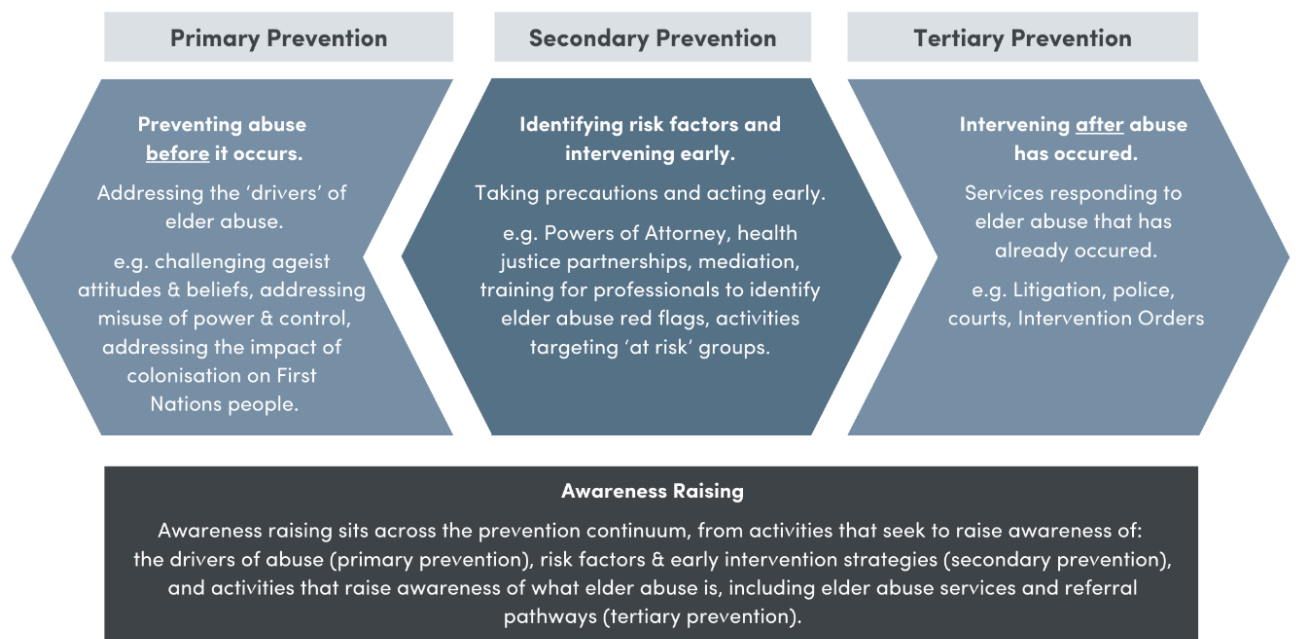


Figure 1. Elder Abuse Prevention Continuum

Awareness-raising is an important enabling action, however there are limitations to awareness-raising. As Our Watch states in *Change the Story* (2021, p.57):

"Awareness-raising is often confused with prevention or misunderstood as a prevention strategy. Awareness-raising aims to educate the broader public about the drivers, dynamics, prevalence and impacts of violence. However, awareness-raising on its own will not produce the social, cultural and behavioural change that is needed to reduce the prevalence of violence against women and create a more equitable, safe and inclusive society. Nevertheless, it is an important first step in the overall task of addressing violence against women, and can help provide an enabling environment for more change-oriented strategies."

Primary Prevention of Elder Abuse

Elder abuse primary prevention interventions are those that seek to prevent abuse *before* it occurs. The focus of a primary prevention approach in this context is on addressing the underlying causes, or drivers of elder abuse.

Working across the continuum is fundamental to addressing complex social issues like elder abuse. Importantly, if we want to move beyond just responding or reacting to elder abuse, we need to change the attitudes and social conditions that drive it (Brijnath, O'Halloran, Lock, Feldman, Claff & Dow 2021). This means "tackling the underlying drivers of abuse, including ageism and gender inequality, as well as other forms of discrimination and marginalisation in order to create a culture that promotes respectful relationships" (Brijnath et.al 2021, p.11).

Whilst there is little evidence about effective primary prevention interventions for elder abuse (Owusu-Addo, O'Halloran, Birjnath & Dow 2020), in NARI's report, *Primary prevention of family violence among older people living in Victoria* (Brijnath et al 2021, p.12), a few strategies are proposed. These are adapted from The Missing Voices Report (WHO 2002), and include:

- Awareness and education strategies to promote positive views of older people.
- Promotion of positive intergenerational relationships with older people.
- Empowerment of older people, including via advocacy organisations.
- Addressing the role of media in promoting positive images of older people.
- Creation of recreation facilities for older people to reduce social isolation

Although there can be areas of overlap, **primary prevention** differs from **secondary prevention**.

- In primary prevention, the focus is to stop abuse from occurring in the first place by changing the attitudes and social conditions that drive abuse.
- In secondary prevention, initiatives are focussed on taking action on the early signs on abuse (e.g. awareness raising of elder abuse risk and contributing factors, community education of wills/power of attorney)

The focus of primary prevention is on addressing the drivers of abuse, namely ageism and gender discrimination. Therefore, the focus is not on the abuse or the 'problem' but rather on shifting the social and structural norms that facilitate and perpetuate discrimination and marginalisation of older adults.

Primary Prevention Elder Abuse in Victoria

While there is recognition of current gaps in the evidence around the prevalence, nature, and drivers of elder abuse in our community, this work continues to develop.

