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ABOUT CHASE

CHASE brings together a group of over 30 academic staff, located mainly in the School of Health and Social Development, across both Burwood and Waterfront campuses. We also have a large number of honours, masters and PhD students under our supervision.

The group is multidisciplinary and multiprofessional, including public health, health promotion, health sciences, social work, occupational science and therapy, sociology, anthropology, disability studies, and psychology.

The CHASE vision is working collaboratively with communities, organisations and governments to promote social inclusion and to enhance the health and wellbeing of all, particularly those populations, communities and individuals who experience social exclusion.

In this newsletter we report on a number of projects, including two projects carried out by masters. We also report on four recently completed PhDs, as well as staff news.

UPCOMING EVENTS

Respect, Prevent Respond

Deakin University is proud to be hosting the second international conference, Respect, Prevent and Respond: working with diversity and intersectionality in the tertiary education sector. The conference will continue to have a focus on the prevention of, and response to, sexual harm.

The conference will be held 13-14 February 2020 at Deakin Downtown, Melbourne, Australia.

Further information see page 6.

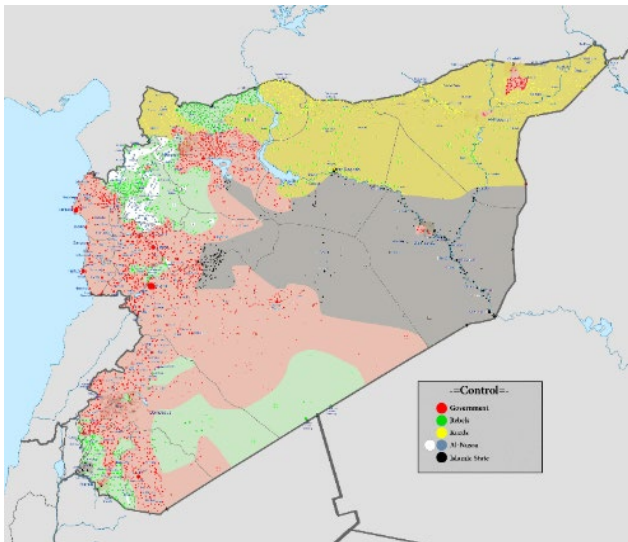
Website: chase-deakin.org.au/

Newsletters and other reports can be downloaded via the website

PROJECT UPDATES AND REPORTS

'Is anyone listening to us?'

A summary of a small school grant looking at Syrian settlement in Geelong, Victoria undertaken by Dr Kim Robinson, Senior Lecturer in Social Work, and Dr Greer Lamaro Haintz, Lecturer in Public Health and Health Promotion



Source: commons.wikimedia

On 6th August Greer and I gave a presentation to the School Research seminar. We outlined our interests and backgrounds in working in health promotion and social work with refugees and asylum seekers. Both of us have worked with migrants and have an interest in settlement programs with refugees, and in particular the lived experience of those moving into Regional areas.

We applied for a small grant, and wanted to interview newly arrived Syrian refugees who were arriving in Geelong on humanitarian visas. We have long been interested in the issues facing on and off shore processing of asylum seekers, human rights, and the various international instruments of law and protection. Both of us come to the field of migration studies with different theoretical approaches, including promotion of health and well-being, a critical political lens, and with a view to influencing policy.

In 2017 the number of refugees arriving in Australia effectively doubled the intake of previous decades. This is because most of the special one-off intake of 12,000 Syrian Conflict refugees that was announced by Prime Minister Abbott in 2015 in fact arrived in 2017. In addition, the annual intake of humanitarian entrants was increased to 16,250 in 2017-18. Most of these newly-arrived refugee families settled in regional areas of NSW, Victoria and Queensland.

The literature highlights the following key areas in relation to regional settlement:

- Access to housing
- Health and wellbeing – poor mental health, stress
- Employment: limited access, poor pay and conditions
- The treatment of children; access to education and support
- Refugee rights and family reunion

We wanted to know if this mirrors the experiences of people in Geelong. We obtained Ethics Approval from Deakin, and met with a key service provider in Geelong to discuss our project. We have run focus groups with newly arrived families, and they have told us the key issues for them are:

- Employment
- Access to education and training
- Housing
- Health



Source: flickr.com

Our informants discussed a number of barriers they faced, and in particular the stigma regarding assumptions about being a 'refugee':

"sometimes we not really happy to see that community that the Australians, especially that's the way they look maybe some of them, they mistaken the way they look at our, you know, background thinking that we kind of people who like maybe skilled with only jobs like pizza delivery or things like that. Feeling judged by Australian community re our employment prospects"

Our thematic analysis of the data highlights three key areas that we are now writing up, and presenting at conferences:

- Social Capital: networks and community, community strengths and resilience, aspirations
- Social injustice: racism, exclusion, stigma, discrimination, institutional (e.g. non recognition of overseas qualifications etc.)

