RESPONSE TO HONOUR BASED ABUSE CALL FOR EVIDENCE

Harmful Practices
Strategic Partnership
(HPSP)



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The Harmful Practices Strategic Partnership is a pan London, by and for led partnership of statutory, non-statutory and by and for led organisations and other stakeholders in the violence against women and girls (VAWG) and domestic abuse sectors. It is co-ordinated by the Coaction Hub, a partnership project between Asian Women's Resource Centre and Standing Together Against Domestic Abuse.

The HPSP acknowledges that whilst harmful practices and so called 'honour' based abuse occur in all cultures, Black and minoritized women are disproportionately at risk. Women face additional barriers arising from racialised discrimination, hostile immigration policies and more recently the impact of COVID 19 which disproportionately impacted people from Black and minoritized communities. The HPSP also acknowledges that people who identify as LGBT+ may be particularly at risk of harmful practices, and that these forms of harmful practice may differ as a direct result of their sexual orientation or gender identity. We recognise the importance of an intersectional approach when addressing risk and need, and to consider intersecting characteristics including race, sex, gender, sexuality, and disability.

DEFINING 'HONOUR' BASED ABUSE



What forms of violence against women and girls are motivated by so-called 'honour'?

In order to address this question, we first need to define what we mean by so called 'honour' based abuse (HBA). We know that all forms of violence against women and girls can be motivated by 'honour', including in white communities, and so we need to contextualise 'honour' as that which underpins the perceived notion that patriarchies use to legitimize oppression, abuse and control of women and girls.

The HPSP would contest the use of so-called 'honour' based abuse as a catch all term to include 'honour' based abuse, forced marriage and FGM. This obscures a range of forms of abuse, including spiritual abuse, dowry abuse, caste based abuse, virginity testing and others. The HPSP uses the term harmful practices as a much broader definition to include a wider range of abuse.

In order for victims and survivors of harmful practices to receive adequate responses we need a shared definition, which moves beyond a criminal justice, 'incident or crime' focus. We know that many victim-survivors do not engage with the criminal justice system, and we also know that harmful practices, underpinned by coercive control, can be continuous in victim-survivors' lives. We are concerned that narratives around harmful practices tend to focus solely on 'honour' killings and 'high risk' incidents, obscuring victim-survivors day to day experiences of abuse.

There is a lack of training and understanding in the statutory sector, including the police, which prevents early intervention and HBA



therefore becomes visible when the risk is at crisis levels of potential homicides. There needs to be a definition of 'honour' based abuse that recognises the spectrum of forms of abuse and risk levels that it encompasses.

We are also aware that HBA is often identified as domestic abuse, but with a lack of understanding of the nuances of and understanding of risk within a harmful practices' context. An example of this is within MARACs where harmful practices cases often do not receive the expertise needed to mitigate risk, nor is data being kept to understand these cases.

We would use the following definition:

Harmful practices, including so called 'honour' based abuse are forms of gender-based violence and domestic abuse where escalation of abuse and associated risks happen due to notions of power and control within intersectional contexts of oppression. In these cases, religion, culture, patriarchal codes of behaviour and perceived notions of honour are used by one or more perpetrators as an excuse for coercive control, threats and abuse. While harmful practices are perpetrated disproportionately and primarily against women and girls, men, other genders, and gender non-conforming persons can also be victims.

Additionally, while the government can adopt and understand a specific definition, certain victim-survivors will not identify with the language of so called HBA or harmful practices. For example, Romany Gypsies and Irish Travellers would understand the language that is specific to their communities ('shame' or 'scandal')[1]. The impact of this abuse mirrors that of harmful practices and demonstrates the importance of training and awareness building among statutory services to understand how notions of 'honour' and 'shame' is constructed in different communities.

HOW 'HONOUR' BASED ABUSE IS UNDERSTOOD



Are these different forms understood by the government, police and other agencies?

The range of harmful practices do not appear to be understood by the government, as evidenced by the use of so-called 'honour' based abuse as a catch all term for harmful practices. The HPSP are particularly concerned that the government and a range of statutory and non-statutory agencies do not appear to fully understand harmful practices in the context of coercive control. A greater understanding of this context would both mean that the Serious Crime Act (2015) legislation on Controlling or Coercive Behaviour could be put to greater use by the police, and victim-survivors would receive more appropriate support.