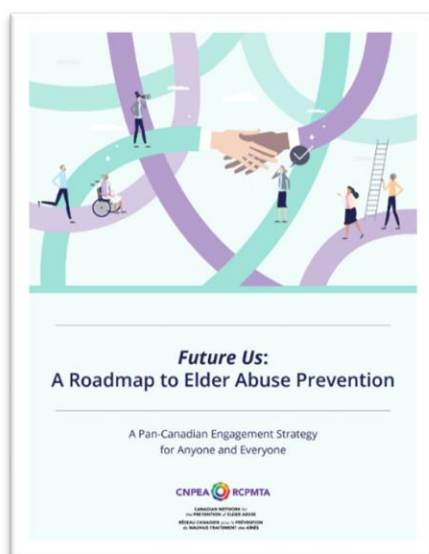
Current frameworks, such as [*Change the story: A shared framework for the primary prevention of violence against women and their children in Australia*](#) (Our Watch 2021), provide a helpful foundation for understanding the role of gender and power inequality between men and women within the broader family violence context. Greater research (national and international) is required to understand the social context in which elder abuse occurs. This includes a deeper understanding of the drivers and the intersection of ageism and gender inequality with ableism, racism and other forms discrimination.

There is also work required to strengthen partnerships across peak bodies and key stakeholders (national and state) for a more integrated system and approach to primary prevention of elder abuse. As an initial phase, building sector knowledge and capacity to undertake primary prevention of elder abuse is critical.

A full list of frameworks to inform and guide broader primary prevention work is outlined in the Appendix, as well as key resources to guide local practice listed under Pillar 2 'Domain.'

For an example of a national prevention framework, see Canada's [*Future Us: A Roadmap to Elder Abuse Prevention*](#) (CNPEA 2022)

Visit the [Victorian Government webpage](#) to find out progress on Primary Prevention in context of delivering on Free from Violence – Victoria's Strategy to Prevent Family Violence.



Good Practice in Primary Prevention

Influencing cultural change through primary prevention approaches is a long-term investment. It involves working across all spheres of society (individual, organisational, community and societal) with mutually reinforcing messages and activities to address the drivers of elder abuse. This requires high level leadership, policy, and resourcing to influence and embed change at all levels where community work, live and play (Respect Victoria 2022; Our Watch 2021).

“Establishing the infrastructure to support the delivery of multiple, mutually reinforcing primary prevention efforts is critical for achieving sustainable, long-term, progressive change.

(Respect Victoria 2022, p.78)

In Respect Victoria’s First Three-Yearly Report to Parliament: Progress on Preventing Family Violence and Violence Against Women in Victoria (2022, p.78), key elements for effective prevention infrastructure are identified as:

- Sustained political leadership
- Private sector, civil society, and community leadership
- A well-resourced, independent women’s movement*
- Policy, regulatory and legislative reform
- Mechanisms for coordination, collaboration and quality assurance
- Mechanisms for workforce and sector development
- Strong evidence base informed by ongoing research, practice and evaluation
- Monitoring and reporting mechanisms.

** or relevant ‘backbone’ organisation.*

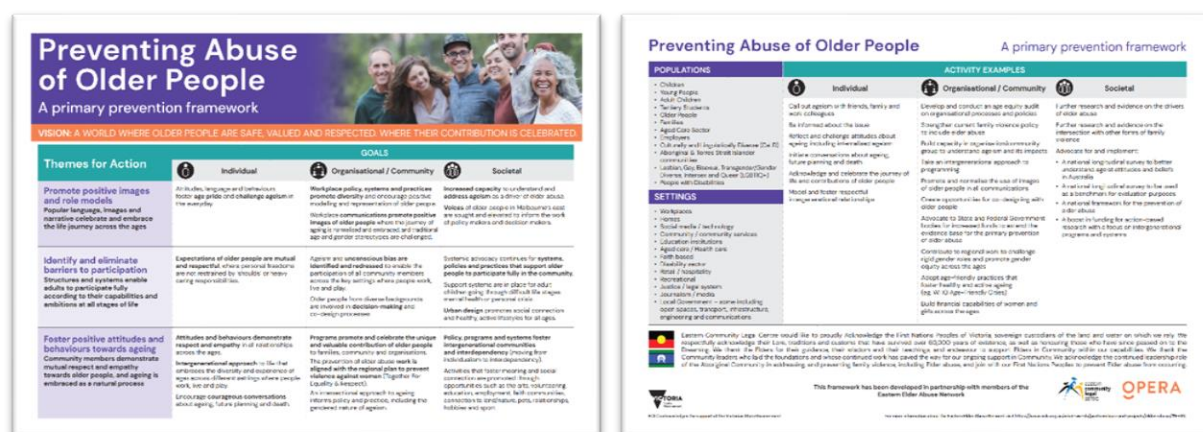


Community Action

In 2021, Eastern Community Legal Centre (ECLC) launched a framework to guide local primary prevention action to address elder abuse. The framework was developed in partnership with the Eastern Elder Abuse Network (the regional EAPN). This work has been grounded in evidence from the [Older People: Equity, Respect & Ageing \(OPERA\)](#) Project, a partnership project between ECLC and Swinburne University.

The framework presents three strengths-based 'themes for action,' together with Goals set out across the individual, organisational, community and societal levels. The Framework also identifies example activities together with populations and settings, to promote mutually reinforcing strategies and messages across the whole of community.