- Global discursive context, human rights, international and national frameworks, legislation and policy

Our initial findings suggest we are working with a unique cohort of refugees, and we need to consider how best to support them so that they remain in Geelong. It is important that we utilize a strengths-based approach and that we engage in creative community work with new arrivals. Some joint projects with new and established communities have been established, but we are conscious that funding cuts have impacted greatly on service providers.

We have seen some positive interdisciplinary work in this space including joined up work with social workers, teachers, health workers, health promotion, activists and other NGOs. We hope that by raising these issues we can contribute to shifting discourse and promoting advocacy for policy change.

If you are interested in this topic or other refugee related issues please feel free to contact us.

Dr Kim Robinson and Dr Greer Lamaro-Hainz

A good place to raise a family

This program of research, led by CHASE member Dr Fiona Andrews, aims to explore the experiences of parents raising children in different urban settings in Australia. The research, which also involves CHASE member Dr Elyse Warner, involves collaboration with several local government partners.

Our third paper on the experiences of families raising young children in new, private apartment complexes was published recently:

- Elyse Warner & Fiona Andrews (2019). "Surface acquaintances": Parents' experiences of social connectedness and social capital in Australian high-rise developments. Published online in *Health & Place*.
<https://authors.elsevier.com/c/1ZPxu4ppjfdSk>

This research has received interest from the media; Elyse was interviewed on ABC Radio in Melbourne and Sydney and had an article published in *The Conversation*:
<http://theconversation.com/apartment-life-for-families-means-living-at-close-quarters-but-often-feeling-isolated-too-120983>

We are also pleased to announce that Emma Sutton, one of our Master of Public Health theses students, received a higher distinction for her thesis on 'Cohousing as a means to promote social inclusion'. This project will feed into

research Fiona and Elyse are undertaking as part of the HOME Deakin Research Hub on a project recently funded by the Lord Mayors Charitable Foundation and the Geelong Community Foundation: ' "Grey nesters": Can Tiny Houses provide an affordable housing model for retirees and others on low income?'

Dr Fiona Andrews

Building capacities for inclusion: Identifying the priorities of inclusion and mainstream capacity building for people with a spinal cord injury and post-polio syndrome

The National Disability Insurance Scheme (NDIS), through its Information, Linkages and Capacity Building Strategy, includes a significant focus on **capacity building of mainstream and community** 'to be inclusive and responsive to people's needs' (NDIA 2019). However, while building the capacity for inclusion is a critical activity, there is a lack of evidence about which capacities need to be built in order to meet the needs of people with spinal cord injury/damage (SCI), and people with post polio syndrome (PP).

In 2017, Spinal Life Australia received an ILC National Readiness grant from the National Disability Insurance Agency. Spinal Life Australia (in QLD), and their partner AQA (in Victoria), represent people with SCI. Spinal Life Australia also supports people with PP, in conjunction with Polio Australia and the Polio Network Victoria. The agencies reported feedback from their members about barriers to inclusion within community and mainstream services.

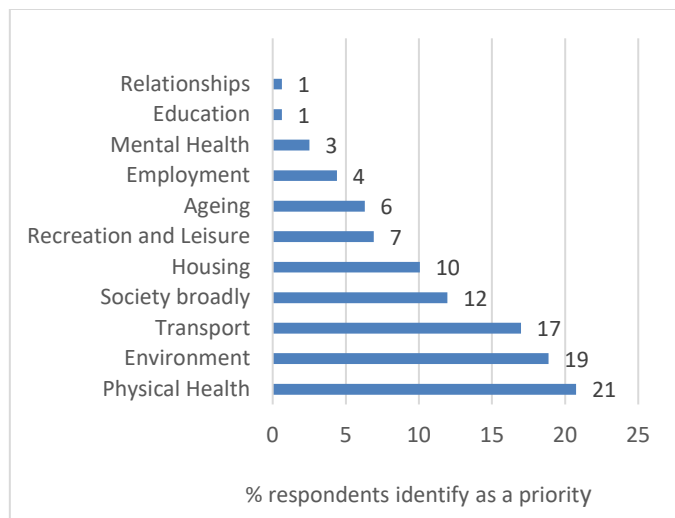
Spinal Life Australia contracted Deakin University (stage 1) and Swinburne University (stage 2) to undertake a research study. The focus was on what specifically needs to change in mainstream services for people with SCI and PP:

- Which services / businesses needed to change?
- Whose capacities needed to change?
- What capacities needed to change?
- What are the strategies for bringing about this change?

We included a focus on the service areas of: Health (physical and mental); Transport; Employment; Recreation and Leisure; Housing; Environment; Relationships/ social support; Finances; Education; and Ageing. People also made comment about disability services (and the NDIS).