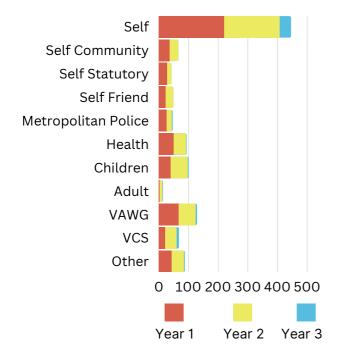
In 2020 Standing Together Against Domestic Abuse, a member of the HPSP, started collating data on harmful practices cases across three central London borough MARACs. What was evident from this work was that harmful practices were often misidentified and misunderstood. In many cases the harmful practices were not identified prior to the MARAC meeting, meaning that opportunities were lost to engage victim-survivors and reduce risk. A very common MARAC action seen in these cases was for the police to flag their case as HBA or forced marriage – indicating a lack of knowledge prior to the MARAC. A recent survey of 50 MARAC Coordinators by the Coaction Hub found that only half felt that harmful practices cases were adequately risk assessed prior to coming to their MARAC.

A recent evaluation of the P&ACT project found a range of systemic barriers to victim-survivors of harmful practices. The P&ACT project



is a MOPAC funded pan London partnership of 12 by and for services providing support to women and girls experiencing domestic abuse and harmful practices. In the first three-year period of the project (2019-2022), the partnership worked with over 1000 women and girls from global majority communities. Their evaluation found that 90% of staff spent 50% or more of their time engaging in institutional advocacy to challenge poor responses from external This includes navigating racialised services. and gendered One agency particularly highlighted was local discrimination. authority housing, who were found to create significant barriers to Black and minoritized women to access safe affordable housing. In additional only 4% of the project's referrals were from the police, suggesting either a lack of identification of these cases or a lack of partnership working. Please see below the graph showing referral sources into this specialist project. HPSP are concerned about the lack of partnership working between specialist agencies who are experts in harmful practices and statutory agencies. We would like to see closer working relationships, including commissioning these experts to provide training to staff in statutory agencies.

FIGURE 1: REFERRALS



Referral	Year 1	Year 2	Year 3
Self	219	187	39
Self Community	35	30	0
Self Statutory	26	16	0
Self Friend	21	27	0
Metropolitan	25	18	3
Health	49	42	2
Children	39	58	3
Adult	2	9	2
VAWG	65	57	6
VCS	20	38	9
Other	41	43	3

PREVALENCE OF 'HONOUR' BASED ABUSE



How prevalent is honour-based abuse? What do we know about the background or characteristics of victims and perpetrators?

The prevalence of 'honour' based abuse and harmful practices more widely is difficult to evidence. Without a national definition there is a risk that the data which is being collected is not coherent. Whilst there are established sources of data, such as the NHS FGM dataset, Forced Marriage Unit, police statistics and Karma Nirvana data, victim-survivors do not necessarily access these services. It is also likely that as many agencies are not trained to identify harmful practices, these cases are not being identified in data, or when they are the focus is on killings and some high harm cases.

There also tends to be a lack of understanding of harmful practices perpetrated by a partner, with these cases often being categorised as domestic abuse without the nuanced understanding needed. This is concerning given that research by Lis Bates identified 'honour' based abuse as most likely to occur in an intimate partner or expartner context [2]. There is a huge gap in the framing and understanding of HBA, and of recognizing that harmful practices often occur with different forms of abuse happening concurrently and is aggravated by notions of so called 'honour' and strict codes of control on women's freedom and basic human rights. If we operate within the framework of domestic abuse and harmful practices, honour aggravated harm can be seen as an escalated category by itself within harmful practices - that flag up the risks and high possibility of escalation to serious harm and death.

The recent evaluation of the P&ACT project provided insights into the characteristics of victim- survivors of harmful practices.



It is evident from these findings that a high number of women and girls experiencing harmful practices have disclosed having mental health conditions, often due to the ongoing coercive control and abuse. On average victims at high risk of serious harm or murder live with domestic abuse for 2-3 years before getting help[3]. Women from Black and minoritized communities experience additional barriers. It is important to highlight that the silencing of their experiences within patriarchies and lack of inclusion within VAWG responses lead aggravate and result in emotional distress and mental health conditions.

