

# Empowering BME women and girls at risk of domestic abuse and harmful practices to take control of their lives

Report on the evaluation of Savera UK's Domestic Abuse and Harmful Practices Engagement and Support Project



Funded by the National Lottery Community Fund Women and Girls Initiative

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# ACKNOWLEDGEMENTS

This report sets out the findings of the evaluation of Savera UK's Domestic Abuse and Harmful Practices Engagement and Support Project. It also aims to give a voice to women who have experienced gender-based abuse, oppression and injustice.

The women who took part in this evaluation have demonstrated enormous bravery and courage in their surviving and overcoming violence and abuse. This evaluation would not have been possible without their generosity in talking to me about their experiences and the support they have received from Savera UK.

Thanks go as well to clients who contributed their views through questionnaires.

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Liverpool World Centre

Merseyside Police Public Protection Unit

Women's Health Information & Support Centre (WHISC)

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# EXECUTIVE SUMMARY

In December 2016, Savera UK embarked on a three year National Lottery Community Fund Women and Girls Initiative project, with the following aims:

- **To expand the one-to-one support service for women from BME communities who are at risk from harmful practices<sup>1</sup> (HPs) and domestic abuse.**
- **To engage with young people in schools to educate about domestic abuse and harmful practices.**
- **To raise community awareness and reduce incidents of domestic abuse and harmful practices.**

This report presents the findings of the evaluation of the project, which are organised around five key outcomes of Savera UK's support and awareness raising work.

**Outcome 1:** Savera UK has increased the provision of holistic person-centred approaches for BME women and girls at risk of domestic abuse and harmful practices.

**Outcome 2:** Savera UK has sought and responded to the views of BME women and girls by enabling feedback from service users to influence service delivery.

**Outcome 3:** BME women and girls have awareness of what constitutes domestic abuse and harmful practices, and where they can go for advice and support.

**Outcome 4:** BME women and girls have awareness of their rights and how to assert their rights in relation to domestic abuse and harmful practices.

**Outcome 5:** BME women and girls feel safe to assert their rights in relation to domestic abuse and harmful practices.

The three elements of the project under evaluation were:

- **Support service**
- **Schools-based awareness raising programme**
- **Community engagement**

As staff time and resources are mostly concentrated on the support service, this is the main area of focus.

