

# WHAT IS A PUBLIC HEALTH AND PRIMARY PREVENTION APPROACH?

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# What is a public health approach?

- Evidence-based
- Population-based/ universal
- Interdisciplinary
- Intersectoral
- Based on the ecological model
- Emphasises prevention

(Krug, et al., 2002)

## COORDINATED COMMUNITY ACTION TO PREVENT FAMILY VIOLENCE



# Four steps of public health strategies

1. Defining the issue, its causes, consequences, and prevalence
2. Identifying the risk and protective factors
3. Developing and evaluating effective prevention interventions
4. Implementing effective interventions widely across a range of settings and monitoring the impact

(World Health Organization, 2004).

# Step 1: Defining the issue, its causes, consequences, and prevalence



Waitematā project report, 2016

# Step 2: Identifying the risk and protective factors

## Protective factors

- Non-violent social norms
- Connections and social supports
- Safe relationships
- Strong cultural and gender identities

## Risk factors

- Exposure to harm/violence
- Lack of social support and resources
- Harmful social norms
- Inequalities

# Step 3: Developing and evaluating effective prevention interventions



## Step 4: Implementing effective interventions widely across a range of settings and monitoring the impact





# So... what is not a public health approach?

- Social work and counselling support with individuals, couples, whānau
- Working only with people who have experienced or perpetrated violence
- One-off activities and events
- Education programmes, including stopping violence programmes

# Why public health?

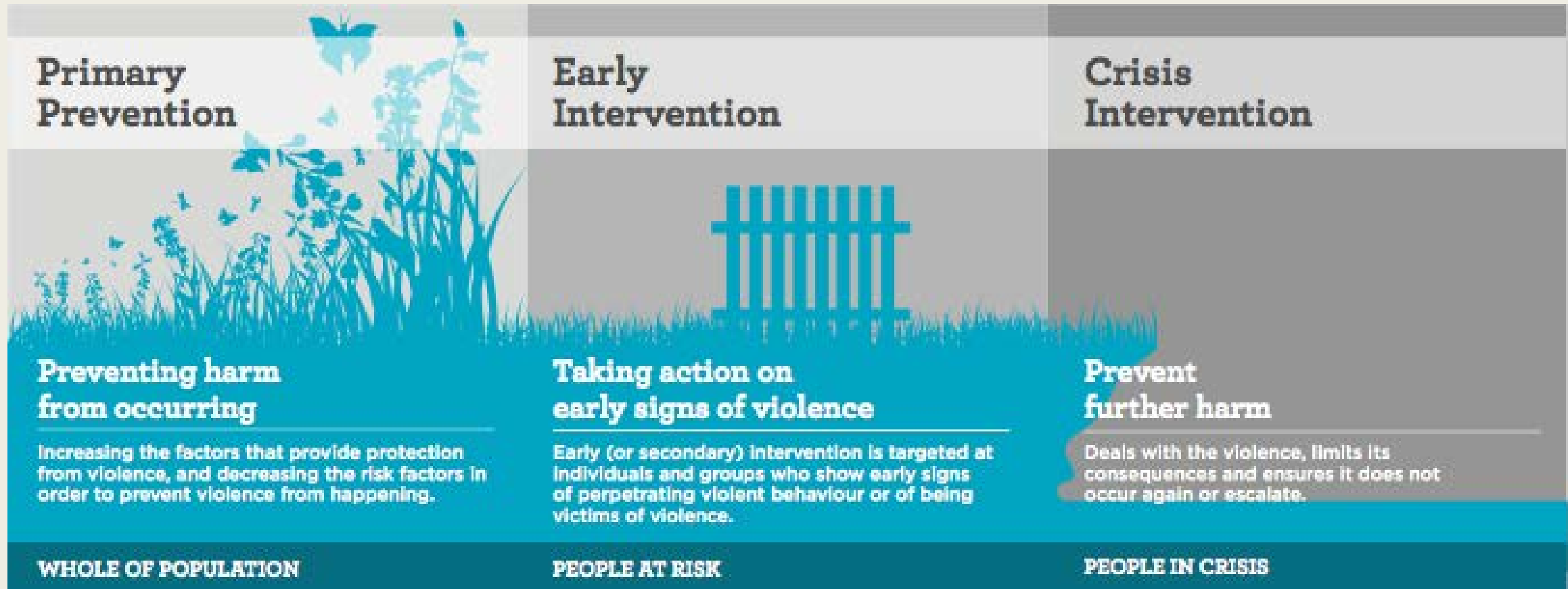
- Size of the problem = epidemic (Roper, 1987)
- Address the underlying factors that contribute to violence to reduce the overall rates of violence
  - *Prevention*
- It works!

(World Health Organization)

# What is primary prevention?

Development, implementation and evaluation of universal interventions (targeting whole communities regardless of levels of risk) that aim to stop violence by addressing the underlying causes and risk factors for perpetration and victimisation

(World Health Organization, 2007)



Waitematā project report, 2016

### **INDIVIDUAL**

The developments experiences and personality factors that shape a person's response to stresses in their environment including their childhood experiences, their personal attitudes, values and beliefs.