See [Preventing Abuse of Older People Primary Prevention Framework \(ECLC 2021\)](#). The framework includes a two-page outline of good practice including example primary prevention activities. [There is also an extended Guide supporting the Framework.](#)



For more information on:

- [OPERA: Summary Report: Community Consultations on experiences of age and ageism](#) (ECLC & Swinburne University 2019)
- [Primary Prevention: Safe & Equal's \(2022\) What is Primary Prevention?](#)

Also see Appendix: Key frameworks to inform and guide primary prevention work

Lessons in Success – the Women’s Health Sector

Collective Impact Approach is defined as a “*collaborative approach to addressing complex social issues, consisting of five conditions:*”

- *A common agenda*
- *Continuous communication*
- *Mutually reinforcing activities*
- *Backbone support*
- *Shared measurement”*

Smart (2017 p.1)

Much of the success reported in Respect Victoria’s Report (2022) references the considerable progress of the Prevention of Violence Against Women (PVAW) sector where policy and infrastructure support a systems approach to prevention. Within this model, there are important lessons from the Women’s Health Sector (WHS), including a model where regional services are funded in their role as backbone organisations to co-design and deliver place-based initiatives to prevent violence against women.

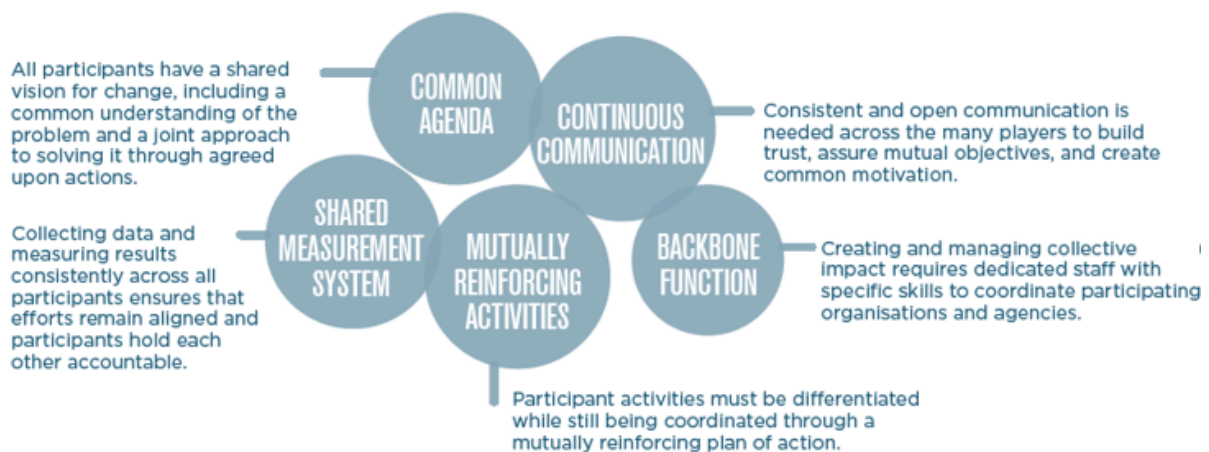
This model demonstrates how the prevention of complex social issues such as Elder Abuse and Violence Against Women can be addressed, highlighting the importance of ‘backbone’ organisations providing central knowledge hubs and strategic support to facilitate place-based interventions across Victoria.

GEN VIC’s (2019) [Reaching across Victoria to prevent violence against women: the infrastructure provided by women’s health services & Victorian Prevention partnerships](#), provides an excellent summary explaining how the WHS has been successful in PVAW.

“PVAW requires complex social change. Women’s health services undertake this work intersectionally, and cumulatively progress violence prevention using a **collective impact approach**. Strategic coordination of the PVAW workforce and prevention partnerships enables reinforcing of public messaging and activities, and to collectively evaluate our work. Localised operations of partnerships allow tailoring and co-designing of activities ensuring we specifically work to meet the needs of our diverse communities.” (GEN VIC 2019, p.1)

Central here is the understanding that addressing complex social change requires strategic coordination, resourced to enable a **collective impact approach**.

Smart (2017 p.1) from the Australian Institute of Family Studies defines collective impact as “a collaborative approach to addressing complex social issues, consisting of five conditions: a common agenda; continuous communication; mutually reinforcing activities; backbone support; and shared measurement.”



(as cited in Smart 2017, p.3)

While gaps in the evidence base mean that we have limited access to rigorously evaluated elder abuse primary prevention projects and initiatives, examples of collective impact provide a useful frame to aspire and advocate for.

For more information on:

- Collective impact: J Smart, (2017), [Evidence and Implications for Practice](#)
- Learning in Action: M Parkhurst & H Preskill, (2014), [Evaluating Collective Impact](#)
- J Kania & M Kramer, (2011), [Collective Impact](#)

EAPNs – Agents of Change

There have been varied challenges and lessons learnt across the EAPNs. Importantly, it is recognised that no two prevention networks are alike in their approach, demographic profile, or readiness of partners to engage in this area.

Over the last four to six years (and longer for some) EAPNs have been central in helping to raise the profile and awareness of elder abuse and its drivers at both state and national levels, and working with partners, embedding place-based approaches to influence change. These initiatives have been central in contributing to the evidence base and have led to more cohesive and informed approaches across Victoria.