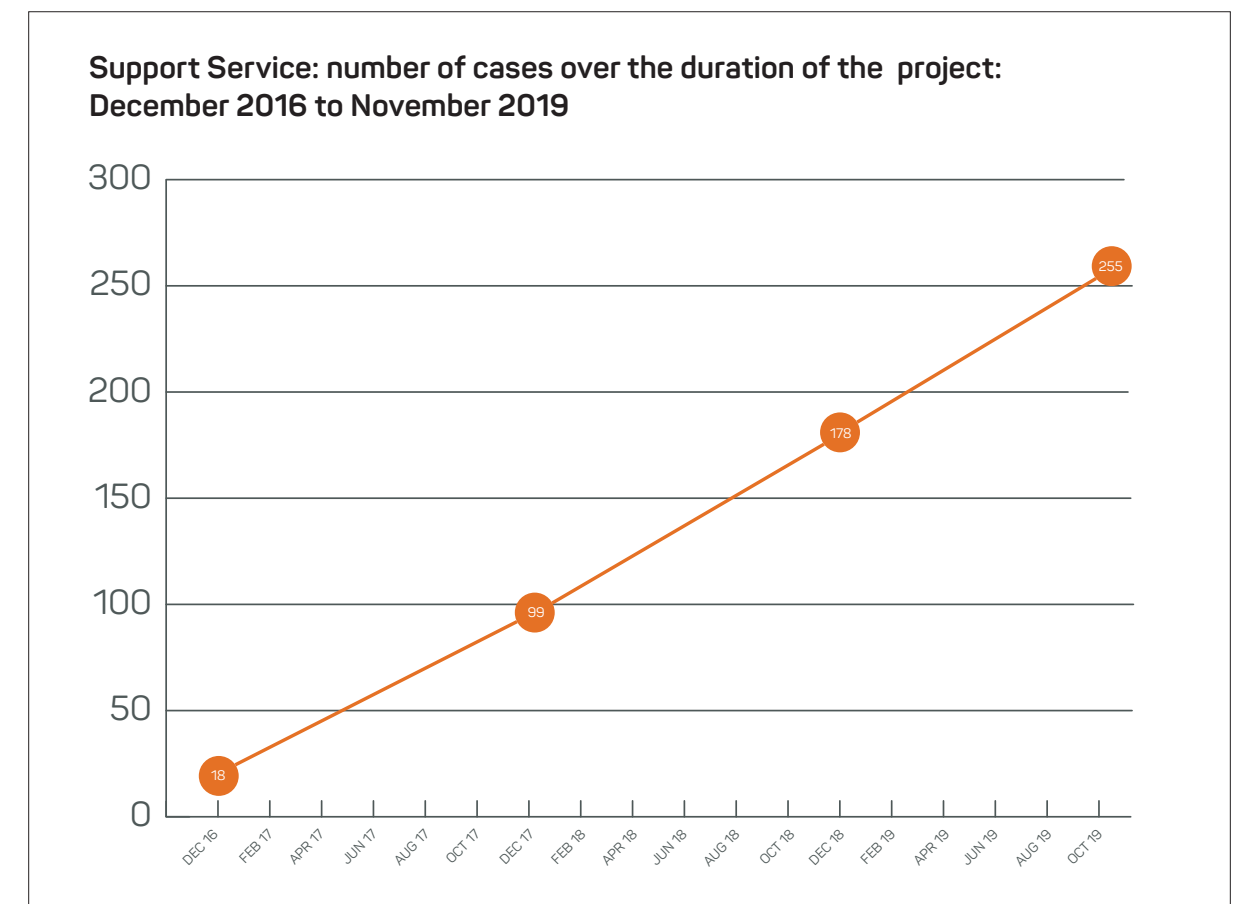
## Key Findings SUPPORT SERVICE

### Holistic provision

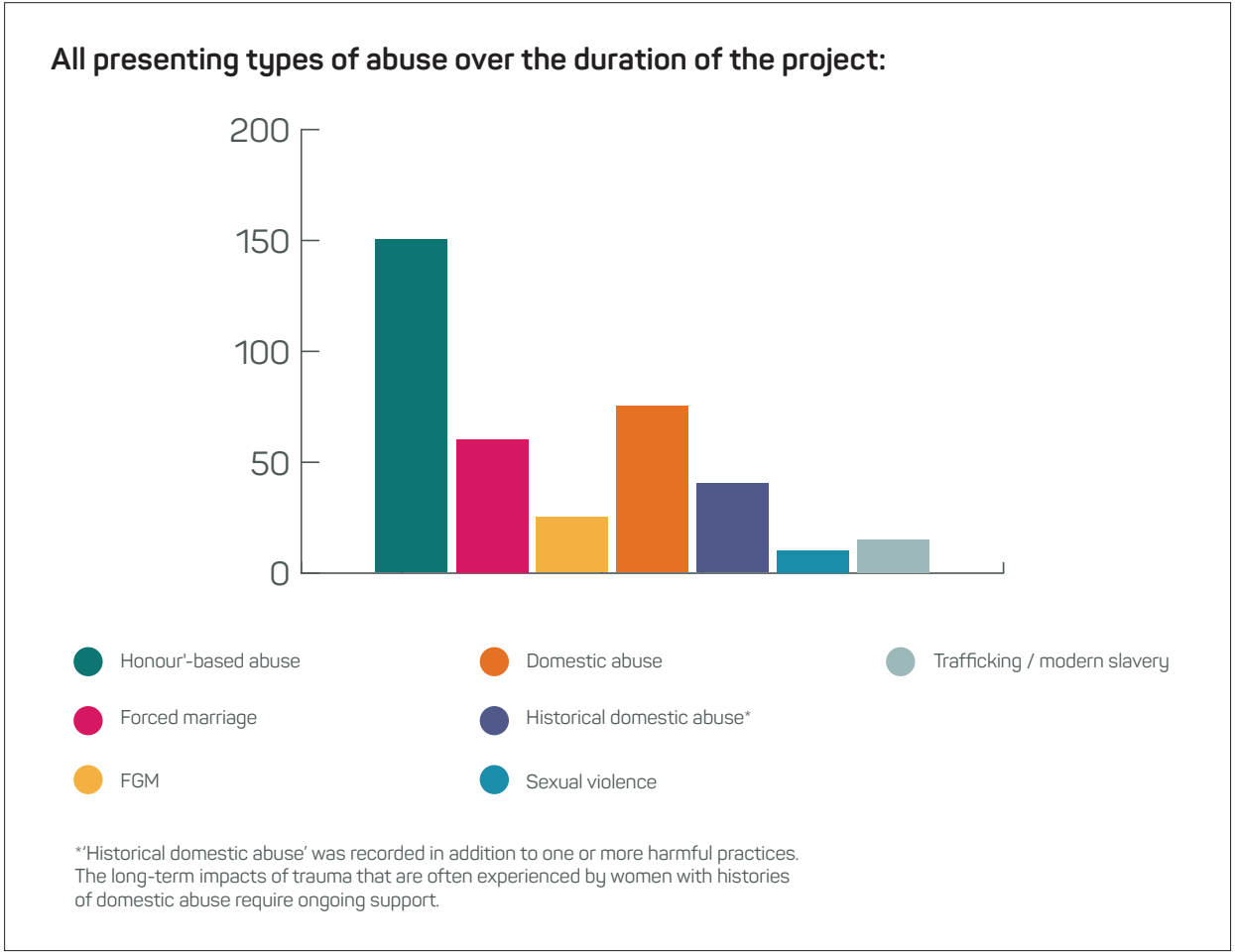
When women and girls first arrive at Savera UK<sup>2</sup> they are usually extremely frightened and traumatised. Most have escaped abusive and dangerous situations and are alone and destitute. It is often a pattern or a severe (but rarely one-off) incident of domestic or 'honour'-based abuse, and / or a threat of forced marriage, with sometimes the fear of being murdered by family members or a wider network of perpetrators, that has driven a woman to seek help.

