

# THE IT'S NOT OK CAMPAIGN: CREATING CHANGE TO END FAMILY VIOLENCE IN NEW ZEALAND

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**Background** A primary prevention and social change approach is needed to address high rates of family violence in New Zealand and create safe communities and families.

**Aims/Objectives/Purpose** The national 'It's not OK' campaign aims to change behaviours; mobilise communities; and address social attitudes that support family violence. The current phase aims to increase people's help-seeking and encourage friends/family to take action.

**Methods** The Campaign's multi-layered approach is underpinned by social marketing and community development principles. It involves media advertising; partnerships with sports groups, councils, businesses, and networks; media advocacy and training; campaign champions; information line; website; printed and online resources; and research and evaluation.

**Results/Outcome** Reach and retention monitoring consistently indicates the recall of the campaign is above 90%. Eighty-one per cent of people believe they could influence someone to change their behaviour; and 31% have taken some action as a result of the campaign (discussed it with friends and family, or asked for help). For Maori and Pacific peoples these figures are higher. Service providers and Police report increased help-seeking, and a more supportive environment for family violence work.

**Significance/Contribution to the Field** The Campaign is one of the few social change campaigns to have success across different levels of the ecological model, with evidence of personal behaviour changes; increased help-giving by family and friends; mobilised communities, and a shift in social attitudes.

provider resources to link clinical practice with three community programmes: *Tai chi: Moving for Better Balance*, *Stepping On*, and the *Otago Exercise Programme*.

**Significance/Contribution to the Field** People aged  $\geq 65$  years are the fastest growing segment of the US population and are particularly vulnerable to falls and fall injuries. To reduce falls, we need a comprehensive approach that incorporates fall prevention into routine clinical practice and links health care practice to community-based fall prevention programmes.