A snapshot of key achievements include:

- Pooling resources to promote evidence-informed language to talk about age and ageism (development of the [Framing Age Message Guide](#) and [online training modules](#))
- Development of toolkits and resources to build capacity to better understand and prevent elder abuse:

- [Warm, Safe Home Project](#),
- [Inheritance: not an entitlement](#) videos and [discussion guide](#)
- [Preventing Abuse of Older People in Melbourne's East Framework, Prevention Across the Continuum](#)
- Strengthening referral pathways where elder abuse has been identified
- Community education on elder abuse and its drivers
- Developing and embedding added resources to address gaps in the evidence and promote shared understandings and approaches toward primary prevention of elder abuse:
 - [OPERA](#)
 - [Preventing Abuse of Older People in Melbourne's East Framework and Guide](#)
 - [Framing Age Message Guide](#)
 - GOAT Project
 - [Digital Age Inclusivity and Accessibility Audit Tool](#)
- Advocating for the need for coordinated primary prevention approaches (Victorian framework to lead primary prevention of elder abuse work) and extended and continued funding
- Promoting and sharing learnings with a national audience including presentations at the National Elder Abuse Conference (Tasmania 2021) and [COMPASS](#) (the national knowledge hub for elder abuse), as well as influence at State level including the promotion of key resources via Victorian Government's online WEAAD events.
- Contributing to the development of Victoria's Primary Prevention Framework to prevent elder abuse

"Place-based, community-led approaches to primary prevention initiatives can identify and address unique issues in local communities and tailor initiatives to their specific needs. These initiatives involve a diversity of local people and groups, engage, and develop local leadership and respond to local contexts." (Respect Victoria 2022, p.46)

“Backbone organisations serve as co-ordinating bodies that bring together a diversity of stakeholders and lead a synchronised effort to achieve a common goal...”

Over the lifecycle of an initiative, they:

- 1. Guide the vision and strategy*
- 2. Support aligned initiatives*
- 3. Established shared measurement practices*
- 4. Build public will*
- 5. Advance policy, and*
- 6. Mobilise funding*

Backbone organisations are a central element of the Collective Impact Theory, which states that “no single policy, government department, organisation or program can tackle or solve the increasingly complex social problems we face as a society.”

[Altarum Healthcare Value Hub. What are backbone organisations?](#)

By harnessing the collective expertise, passion, and resourcing from partner organisations, EAPNs function best when enabled to act as the ‘backbone’ organisation.





Part II:

Strengthening Practice – Building Communities of Practice

Introduction

Part II of this Guide includes a Toolkit for strengthening EAPNs working towards a CoP model. While there's no one-size-fits-all, a CoP represents one style of engaging with partner organisations to equip and expand the reach of elder abuse primary prevention work. While a CoP approach is presented as an approach that may enhance network outcomes, it is not suggested to replace networks. Each network will function differently depending on resourcing, needs of the local community, and the level of partner engagement.

EAPN Leads need to assess the most appropriate approach that is relevant to the level of readiness and engagement of partner organisations. No matter where EAPNs are on their journey, Part II will provide a suite of tools and tips to strengthen practice, and a 'kit' that can be added to over time as we continue to build the evidence base.

Why a Community of Practice (CoP)?

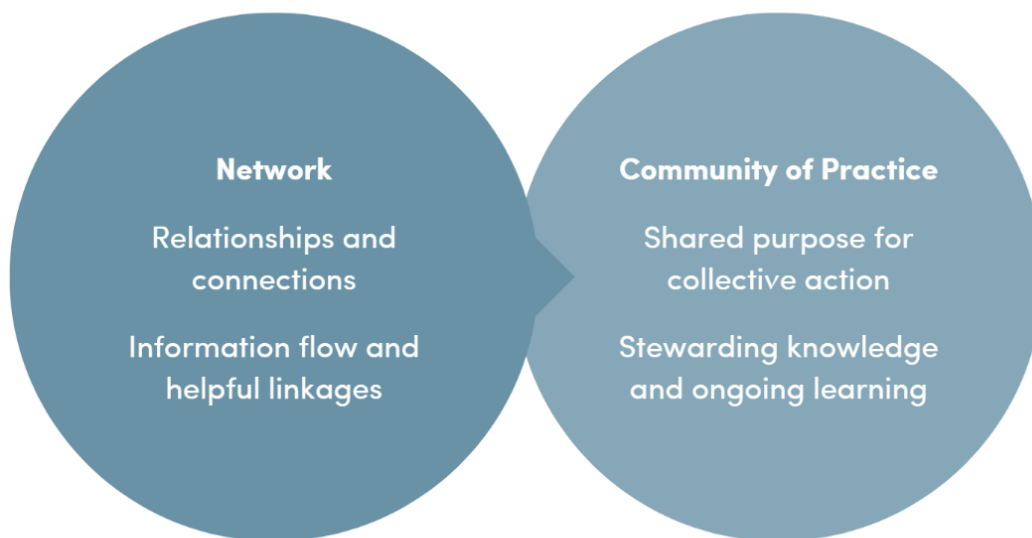
Evidence shows that regional partnerships play “a critical role in driving collective action across local communities,” in connecting practitioners, organisations and activities, and therefore breaking down practice silos to strengthen primary prevention action (Women's Health East 2022 p.10; Respect Victoria 2022).

One mechanism proving successful is the role of CoPs, connecting like-minded practitioners with a shared interest, to share learnings and resources, problem-solve, collaborate, and build rich relationships (Women's Health East 2022).

For emerging areas, such as elder abuse primary prevention, CoPs have a key role in facilitating safe spaces for peer learning and innovation as we continue to raise the profile of elder abuse and its drivers and build the evidence-base and learning around 'good practice.'

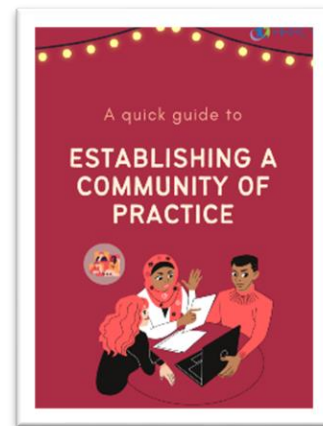
Network vs Community of Practice

Although there are interlinked traits between a Network and CoP, the key difference is that the focus of a network is around promoting connections and relationships with the purpose for information flow and helpful linkages (Wenger-Trayner 2015). The focus of 'community' refers to the "developed shared identity around a topic that represents a collective intention... to steward a domain of knowledge and to sustain learning about it" (Wenger-Trayner 2015).