Information was collected from 153 people with SCI and PP (in multiple states, both rural and urban). This includes a small number of people who made more than one response, for example participating in a discussion group as well as an interview or online survey.

In the main, the dominant capacity areas showing deficits were those of **knowledge, policy, attitudes, and infrastructure/resources**. The mainstream service area of **physical health** was consistently rated as the top priority for capacity building. This was closely followed by the **wider and built environment** (including buildings, public spaces, retail environments, community infrastructure such as footpaths and parking, as well as public attitudes), and **transport** services. Each of these areas is further documented in the final report, as well as more substantial reports being available for over 10 regions across QLD, Victoria and Tasmania.



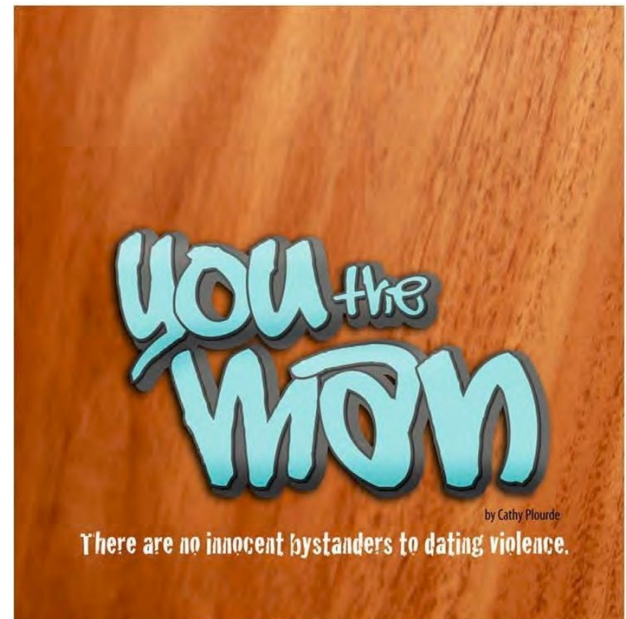
Aside from the important findings about the types of capacities that need to be built in each mainstream area, and suggested solutions by respondents, the research helps us further understand the concept of ‘capacity building’ which is fundamental to policy environments such as the NDIS. So far the research has been used to inform the advocacy efforts of organisations such as Spinal Life Australia, as well as the design of the NDIS Mainstream Capacity Building program.

Copies of the final report or regional reports can be obtained by contacting Erin Wilson ewilson@swin.edu.au or at <https://www.swinburne.edu.au/research/our-research/access-our-research/find-a-researcher-or-supervisor/researcher-profile/?id=ewilson>

Professor Erin Wilson, Robert Campain and Susan Hayward, Deakin and Swinburne Universities, 2019

NDIA (2019) *Strengthening ILC: A national strategy towards 2022*. p.7. <https://www.ndis.gov.au/community/strengthening-ilc-national-strategy-towards-2022>

Theatre-based education programs



Under the wings of Professor Ann Taket, CHASE has developed a suite of Theatre-based Education Programs (TEP) that aim to educate and promote supportive action around two significant public health issues: violence against women; and, trans and gender diversity. These are *You the Man* and *Being Frank* respectively. *Being Frank* was developed, and is produced, in partnership with Transgender Victoria. In addition, *The Thin Line* addresses issues around eating disorders. Each of these programs features a one-actor performance and a panel discussion by local support services. These theatre-based education programs have received high acclaim around Victoria. *You the Man* was a finalist in the VicHealth 2014 Victorian Health Promotion Foundation Awards in the category ‘building health through art’.



Later this year, Ann is retiring and has – of the 5th August 2019 - passed the baton onto me to manage the TEP in my new role as Associate Lecturer (Theatre-based Education Programs) (0.2 capacity) with Professor Lisa Hanna. For those of you may not know me, I finished my PhD – a reproductive health study with young women who have been trafficked into the sex industry in Nepal - at Deakin University in 2018. Since 2015, I have also worked as a

sessional tutor at Deakin University and have taught across a wide range and post-graduate and under-graduate health units. Along with my PhD, I have a Master of Creative Arts Therapy and a Graduate Certificate in Business Management (Project Management), all of which will be seminal to my new role. If you'd like more information about the TEP, Deakin University Staff can email me through the staff system. You can also call me on my new phone line (03 9244 5835). Alternatively, you can email our team through the TEP enquiries email: enquiries-tep@deakin.edu.au.

Best wishes to Ann in her new, forthcoming life stage and thank you for imparting your vision and daring to do health artfully.