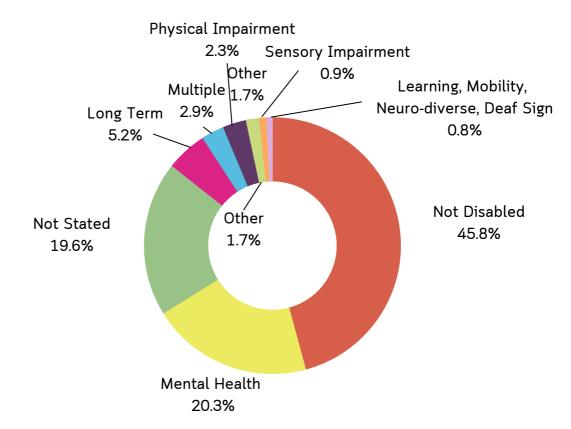
An intersectional feminist approach demands that we centre our thinking not just on how women as a social class are positioned, but that we also attend to other inequalities to ensure that all women have a voice in the struggle. For example, if we ignore disability discrimination (including routine exclusion and barriers to access for Black and minoritized women) or place it outside of violence against women and girls, then we will not take note of, or respond to the experience of disabled women and girls. We will not consider the different 'sites' of victimisation and vulnerability and the lack of adequate provision for disabled women and girls. We will also overlook the right of disabled women to organise and resist violence and to deliver autonomous 'by and for' provision.

When policy makers/ commissioners fail to adopt an intersectional approach, this can have serious impact on women and girl's lives. For example, this can affect decisions about the kind of services that are funded and that women are able to access[4]. The P&ACT survivor profiles evidence this need and also the high number of 'not stated' disability status perhaps point to stigma around disclosures around disability and fear of labelling in for those with mental health conditions. The need for recognizing intersectionality and by and for specialisms around age and sexuality in the BME led sector is evidenced in the survivor profiles of the P&ACT project - emphasizing the need to resource the BME led VAWG sector in a



way that specialisms around harmful practices are responsive to specific demographic groups. 'Honour' based abuse should not be a catch all term for abuse experienced across the demographic diversities within BME communities.

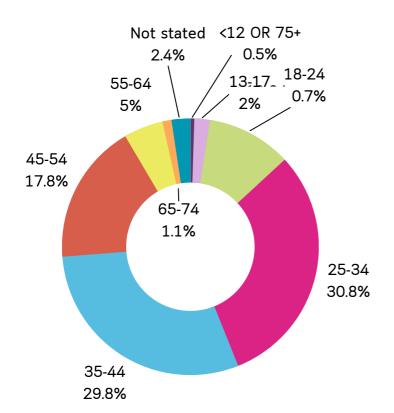
FIGURE 2: DISABILITY



Disability	Number of Respondents
Not Disabled	604
Mental Health Condition	268
Not Stated	258
Long Term Health Condition	68
Multiple Disabilities	38
Physical Impairment	39
Other	22
Sensory Impairment (visual, hearing, etc.)	12
Learning Disability / Difficulty	5
Mobility	2
Neuro-diverse (Autism, Asperger's, Dyspraxia)	2
Deaf Sign Language User	1
Total	1310

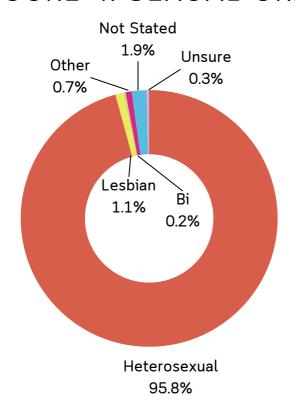


FIGURE 3: AGE



Age Range	# of respond.
12 and under	3
13-17	24
18-24	131
25-34	378
35-44	366
45-54	218
55-64	61
65-74	14
75 and over	3
Not stated	29
Total	1227

FIGURE 4: SEXUAL ORIENTATION



Sexual Orientation	# of respond
Heterosexual	1172
Lesbian	13
Bi-sexual	3
Other	9
Not stated	23
Unsure	4
Total	1224



We would also like to highlight that for many survivors of harmful practices faith will be an important source of strength in their lives. For more information, please see research by the Faith and VAWG Coalition, who are members of the HPSP[5]. An intersectional approach requires an understanding of survivors who have faith and would necessitate working with faith informed by and for's who can provide faith resources, build resilience and help and support survivors with engagement with therapeutic and other resources. Long term pastoral support for women of faith can mitigate isolation and reconnect survivors into safe communities. We would like to see more awareness raising that no faith or culture condones HBA and engagement from criminal justice and other statutory agencies to better respond to the needs of these communities.