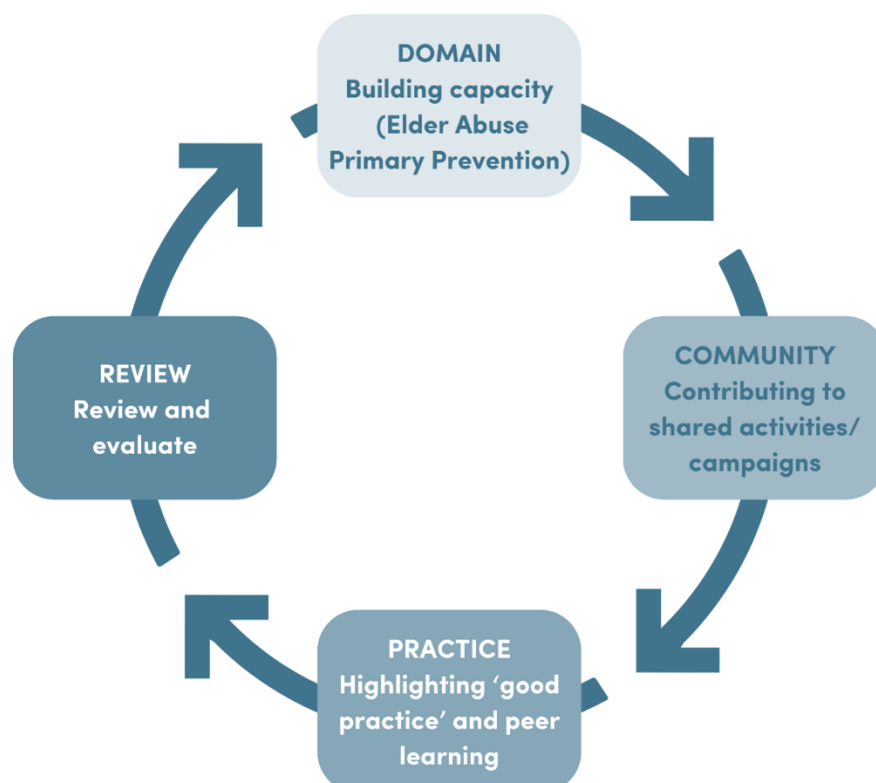
"Learning in a community of practice is not merely the transfer or sharing of knowledge from someone who knows to someone who doesn't, but an ongoing cycle by which community members generate ideas that they try in practice: they learn further by reflecting on how well their ideas worked—or not. The stories they tell each other... are a key learning resource for other members of the community—creating continuous learning loops over time." (Wenger-Trayner, Reid and Bruderlein 2022, p.14)

See Goodhue and Seriamlu's (2021) [A Quick Guide to Establishing a Community of Practice](#). This resource includes information to get you started and plan for a flourishing CoP.



Four Pillars for a Successful Community of Practice

This toolkit will explore the four pillars for a successful CoP. The pillars have been tailored for EAPNs, and build on Wenger-Trayner, Reid, and Bruderlein's (2022) model including the three characteristics of a CoP including: Domain (shared area of interest), Community (shared activities, learning and problem solving), and Practice (highlighting and sharing learning through practice). In addition to this, 'Review' has been included as the fourth pillar to reflect the cyclical nature of CoPs, and represents the need for a continual process of reviewing (membership, purpose, and learnings) and evaluating (how to measure success).



Pillar 1 – Review: Getting Started

A good place to start is to ‘Review.’ In this initial stage, it is important to define your audience, domain, purpose, and goals. Questions you may ask include:

Audience: Who is this community for? Who are the key stakeholders to engage?

Tip: Engaging partners in a facilitated workshop or consultation can be a helpful way to identify goals, purpose and the preferred format of the group. Member contribution is important and helps to build a sense of ownership. Following this, developing Terms of Reference is a helpful tool to articulate and confirm group agreements and commitment.

Domain: Given the intended audience what is your key ‘domain’ or area of expertise that you will focus on?

Purpose, Goals and Outcomes: Given the audience and domain, what is this community’s primary purpose? What are the potential benefits to participants? To other stakeholders? What is the best format for this meeting?

- See *Edmonton Regional Learning Consortium*(ERLC), [Creating Communities of Practice](#)

Reviewing your audience, domain, and purpose, is an important process for EAPNs and will vary for different Networks depending on budget, resourcing, and levels of engagement. They set the foundation for your CoP, and within the boundaries of your organisational capacity and funding guidelines (including a focus on primary prevention), should be guided by member preferences.

At this stage, EAPNs may identify that some initial groundwork is required before starting a CoP. This may be in the form of relationship building, community consultation and research, or it could be starting with a small partnership project and building upon this work. At its core – a CoP is built on trust and relationships, and these take time and resources and cannot be rushed. Taking the time to build those partnerships and understanding the needs of your community is vital.

Engaging Stakeholders – Who to engage?

The strength of CoPs is grounded in the experience, knowledge and diversity represented among members. Each contributes unique expertise, resources, energy, and connection to community.

For many Networks, you will already have a committed core group of members. For others, you may need to identify stakeholders and actively recruit new members. Either way, it is good to regularly review your membership, assess gaps and explore opportunities to diversify.