Dr Tricia Ong

“We need much more of the same”: an Evaluation of Equinox Gender Diverse Health Centre

Equinox is Australia's first peer-led trans and gender diverse (TGD) primary health service. According to the available literature, by employing TGD staff, Equinox is also an internationally unique and pioneering service. It operates in a community health setting and is a service of the Thorne Harbour Health (THH), an LGBTI community-led organisation.

Equinox's focus includes promoting overall health and wellbeing and addresses a wide range of social and biological determinants of health. It operates on the principles of person-centred care and provides:

- a trans-affirmative, safe space with staff trained in cultural safety;
- non-gendered bathroom facilities;
- a TGD community notice board; and
- TGD specific literature and health resources.

The available health resources are specific to the Australian context, and include:

- an Informed Consent Model for Initiating Hormone Therapy for TGD People;
- guidelines for providing STI testing services to the TGD community; and
- an information booklet introducing clients to other THH services (eg Alcohol and Other Drugs (AOD), counselling, family violence counselling/prevention).

Dr Maria Pallotta-Chiarolli was commissioned in 2017 by Thorne Harbour Health to undertake a mixed-method

evaluation in order to review and develop Equinox services.

The evaluation report:

- Presents a brief overview of the available Australian research into TGD health and access to health services;
- Identifies Equinox best practice;
- Presents a suite of recommendations and practical options (such as resourcing, strategies, actions, future directions) to improve Equinox' service provision;
- Makes recommendations regarding how Equinox may be best placed to support planning and implementation in other TGD health services, particularly in the new and emerging regional services.

The report can be downloaded from:

<https://thorneharbour.org/about/publications/>

<https://equinoxdotorgdotau.files.wordpress.com/2019/06/equinox-evaluation-report.pdf>

Citation: Pallotta-Chiarolli, M.; Wiggins, J. & Locke P. (2019). “We need much more of the same”: An Evaluation of Equinox Gender Diverse Health Centre. Melbourne: Thorne Harbour Health.

Dr Maria Pallotta-Chiarolli

The experiences of trans and gender diverse young people and their service providers at headspace

Trans and gender diverse young people are a minority group that experience significantly worse mental health than their cisgender peers. The experiences of trans and gender diverse young people in accessing mental health services has not been researched adequately. The aim of this study is to describe the experiences of trans and gender diverse young people and their service providers at headspace, Australia's National Youth Mental Health Foundation.

A qualitative descriptive design was used to interview nine trans and gender diverse young people and four service providers from two headspace centres in the North and Western suburbs of Melbourne.

Results from the interviews with both groups revealed four main themes: Reasons for Help Seeking; Centre Culture; Safe Space; and Service Delivery. Findings indicate that the young people attending these services had largely positive experiences in accessing mental health support at headspace. They did however, make recommendations for

service improvement around accessing hormone replacement therapy at headspace.

Providing a safe and supportive environment for trans and gender diverse young people enables them to have a positive experience, outside their usual everyday experiences of discrimination and stigma. headspace and other services aiming to be gender inclusive should take into consideration the importance of normalising discussions on gender diversity with all young people, using symbols such as flags and badges as clues of inclusivity, providing ongoing training to service providers around trans and gender diverse issues, and ensuring that doctors working at the centres are able to prescribe hormone replacement therapy if desired by the young person. Establishing these recommendations as standard practice would ensure more a positive and inclusive experience for trans and gender diverse young people accessing mental health support.

This project was carried out by Amber Weller for her major thesis, carried out as part of her MPH, supervised by A/Professor Liz Hoban, Professor Jo Williams, Associate Professor Ashleigh Lin (Telethon Kids Institute), Alison McRoberts (Orygen), and Professor Paul Amminger (Orygen and the University of Melbourne).

Exploring women's experiences of the Voices of Women mentoring program

Women's participation in decision-making positions and politics is important to influence policies that promote gender equality and are intolerant to any form of violence against women. While women's education and empowerment has progressed, they rarely occupy leadership positions. The 'Voices of Women' project implemented by Eastern Health is concerned with empowerment for women by women. The mentoring program was one of the three programs implemented for this purpose. The aims of the study were to:

- identify the impact of mentoring for women through exploring their experiences of it
- identify at an early stage of this program, the factors that were conducive to a positive mentoring relationship and experience.

The study was implemented as a formative evaluation and was carried out three months after the implementation of the mentoring program. Ethics approval was sought before commencing the study and mentees were invited to participate in the study. Semi-structured interviews were used to capture the women's experiences. Systemic review

of literature provided the knowledge and evidence base for analysing the impact of the program.

Through the experiences shared by the mentees, this study was able to capture the impact of a community-based mentoring program for women in which the mentees were guided and supported by women in the community with the relevant skills and knowledge. The study also helped elucidate the factors that contribute to a successful mentoring program that resonated with the available evidence base gathered through the review of literature. The narratives by the women in the study also reflects on mentoring as an agent of social change in the path towards achieving gender equity.