In order to better understand harmful practices we need statutory and non statutory agencies to be trained to be able to identify and respond to these forms of abuse. Agencies need to understand the nuances of these cases in order to be to distinguish them from domestic abuse cases and therefore provide appropriate support and risk management. We also need agencies to establish datasets, and for this data to be collated locally and nationally. We would suggest that commissioning services require harmful practices data to be kept as part of reporting processes. We would also like to see a national dataset of MARAC cases involving harmful practices in order to greater understand responses to these high-risk cases.



THE USE OF CULTURE TO JUSTIFY ABUSE

What is known about abusive practices under the pretext of upholding cultural norms? Is there available data on the prevalence of these practices?

All violence against women and girls is practiced upholding cultural and societal norms and within the context of misogynistic expectations of codes of behaviour. We would, therefore, challenge the basic premise that this applies solely to 'honour' based abuse or harmful practices. The notion of 'honour' is missing as a narrative in broader discussions on violence against women and girls and used to describe the experiences of Black and minoritized communities. In building a definition of harmful called honour practices including SO based recommended in this response, we create a foundational understanding of harmful practices for the purposes of identification, early intervention and building national data sets.

As per the previous question, within community-based services and partnerships such as P&ACT the data is available on harmful practices. However, we lack the wider national data, as well as accurate local authority data due to lack of training and knowledge around harmful practices and a lack of will to keep this data, and build sustainable statutory responses around it.

CHALLENGES FACING VICTIMS OF 'HONOUR' BASED ABUSE



What are the challenges or barriers faced by victims of honourbased abuse in seeking support and protection?

The recent report from the DAC office, A Patchwork of Provision: how to meet the needs of victims and survivors across England and Wales [6], found that 67% of Black and minoritised victim-survivors wanted to access specialist by and for services. However, the same report found that only half of survivors who wanted to access this support were able to do so. We know that these services are affective in supporting women, with 78% feeling safer after accessing by and for services in the same report. We also know from specialist services that many of their service users would not access other, more generic forms of support. However, both the DAC report and the recent P&ACT research found that by and for organisations were more likely to receive smaller amounts of funding from commissioners than organisations that were not 'by and for'. Therefore, the underfunding of these services is a clear barrier to victim-survivors of harmful practices. In order to address this, it is vital that local authorities prioritise specialist services as part of their commissioning process.

Many agencies, statutory and non-statutory, have a lack of understanding of harmful practices, meaning that victim- survivors often do not receive the support they need. This can also be compounded by poor risk assessing, and the inadequacy of standardised risk assessment tools. Survivors and professionals from the specialist by and for sector have fed back that these tools are Eurocentric and do not use the 'language' of Black and minoritized women. As they do not address harmful practices, victim-survivors are not being routinely asked about these forms of abuse.

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Recent research by HALT on minoritsation in DHRs showed that where risk assessments had been completed with victims of hompleted with victims of homicide, Black and minoritized victims were less likely to be rated as high risk, which suggests that these victims were being failed in the risk assessment process.

We know that some women experiencing or at risk of harmful practices will have insecure immigration status which creates considerable barriers to reporting abuse to the police and other statutory agencies. Research by the Step Up Migrant Women campaign illustrates that high numbers of perpetrators use threats of deportation as a form of abuse [7]. Until we have safe reporting mechanisms for women with insecure immigration status, this will continue to be a barrier to accessing support.

The recent Domestic Commissioner's Office report, Safety Before Status [8] - The Solutions, particularly foregrounds the experiences of no recourse to public funds women, with insecure immigration status and how proposed models of support from the government can have a 4:1 cost benefit in supporting survivors from this marginalized group. We also know from specialist agencies that there are a range of other barriers to reporting, including language barriers, the weaponization of faith and culture by perpetrators, a lack of cultural competency in the police which means that they fail to understand the nuances of the abuse, and perceptions that the police do not take VAWG seriously.





How would you assess the police response to 'honour' based abuse? How could it be improved?