Ideally your membership could represent:

- Diverse groups considering different priority groups, which may include older community representatives
- Representatives across different Local Government Areas
- People with shared interest in primary prevention approaches – taking an intersectional approach to challenging ageism through a life-span approach
- Practitioners who bring curiosity and an openness to learning and sharing

Tip: If you are having difficulties with recruitment, it's a good idea to start small. Find out where the momentum is and jump on board. Consider how you can add value to or bring an elder abuse primary prevention lens to an existing Network or Partnership.

Examples of stakeholders you may engage include:

- Local Government: including Healthy Ageing Officers, Intergenerational Officers, or those working in preventing violence against women, family violence, or promoting gender equity
- Women's Health Services – consider ways to bring an intersectional lens to regional PVAW Strategies and Action Plans as well as working across the lifespan with intergenerational approaches
- Community Legal Centre Sector
- Ageing and Health Sector, including hospitals
- Ethno-specific and Multicultural Agencies
- Aboriginal Community-Controlled Organisations
- Family Violence Specialist Services
- Police
- Community Health Centres / Services
- Neighbourhood Houses / Men's Sheds
- Education sector: Early Learning Centres / Schools / Universities / TAFEs
- Local Libraries
- Community Champions / older community members with diverse lived experience

Tip: Connecting with your relevant local government (e.g. Healthy Ageing Officers) can be a great place to start. Explore Municipal Association of Victoria regarding Council priorities and projects around healthy ageing: <https://www.mav.asn.au/what-we-do/policy-advocacy/social-community/ageing-well>. If you haven't already, find out the best contact at your local Women's Health Service. Make a time to find out what they are doing regionally to engage and prevent violence against women working across the lifespan. See map below of the ten regional Women's Health Services and Prevention Partnerships across Victoria (GEN VIC 2019) (accessed Jan 2024).



To learn more about the origins and theory of communities of practice, see:
<http://wenger-trayner.com/introduction-to-communities-of-practice>

Pillar 2 – Domain: Centring Our Area of Expertise and Building Capacity

*“Domain: Community members have a shared domain of interest”
(ERLC 2016)*

Victoria’s commitment to primary prevention of elder abuse is embedded in [Free from Violence: Victoria’s Strategy to Prevent Family Violence](#) (2017) and reflected in Victoria’s commitment to continued funding over the next 4-year funding cycle (to August 2027).

Building communities with a strong understanding of ageism, sexism, and gender inequality, together with other intersecting forms of discrimination is central to informing primary prevention work.

There are several resources to support this work including:

- [Framing Age Message Guide](#) (Common Cause). See links to Report, Tip Sheet, Easy Read Booklet and [Online training](#)
- [Preventing Abuse of Older People in Melbourne’s East: A Primary Prevention Framework & Guide](#) as well as the stand-alone [2-page Framework](#)
- OPERA Project – research with community around their experiences of age and ageism ([OPERA website](#) and related [consultation reports](#))
- [What is Primary Prevention: Connecting Across the Continuum from Prevention to Response](#) (Safe & Equal)

Pillar 3 – Community: Contributing to Shared Activities and Campaigns

*“Community: Members pursue this interest through shared activities, discussions, problem-solving, information sharing and relationship building. This enables and fosters collective learning and willingness to share ideas.”
(ERLC 2016)*

A Community of Practice is not just what happens within the formalised meetings. It reflects the broader relationships, communication and activities that take place across the year that foster ‘community.’ Ensuring regular communication including opportunities for training, relevant links or helpful resources is a great way to maintain contact, motivate, strengthen morale, and keep everyone in-the-loop between meetings.

Keep in mind that not all members need to share the same level of engagement. Offering various levels of ‘buy-in’ or participation may enable broader participation and cross-sector engagement.

Projects and Partnerships

Working to commemorate days of significance presents an important opportunity to engage with the community and come together around a shared interest and collaborate on a piece of work. Find opportunities to connect with partners and organisations that are keen to engage on topics to such as: healthy ageing; elder abuse and addressing ageism; building healthy intergenerational relationships and even breaking the stigma of death and dying.

Creating opportunities to plan and deliver an activity or event is a helpful way to foster community and build capacity as you trial and test primary prevention approaches. By pooling resources and engaging with community we can enhance our ‘learning loop’ around what works and what does not. These are also important opportunities to raise the profile of elder abuse as a form of family violence and challenge ageism.

Key days of significance include:

- [World Elder Abuse Awareness Day \(WEAAD\)](#) – 15 June
- [Ageism Awareness Day](#) – 9 October

Broader events include:

- [#OlderWomenCount campaign](#) launched 1 March each year, the campaign includes 7 days of visibility and advocacy in the lead up to International Women's Day (IWD) – a global focus on gender equality and women's achievements.
- [Dying to Know Day](#) 8 August – an annual campaign that encourages adults at all stages of life, to be strong self-advocates for their personal planning when it comes to their future and choices for end-of-life.
- [Victorian Seniors Festival](#) (Month of October) – Commencing on 1 October, International Day of Older Persons, this can be an opportune time to run sessions to discuss topics such as: healthy ageing, future planning, elder abuse, rights, and grand-parenting.
- [16 Days of Activism Against Gender Based Violence](#) (25 November to 10 December) – team up with your local WHS ensuring the voice of older women are represented in regional campaigns to challenge gender-based violence.

Tip: Providing opportunities to plan for an event can allow members to opt in depending on capacity and interest. You may consider engaging broader stakeholders to guide this process and enhance reach of target audience.



Pillar 4 – Practice: Highlighting 'good practice' and peer learning

“Practice: Community members are practitioners in the domain of interest, and build a shared repertoire of resources and ideas that they take back to their practice.”
(ERLC 2016)

Community of Practice – the Meetings

Tip: Group agreements that are presented at the beginning of each meeting can help to set the tone to create a safe space for everyone to participate equally, acknowledge that as an emerging area of expertise where we are learning together, and help to foster trust with ground rules around confidentiality.