This study helps demonstrate through the experiences of women in the community, the need for mentoring to be a key strategy for women's empowerment and gender equity. Along with the significance of the study, the strengths and limitations of the study are also discussed.

Recommendations for strengthening community-based mentoring programs such as considering intersecting factors and cultural needs in program development, ensuring evidence-based frameworks that incorporate effective risk management strategies and considerations for sustainability of outcomes are presented.

This project was carried out by Hannah Stephen for her major thesis, carried out as part of her MPH, supervised by Professor Ann Taket, Josette O'Donnell (Eastern Health) and Irene Dunne Pfeiffer (Eastern Health).

CHASE EVENTS 2020

Respect. Prevent. Respond Conference – Preventing and Responding to Sexual Harm in the Tertiary Education Sector

In February 2019, Deakin sponsored the inaugural two-day Respect. Prevent. Respond Conference, which brought together a wide range of stakeholders to share ideas, broaden understanding and to create opportunities for sector wide collaboration in the elimination of sexual harm in the Higher Education, VET and TAFE sector.

The participants comprised academics, researchers, primary prevention practitioners, sexual response personnel, university managers and executives as well as students from 32 universities and TAFEs from both Australian and overseas, and 15 government, community and not-for-profit agencies. Although the scope of the conference was limited to the tertiary education sector,

feedback from participants was that many of the research, policy and practice presentations also had applicability in other settings.

Whereas many conferences replicate the siloes or divisions within communities, one of the remarkable features of the Respect. Prevent. Respond Conference was that it brought together representatives from across universities who often don't work together, e.g. student services and academic staff, or vice chancellors and students. As such, the conference modelled how bringing together all the different stakeholders both enables new dialogues to develop and rapid exploration of the feasibility of new ideas given the wide range of stakeholders present. This made for a conference that was not only stimulating but enabled participants to leave feeling that something worthwhile had been achieved.

Building on this year's success a second conference will be held on February 13-14 in 2020. The 2020 conference has the theme, 'Working with diversity and intersectionality in the tertiary education sector.' The conference will continue to have a focus on the prevention and response to sexual harm. We hope that the 2020 theme will provide an opportunity to expand and build upon the conversation in 2019 to ensure that diversity and intersectionality are at the forefront of our work.

This year we have made improvements to our conference following the feedback and advice of participants and stakeholders. This includes ensuring that at least a third of our Conference Reference Group members are students. At Deakin, we firmly believe that our students are the University's true north and we look forward to working in partnership with them. We have ensured that another third of our Conference Reference Group are external stakeholders, so that our sector can be well linked to practices and activities with community and government agencies.

The conference website can be found at <https://www.deakin.edu.au/RPRconference>

The conference program will be posted on the website as soon as the program is finalised.

Registration is open already:

- Early-bird registration (prior to 30 November 2019): \$495
- Standard registration (after 30 November 2019): \$550
- Student registration (if purchased in 2019, tickets are limited): \$285

Prices include GST.

RECENTLY COMPLETED PHDS

Chloe Wadley: *The Learn to Play Program in specialist schools*

Supervisors: Professor Karen Stagnitti and Associate Professor Genevieve Pepin

Pretend play has been linked with a number of key areas in childhood development, including language, social skills and cognition. Children with developmental delay and disability lack the ability to engage in pretend play, impacting on their socialisation with peers and participation in childhood occupations such as a player, student and learner. Current literature surrounding pretend play and its link with typical childhood development is vast, however literature on pretend play for children with developmental delay and disability within specialist schools is limited.

The aim of this thesis is to present research into play programs (more specifically, the Learn to Play Program) for children with developmental delay and disability in their first year of school (aged 5-7 years) attending either a special or special development school (SDS) in Victoria, Australia. The Learn to Play Program aims to develop the pretend play skills of children with delayed or non-age appropriate pretend play skills, thus enhancing their engagement in childhood occupation. Three separate studies were carried out.

Study One included 31 staff members (integration aides, teachers, therapists and assistant principals) across seven specialist schools in Victoria, Australia. The aims of this study were to investigate staff perceptions on the importance of pretend play for development and learning, any prior experience the school had in play-based programs and the supports/resources specialist schools would require to implement a play-based program. The findings of this study demonstrated that staff value pretend play in childhood development and learning. Four of the seven schools had experience in running a play-based program. Staff felt challenged in co-playing with children with diverse skills, following a child's lead in play and finding time within a busy curriculum. Staff stated they would need training to be able to run a play-based program within their curriculum.