We would begin by placing responses to honour based abuse and harmful practices in the context of the need to improve police responses to all forms of violence against women and girls. Forms of abuse often overlap, and many women will be experiencing multiple types of VAWG. Police failings in cases such as Raneem Oudeh and Khaola Saleem, as well as the continuation of poor attrition rates in domestic and sexual abuse cases illustrate the need for the police to respond better to all forms of VAWG.

Regarding honour based abuse specifically, we are concerned about the lack of understanding by the police of honour based abuse and other forms of harmful practices. There appears to be a failure to understand these forms of abuse in the context of coercive control which means that existing laws are not being applied appropriately. In MARAC meetings we often see that the police are aware of a domestic abuse case, but not aware of the harmful practices context of these cases. Members of the HPSP work across a range of boroughs in London and we see that responses can be inconsistent depending on the borough.

Police responses could be improved by training on harmful practices and cultural competency from specialists. We agree with Khan et al (2021) that specialist training should be compulsory for all police officers, police staff, special constables, and civilian and volunteer staff[9]. We would like to see a national standardised training provision for the police and other agencies as opposed to



the 'postcode lottery' of training which currently exists. In some areas specialists provide multi agency harmful practices training but this is not always accessed by the police. We would therefore wish to see funding specifically for police officers to receive dedicated training. We would also like to see police working to build relationships with communities in order to understand the complexities of HBA, and increase trust in the criminal justice process, which may increase confidence to victim-survivors to seek support.

'HONOUR' BASED ABUSE AND THE LAW



Is the law in relation to honour-based abuse adequate to protect victims? If not what should change?

If properly enforced, existing laws can protect victims and hold perpetrators to account. We are concerned about the low numbers of prosecutions of harmful practices cases, as evidenced by the CPS VAWG Report 2018 - 19 showing 78 prosecutions for HBA related offences, 4 forced marriage charges and 2 FGM charges [10].

We would like to see a concentration on training police officers to better understand harmful practices and be able to prosecute these laws appropriately. We also know that many victim-survivors do not wish to access the police, and therefore we would also like to see increased funding and commissioning of by and for specialists in order to increase their safety through other means of support. We would also like to see these services be funded for education programmes in schools and in the community to challenge these forms of VAWG as a part of the government's commitment to prevention in its VAWG strategy. Without education programmes, the government response is skewed towards criminal justice solutions over prevention. Existing approaches lead to a double pronged problem - of aggravating the overrepresentation of Black and minoritized communities in prison as well as becoming a barrier for BME women to report due to unfair treatment of black and minoritized perpetrators within the criminal justice system. Without addressing the roots of harmful practices and VAWG through prevention, and ensuring that communities have faith in the CJS for fair treatment of all perpetrators. We cannot expect women and girls from global majority communities to have confidence in the criminal justice response or other pathways of support.

CHALLENGES FOR SERVICES SUPPORTING VICTIM-SURVIVORS



What are the challenges for services supporting victims of honour-based abuse? How could those challenges be mitigated or overcome?

We know that the most effective source of support for victimsurvivors of harmful practices is by and for agencies. These organisations have specialist knowledge in specific forms of VAWG, including lesser discussed types of harmful practices such as virginity testing, obstetric abuse and dowry related abuse. They also provide a broad range of support to their clients meaning that they engage women who would not approach a 'domestic abuse service'. For more information on the benefits of by and fors please refer to IMKAAN's research [11].

Given our current lack of national data, it is difficult for us to evidence the need for harmful practices specialists. We would like to see a joined up dataset, including the data from specialist agencies so commissioners have a better understanding of need.

As previously discussed, one of the challenges for by and for agencies is funding, as evidenced by the DAC office report and P&ACT research. Current commissioning frameworks mean that the expertise of harmful practices specialists is not being recognised. In order to tackle all forms of violence against women and girls we need a co-ordinated community response in which these specialists play a key role. We would like to see a greater recognition of the role these agencies should play in the co-ordinated community response to make it intersectional and effective. We would also like to see them being supported to be able to take on key roles in the CCR such as being core MARAC agencies.



We also know that funding is not always sufficient, and that commissioners need to consider the capacity building of these agencies. In the past we have witnessed by and for agencies being 'set up to fail' by being funded for projects which are unrealistic given their starting point of being underfunded for many years. We know that the current framework of expectation of high targets, for example for IDVA services, is not appropriate for specialist services who often have more complex cases (multiple forms of VAWG, language barriers, NRPF) and will need to work for longer and more intensely with their clients to support them to be free of abuse.



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