### **WHĀNAU**

The intimate interactions a person has with other individuals, their family, whānau, and friends including their attitudes, values and beliefs.

### **COMMUNITY**

Community attitudes, values, and beliefs, and the formal and informal social structures that guide social relationships.

### **INSTITUTIONAL**

The structures and practices of organisations and institutions including economic and social policies and systems.

### **SOCIETAL**

The culture, values and beliefs that shape the other levels such as rigid gender norms, inequity based on gender, ethnicity, sexual orientation, attitudes towards disability and the value of children and older people.

### **HISTORICAL**

Consideration of historical trauma, intergenerational abuse, adverse childhood experiences and limited safe family and whānau support. For Māori the impact of colonisation in creating generations of social exclusion and layers of depression.

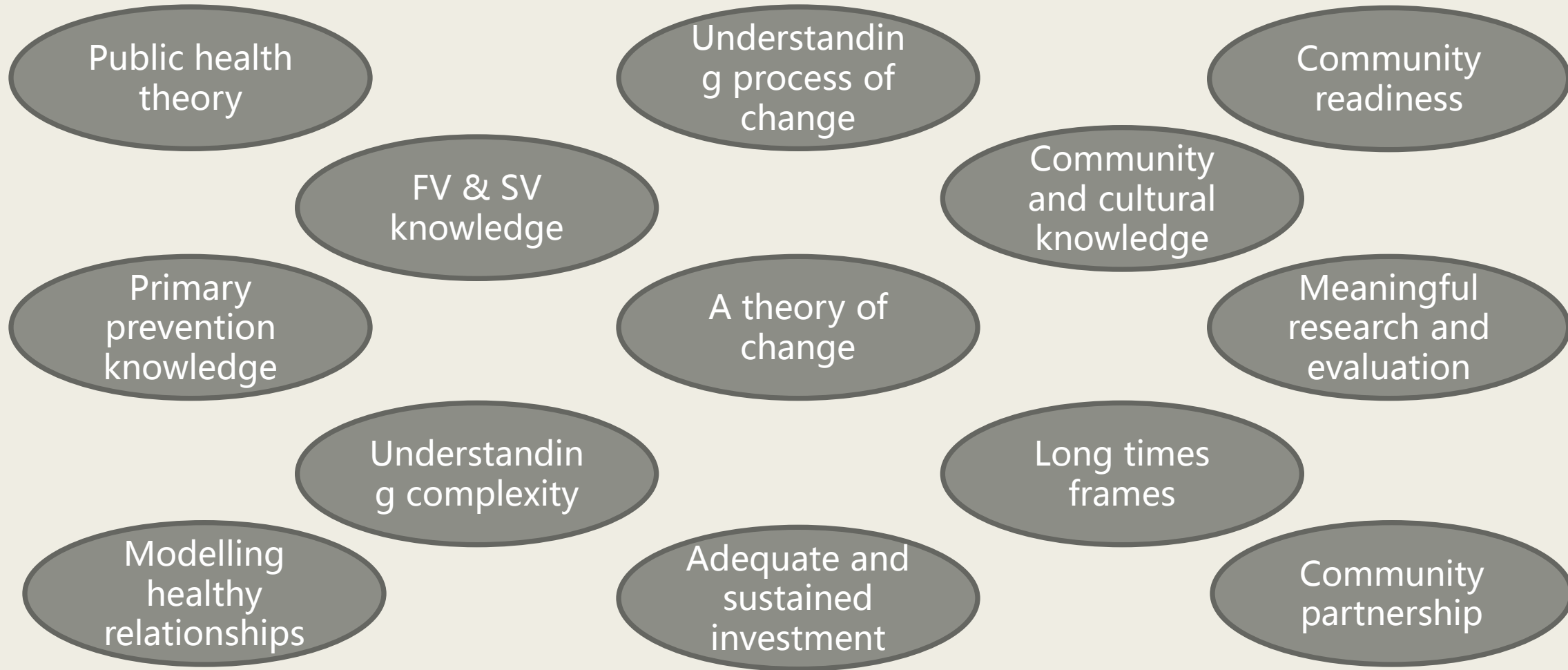
Waitematā project report, 2016

# Challenges of public health and primary prevention

**Theory = black and white v. Practice = grey**

- Implementation challenges – complexity
  - Investment: a question of scale
    - *Government spends \$1.4b p/a addressing family and sexual violence*
    - *Only \$25m or 1.6% on primary prevention*
- (Ministerial Group on Family and Sexual Violence, July 2015)*

# What does it take?



ETC!...

*Kua tawhiti kē to haerenga mai, kia kore e  
haere tonu.*

*He nui rawa o mahi, kia kore e mahi tonu.*

*You have come too far not to go further.*

*You have done too much not to do more.*

*Ta Himi Henare (Sir James Henare)*



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