Study Two focused on the implementation of a Learn to Play Program across four of the seven specialist schools over a seven-month period for 38 prep students (children in their first year of schooling). Children were assessed at baseline and follow up using a variety of measures. The results showed statistically significant changes in a child's pretend play, object substitution, expressive language, social skills and academic competence. The Learn to Play

program had a large effect on the narrative skills of children participating in the study, and a medium effect on a child's forgetting scores, assertion and academic competence.

In order to determine whether play predicts language, social, academic, narrative and emotional development, a Generalised Estimation Equation (GEE) was used. The results demonstrated that object substitution at baseline (measured through Number of Object Substitutions) predicted expressive language (recalling sentences) ($p = .000$), narrative: Mean Language Utterance (MLU) ($p = .015$), social skills ($p = .000$) and academic competence ($p = .000$) at follow up. A child's elaborate play at baseline plus time predicted social skills at follow up ($p = .000$). Elaborate play at baseline predicted narrative MLU ($p = .016$), expressive language (recalling sentences) ($p = .009$) and academic competence ($p = .001$) at follow up.

Study Three focused on how the schools implemented Learn to Play in Study Two, whether school staff still valued pretend play in a child's development and learning and finally, the confidence of school staff in implementing Learn to Play within their schools. Results demonstrated that pretend play was valued by school staff, staff were challenged in co-playing with children, following a child's lead and valued the importance of supportive staff and management in order for a Learn to Play Program to be effective within their schools. The importance of parent involvement, play assessment, management support, motivation of staff, training for staff and an adaptable program that could be implemented based on the needs of individual schools was identified. These factors were found to be critical for the sustainability of a Learn to Play Program within specialist schools.

Elena Jenkin: Human rights in context: positioning Pacific children with disabilities' priorities

Supervisor Professor Erin Wilson

'Children with disabilities have a voice, they want to say something, but up until now we haven't listened. They want to help their communities, they have good ideas,' Ishmael Leanave, co-researcher, PNG.

Listening to children with a diverse range of disabilities and involving them in research is crucial to understanding more about their lives and ensuring they are participating in decisions that involve them. In turn, this can enhance their inclusion in all facets of society and achieve positive social change. Fulfilling children with disability's right to not only have a voice and be heard but also be responded to, has clear implications for research as well as all forms of public consultation, service planning and evaluation. This also

necessitates an ability to translate human rights findings to 'local meanings and existing cultural values and practices' in order to address human rights from the ground up.

Whatever or however the findings are termed, children with disability, their families, community and policy makers require access to them in order to overcome the significant disadvantage children with disabilities experience in all aspects of life compared to children without disability.

This thesis by publication developed an inclusive method by which to listen to and understand the human rights experiences and priorities of Pacific children with disabilities, in order to effect change. Grounded in community development, decolonial theory and human rights, the conceptual framework informed the participatory and inclusive methods for Pacific indigenous co-researchers to listen to 89 children with disabilities in Papua New Guinea (PNG) and Vanuatu. The children's priorities and aspirations were then analysed against the Convention on the Rights of Persons with Disabilities (CRPD) as a method to identify children with disabilities' human rights priorities.

Findings were dominated by children's overarching desire to contribute to their family and community. Human rights findings were broad, covering a range of human rights articles, suggesting that children with disabilities have a diverse breadth of experience and priorities. Clear impediments to human rights were identified by children, leading the way for specific work to be undertaken to tackle human rights barriers so that children can realise their aspirations. A component of this research focused on inducing social change both throughout the research process and also via the dissemination of the findings. Findings were shared widely, using a variety of relevant means, and changes were captured across the research process.

Social justice research is but one tool to catalyse change towards a more inclusive world pertaining to children with disabilities. This method is not the only method but it has proven to have utility with not only the production of rich findings as reported by the child participants, but via immediate uptake by the sector in the form of further research in Cambodia, Ethiopia and, soon to be, Indonesia, as well as the production of additional toolkits and resources to further guide inclusive practice. This thesis advocates for ongoing inclusive practice to occur, urging both researchers of children, development and humanitarian workers to ground their commitment within community development and decolonial theory, human rights and participatory methods, in order to safely and ethically support children with disabilities to actively participate in all aspects of society.

Greer Lamaro Haintz: Theorising community engagement in sexual and reproductive health promotion in South Africa

Supervisors: Professor Ann Taket and Associate Professor Lisa Hanna

South Africa experiences the highest burden from sexual and reproductive health (SRH) issues globally, and the greatest burden from HIV and AIDS of any country. Various initiatives have been undertaken over successive decades to address this burden, including community-based prevention and health promotion programs. Community engagement is important for the effectiveness and sustainability of community-based interventions. However, community engagement is highly contextual and can be challenging, particularly regarding sensitive health issues such as SRH. Given the plethora of community-based SRH promotion interventions operating in South Africa, this research aimed to understand:

1. What does the concept 'community engagement' mean in the context of communities in South Africa?
2. What factors influence community engagement in community-based SRH promotion either positively or negatively in communities in South Africa?