At the heart of a CoP is the concept of *thinking together* (Pyrko, Dörfler & Eden 2017). In this process, people learn together and from each other in practice, and in this way become more competent practitioners.

Creating opportunities for this ‘learning loop’ is an important part of seeing theory modelled in practice.

CoP meetings provide the opportunity to highlight work that is happening locally. By setting the tone for these meetings, and allowing safe spaces for open discussion, members have the chance to reflect and share learnings (the good and the bad). Creating spaces where members can connect, share common ‘issues’ and *think* together in a safe forum, encourages spaces where ideas can flourish and where the ‘challenges’ and the successes are shared.

Topics for CoPs can be discussed and decided on as a group. Depending on frequency, areas of interest and members, you may choose to focus on a specific focus such as:

- Embedding intersectionality into practice
- Intergenerational approaches
- Message Guides to inform value-based communication (e.g. [Framing Age Message Guide](#))
- Promoting positive images and language to challenge ageism

You may also choose to alternate topics so that the focus allows for a continuum approach for those working across the continuum from primary prevention to response.

Tip: For organisations working across the continuum, from primary prevention through to response this can be a great way to share knowledge and cultivate two-way learnings to inform and strengthen practice including case studies.

Depending on your meeting structure you may invite one or two members / guest speakers to share about the work they are undertaking and key learnings. This is a fantastic opportunity to acknowledge and celebrate successes, promote peer learning, and see practice in action. It can also help to prompt ideas, opportunities for future collaboration and create a culture of learning.

Pillar 1 Review: Evaluation

As you circle back to 'review,' this is an opportune time to revisit and evaluate the outcomes of the CoP as well as key activities.

Reviewing the CoP

Set aside time in one of your CoPs to discuss and review your initial reflections on the intended audience, domain, purpose, and goals. Question you may ask include:

- **Audience:** Do we still have the right stakeholders on board? What are the gaps? Who is missing?
- **Domain:** Following a 12-month period, is our focus or domain still the same? How can we go deeper? How can we strengthen shared outcomes / primary prevention approaches?
- **Purpose, Goals and Outcomes:** Does the current format still meet the needs of the group to achieve goals and outcomes? Are our purpose, goals and outcomes still aligned?

Tip: Check out the CoP Fitness Test (Goodhue and Seriamlu's 2021, p.14) for a handy tool to monitor and assess the performance of your CoP.

How to evaluate primary prevention activities

Demonstrating the success and progress of primary prevention initiatives is difficult given the complex and long-term nature of this work. Since the drivers of family violence, including elder abuse, are deeply ingrained in the very fabric of our social norms and structures, it is understood that change happens over an extended period, and is achieved through sustained and coordinated approaches.

As discussed earlier, a collective impact approach has been recognised as good practice including the strategic coordination of prevention workforce and partnership to enable

mutually reinforcing messages and activities, together with collective evaluation (GEN VIC 2019; Respect Victoria 2022).

While there is work in progress to embed and align elder abuse primary prevention with the broader prevention of violence against women sector, these learnings and approaches can be drawn on to help guide our work.

A few excellent resources have been created to support evaluation approaches for primary prevention practitioners. These links provide suggestions and tools for evaluating projects.

- Safe & Equal's [Evaluating Prevention Activity](#) for guidance on monitoring progress in primary prevention on a population and project level
- Respect Victoria's [Monitoring, evaluation and learning toolkit](#)
- Australian Human Rights Commission's [Changing Perspective: testing an ageism intervention](#)

Safety, Self-Care and Sustainability

Safety

Building in safety protocols and referral pathways: local programs should be mindful of connecting community members into local services and ensuring appropriate referral pathways are provided. Have in place a policy that outlines Referral Pathways and Responding to Disclosures.

Self-Care

EAPN roles can feel isolating at times, particularly when engagement with partners is low, and/or partner expectations are high. Connecting with local 'champions' in the region, as well as other EAPNs can be a great way to connect, debrief, share ideas or seek input. This can help avoid working in silos or feeling isolated.

Opportunities to engage with other EAPNs could include:

- Contacting EAPN Leads directly
- EAPN reference group meetings
- EAPN CoP

Safe and Equal have created some great resources to support wellbeing of prevention practitioners through the 'How We Thrive' video series. This suite of resources contains four videos, each with a supporting tip sheet, that help managers and organisational leaders understand what prevention practitioners need to feel supported and valued in their organisations, as well as helping prevention practitioners to advocate for their own projects and wellbeing.

Sustainability

Given the often short-term nature of primary prevention funding, it is important to have realistic expectations around Network outcomes. Where possible, find opportunities to build on existing work, and/or embed sustainable approaches. Examples could include:

- Diversify funding/leverage broader funding grants
- Connect with relevant Networks working across the continuum
- Tap into existing resources. See 'List of Helpful Resources' in Appendix

Conclusion

While there is no linear approach to developing, sustaining, or measuring the outcomes of a CoP, increasingly there is promising evidence around the critical role of local partnerships and communities of practice in influencing change at a local level (Respect Victoria 2022).

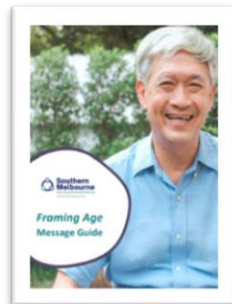
While elder abuse primary prevention remains an emerging area, Networks have demonstrated significant strides in raising the profile of elder abuse and its drivers and helping to build the evidence base for effective practice. As momentum continues to build, the funded roles of EAPNs have become critical avenues to promote thriving communities of skilled practitioners working towards a vision where all people of all ages are valued and respected and their contributions are acknowledged.