A social constructivist approach, informed by symbolic interactionism and intersectionality, was adopted to explore how individuals' experiences of community engagement are formed in relation to culture, class, gender, historical and political context, and social norms. A qualitative ethnographic and participatory methodological approach was applied.

Data were collected from January to December 2012, in five communities of the Eastern Cape with the support of a local field assistant in each setting. Purposive, snowball, convenience and opportunistic recruitment methods were used to recruit community members aged 13 years and over, and with a range of experiences of engagement in community-based SRH promotion. A total of 78 participants contributed data through various means including semi-structured interviews, focus group discussions, opportunistic discussions, and other ways determined by participants themselves such as poetry and practical demonstrations of SRH promotion work. Data collection was undertaken in English language and isiXhosa. Immersion, observation and a reflective diary were also used by the researcher. Data were analysed using inductive thematic approach with grounded theory methods, and semiotic analysis.

The meaning of 'community engagement' was multi-faceted and contextual. Local meanings emphasised a focus

on whole-of-community wellbeing, inclusiveness and connectedness, and were linked to the widely held cultural concept of Ubuntu. Findings revealed four key multi-faceted factors influencing community engagement in SRH promotion: knowledges, stigma, connectedness, and acceptance/denial. These factors operated both independently and interactively, and at both the individual and community levels, to influence community engagement. The interactions of these four factors contributed to the emergence of three superordinate themes which influenced community engagement in SRH promotion: i). representations of SRH issues, ii). the perceived relevance of SRH issues and SRH promotion among the community, and iii). the relational environment in which SRH promotion occurs. These themes also operated independently and interactively, and at individual and community levels. The four key factors and three superordinate themes could act as either facilitators or barriers to community engagement in SRH promotion depending on the context. These factors and themes were conceptualised into a model for understanding influences on community engagement in SRH promotion in South Africa.

Community engagement in SRH promotion in South Africa can be understood in relation to Bourdieu's concepts of habitus, fields and capitals. Multiple contextual influences interact to inform community understandings of engagement, and individuals' experiences of community engagement in SRH promotion. This research is the first to specifically draw the concepts of community engagement and SRH promotion together in a conceptual model, and with specific application to the cultural context of Xhosa communities in South Africa. This model can be used as a resource for health promotion practitioners to help inform the design and implementation of future health promotion interventions.

Rojan Afrouz: Perceptions and understandings about domestic violence among Afghan women in Australia and barriers to seeking help

Supervisors: Professor Beth Crisp and Professor Ann Taket

The main aim of this study was to understand Afghan women's perceptions of domestic violence and their barriers to seeking help. The voice of Afghan women has been little heard, particularly in Australia and other western societies, despite the considerable number living in those societies. While Afghan women's families and communities have silenced some of them, others have not had the opportunity to talk about domestic violence. Their experiences and perspectives deserve particular attention

because research suggests that domestic violence is more likely to be considered acceptable behaviour in Afghanistan than elsewhere.

Given the high visibility of initiatives that aim to tackle domestic violence in Australia, it is possible that Afghan women's perceptions of and beliefs about domestic violence change after their arrival in the country. Furthermore, the numbers seeking assistance for domestic violence, particularly from formal services, might be expected to improve, since such services are more available and accessible in Australia. Settling in Australia, nevertheless, might create some challenges that make help-seeking more complicated and ambiguous. Hence, this study also attempts to illustrate those obstacles that make Afghan women more hesitant and thus less able and willing to seek help.

The study involved semi-structured interviews with 21 Afghan women who had been living in Australia for between 6 months and 10 years. Informants were recruited by advertising the research flyer in agencies and community organisations, public places, online social media, and by word of mouth. The interviews were conducted face to face or by telephone, in either Farsi (Persian) or English according to participant's preferences. Interviews were audio recorded and transcribed verbatim. An inductive analysis of the data was used to explore details and build main themes, and then categorise the overarching themes.

While women's understanding of domestic violence varied, their definitions showed a thorough awareness of what constitutes domestic violence, with special emphasis on non-physical forms of violence. As such, they revealed the influence of Australian understandings of domestic violence. Many Afghan women also commented on the gender expectations and roles that put women in a subordinate position and made them more vulnerable to domestic violence. Moving to Australia had enhanced these women's possibilities, self-confidence and skills and inspired many to go beyond traditional stereotypes and seek out options previously denied to them on the basis of their gender. However, their attempts at realising gender equality often met the disapproval of the family or wider Afghan community. This was particularly evident in decisions over the hijab and arranged marriage.

Some women spoke about their experiences of domestic violence, mainly psychological and emotional violence. Although women insisted that domestic violence was prevalent and widespread in both contexts, many remarked that Afghan women were less vulnerable to physical violence in Australia than in Afghanistan. Reasons suggested for this included the existence of legal

protection, the availability of domestic violence services, greater gender equity in Australia and less influence of conservative Islamic interpretations of women's rights in the Afghan community.

While women's vulnerability had decreased, many barriers still existed for those women who wanted to leave an abusive relationship and seek help. The barriers that hindered Afghan women were embodied in community pressure to stay in marital relationships, family demands that they preserve their reputation and honour, children's wellbeing, and individual concerns in the new context such as women's English language proficiency, dependency, and fear of going through an unfamiliar help-seeking process.

Despite the move to Australia giving Afghan women new opportunities and possibilities, it also brought new concerns and uncertainty in relation to seeking help. Afghan migrant women were more aware of oppression against women and the role of patriarchy and gender inequality than women in Afghanistan, and they hoped to address those issues now they lived in a society that offered more freedom to women. Eliminating domestic violence, however, seemed neither straightforward nor quick. Besides, migration brought new challenges in the form of intersecting culture, religion, language and class that hindered women from achieving what they wished for.

Hence, although Afghan women's situations had improved, they were not fully successful in gaining informal or formal support in the new context and, by migrating and settling in Australia, had possibly lost some of the family and community support they had previously received.

CHASE NEWS

Promotions

Our congratulations to:

- Dr Sophie Goldingay on her promotion to Associate Professor
- Dr Joanne Watson on her promotion to Senior Lecturer

Awards

Our congratulations go to Professor Karen Stagnitti on her recognition as an Emeritus Professor in her retirement.

Retirements

Dr Linda Wilson retired in September 2019, and amongst other things, she is looking forward to pursuing her love of dog trials.

Professor Ann Taket retires at the end of December 2019, She is looking forward to a year's holiday, and learning to weave. She also looks forward to remaining involved in a few projects and in continuing to write, so will maintain some connection to Deakin.

We wish them both well in pursuing their passions.

Forthcoming books

CHASE members are involved in two books to be published by Routledge next year.

Health equity, social justice and human rights, second edition

Fiona Mackay and Ann Taket have completed the manuscript for the second edition of this book, to be published by Routledge in early 2020.

Important links between health and human rights are increasingly recognised, and human rights can be viewed as one of the social determinants of health. A human rights framework provides an excellent foundation for advocacy on health inequalities, a value-based alternative to views of health as a commodity, and the opportunity to move away from public health action being based on charity.

This text aims to demystify systems set up for the protection and promotion of human rights globally, regionally and nationally. It explores the use and usefulness of rights-based approaches as an important part of the toolbox available to health and welfare professionals and community members working in a variety of settings to improve health and reduce health inequities. Global in its scope, Health Equity, Social Justice and Human Rights presents examples from all over the world to illustrate the successful use of human rights approaches in fields such as HIV/AIDS, improving access to essential drugs, reproductive health, women's health, and improving the health of marginalised and disadvantaged groups.

Understanding human rights and their interrelationships with health and health equity is essential for public health

and health promotion practitioners, as well as being important for a wide range of other health and social welfare professionals. This text is valuable reading for students, practitioners and researchers concerned with combating health inequalities and promoting social justice.

As well as being completely updated, the second edition expands the coverage given in the first edition to include specific chapters on the rights of the child; the refugee convention; human rights for people with a disability, and elimination of racial discrimination. The chapter on people with a disability was contributed by Joanne Watson, Kate Anderson, Patsie Frawley and Susan Balandin.

Sustaining social inclusion

Beth Crisp and Ann Taket are completing work editing the manuscript for this book, which should be available in mid 2020, published by Routledge. The book contains chapters by a number of CHASE staff and associated fellows as well as colleagues from Australia and overseas. It is the third in the series of edited books on social inclusion and exclusion produced by CHASE members.

This new book will explore what different understandings of sustainability mean in respect of social inclusion in the variety of fields that deal with human health and wellbeing. The book is global in its scope, with chapters relating to socially inclusive health and social welfare practice internationally. The book is structured around case studies of five different mechanisms for sustaining social inclusion: policy processes which are socially inclusive; sustaining programmes which promote social inclusion; sustaining organisations which promote social inclusion; initiatives which have social inclusion as the expected outcome; and socially inclusive development. The appropriate mechanism or mechanisms will vary according to circumstance and it is important to recognise that each of these mechanisms has a role in sustaining social inclusion.

This research-based book is relevant to a wide range of different readerships globally. The book addresses issues of concern for those engaged in debates about the provision of health, social welfare and other public services. It will be of interest to academics, policy makers and practitioners in a wide range of fields, including public health, health promotion, health sciences, history, medicine, philosophy, disability studies, social work, social policy, sociology and urban planning.

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