Appendix

Examples of work undertaken by EAPNs and helpful resources from primary prevention to awareness raising .

Examples of EAPN work

[Framing Age Message Guide and online training modules](#)



[Preventing Abuse of Older People: A Primary Prevention Framework & Guide](#)



[OPERA Summary Report: Community Consultations on experiences of age and ageism](#)



[WEAAD Toolkit for events](#)



[Warm, Safe HomeKit.](#)
Another brochure will be launched shortly



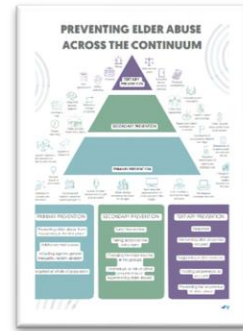
[Digital Age Inclusivity and Accessibility Audit Tool](#)



[My Generation](#)
[video](#) capturing,
 intergenerational
 public art project
 to challenge
 ageism



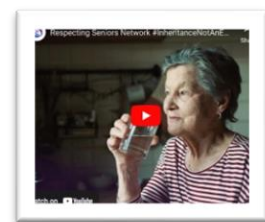
[Prevention](#)
[across the](#)
[continuum](#)



[We say No to](#)
[Elder Abuse](#)
 postcards



[Inheritance: not](#)
[an entitlement](#)
[videos](#) Including
 seven short film
 clips, posters
 and a [discussion](#)
[guide](#) to
 address myths
 on elder abuse



[The Library of](#)
[Life](#) a collection
 of stories and
 artwork as part
 of the
 Celebrating Life
 workshops



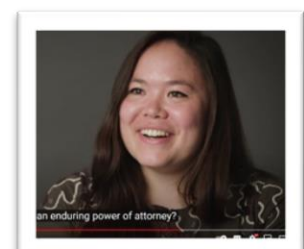
Helpful Resources

A [Conversation](#)
[Guide](#) to help
 community
 think & talk
 about ageing &
 end of life plans
 in a way that is
 safe & right for
 them.

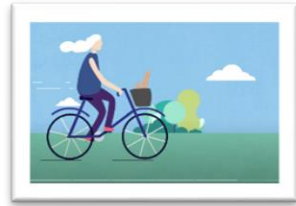


[What are the](#)
[chances video?](#)

Video to get
 people thinking
 about future
 planning



[Short video on Age Friendly principles](#)



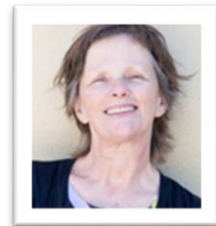
[Imagine a world without ageism video](#), Also see [Every Age Counts](#) for National Resources & Tools to challenge ageism



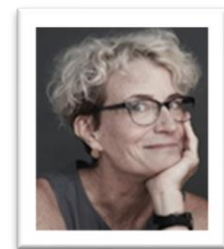
Canada recently launched an EAPN toolkit by the CNPEA called [Seniors Leading Change: A Future Us Initiative How to Build an Elder Abuse Prevention Network](#)



[Celebrate Ageing](#) is a Victorian-based not for profit combatting ageism and building respect for older people. Founded in 2013 by Dr Catherine Barrett (Victorian Honour Roll of Women), Celebrate Ageing utilises art and narrative based approaches to bridge the evidence - culture gap. Check out the vast array of inclusive and inspiring projects, campaigns, events and more.



Check out Ashton Applewhite's, [This Chair Rocks](#) and [Old School](#) (including relevant mailing lists) to get updates on the latest progress and resources including a clearinghouse of free and carefully vetted blogs, books, articles, videos, speakers, and other tools (workshops, handouts, curricula etc.) to educate people about ageism and help dismantle it.



Victorian Elder Abuse Prevention Networks

There are currently eight funded EAPNs in Victoria (details below).

Network	Organisation
Barwon Elder Abuse Primary Prevention (BEAPP) Network	Barwon Community Legal Service
Central Highlands Elder Abuse Prevention Network	Ballarat Community Health
Eastern Elder Abuse Network (EEAN)	Eastern Community Legal Centre (ECLC)
Everybody's Business Elder Abuse Prevention Network	MPOWER (Warrnambool)
North Metro Elder Abuse Prevention Network	Merri Health (North & West)
West Metro Elder Abuse Prevention Network	
Respecting Seniors Network	Peninsula Health
Southern Melbourne Elder Abuse Prevention Network	Better Place Australia

Evidence base (Links from Safe & Equal)

Key frameworks to inform and guide primary prevention work.

1. [Change the Story: A shared framework for the primary prevention of violence against women and their children in Australia](#) (Our Watch, Vic Health, ANROWS 2015)
2. [Putting the prevention of violence against women into practice: How to change the story](#) (Our Watch 2017)
3. [Family violence primary prevention: Building a knowledge base and identifying gaps for all manifestations of family violence](#) (State of Victoria, The Equality Institute 2017)
4. [Changing the Picture: A national resource to support the prevention of violence against Aboriginal and Torres Strait Islander women and their children](#) (Our Watch 2018)
5. [Pride in Prevention](#) (Rainbow Health Victoria 2020)
6. [Prevention of Violence Against Women with Disabilities: Workforce Resources for Action](#) (Women with Disabilities Victoria 2021)
7. [Dhelk Dja: Safe Our Way – Strong Culture, Strong Peoples, Strong Families](#) (Victorian Government 2020)

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