In response to the high levels of risk faced by their clients, usually involving multiple, complex and long-term needs, Savera has developed an effective model of holistic, tailored and proactive provision. A structure of support is created for each client, based on comprehensive risk and needs assessments. Savera's support service encompasses immediate and long-term safety planning, one-to-one emotional support, practical support and advocacy. This is supplemented with empowerment work to raise women's awareness of abuse and their legal rights, build their confidence, self-belief and skills, and create a sense of choice and control.

Over the course of the project, the number of cases supported by the service rose from 18 to 255. This was a far higher volume of cases than had been anticipated, demonstrating a significant demand for a service that specialises in supporting victims of what are often hidden crimes. Ninety three per cent of clients were female.



Most clients were escaping from an abusive relationship or family because of ‘honour’-based abuse. The majority of cases involved more than one presenting issue, however. For example, forced marriage often includes ‘honour’-based abuse and / or sexual violence; ‘honour’-based abuse may be accompanied by domestic abuse and /or modern slavery; FGM might be linked to forced marriage.



Support workers address multiple areas of risk when safety planning and prioritising actions, and provide a lifeline and safety net for women who are at risk of murder, violence, forced marriage and suicide. Savera works closely and effectively with the police and social services to ensure the safety and wellbeing of their clients. Many cases involve complex issues such as risks from multiple perpetrators, immigration/asylum support, relocation, emergency housing, child safeguarding, support with child contact and liaising with schools, and referrals to mental health and physical health care and legal services.

Given that most of the who women Savera support do not have families and communities to turn to for help, Savera is many women’s only source of information, guidance, advocacy and support. Women identified being listened to, believed and understood, knowing that their support will continue for as long as needed, being given hope for a future, and help with pursuing their legal rights as vital components of the service. Savera drop-ins were seen as essential for social integration, developing supportive friendships, and the acquirement of language and life skills. Clients expressed an overwhelming sense of relief that they had found an organisation that could help them with their full range of needs, help them navigate through different agencies and systems, and support them to live safe and independent lives.

Culturally sensitive provision

Savera’s culturally sensitive and informed provision is a key strength of the service. The organisation excels in delivering support to address the diverse and specific needs of BME women, including asylum seeking, refugee and migrant women. Staff are mindful of the intersecting impacts of gender and ‘race’ discrimination, and the barriers often faced by BME women when accessing mainstream services, and build trusting relationships so that women feel safe and comfortable when talking about what has happened to them. This helps to ensure all areas of need are covered, including issues that women may not have previously been able to name or speak about. Savera is adept at identifying indicators and experiences of harmful practices that may be missed by mainstream organisations, which strengthens safeguarding responses. Clients reported that they engage easily and fully with Savera as they feel understood, safe, and not judged because Savera understands the family, community and cultural contexts of violence and harmful practices, and their loss and grief at having to leave families and communities behind.

Women-only provision

Women-only services are safe, supportive, healing places, where women can more easily speak about gender oppression and violence, and learn about their rights as women and how to challenge attitudes and practices that underpin gender-based abuse. A gender analysis is important in understanding the differing contexts and experiences of harmful practices for women and men in order to deliver the most appropriate responses. While Savera supports a small number of male victims of harmful practices, women who use the support service said it was very important to them that Savera staff and events are women-only, for reasons of safety, cultural appropriateness, and feeling comfortable when disclosing and talking about abuse. Savera’s support service has an all women staff team, and because of women’s voiced needs for a women-only support service, directors are committed to maintaining this.

Staff capacity and funding

The high volume of referrals to Savera’s support service demonstrates a growing need and demand for a service that meets the needs of BME women and girls experiencing, or at risk of, domestic abuse and harmful practices. Despite a rapidly increasing caseload, Savera treats all cases as ‘live’, as the risk of severe violence and murder is always present in the lives of the majority of their clients. Maintaining the current level of comprehensive support and meeting growing demand requires sustained funding, particularly as the majority of cases involve complex, multiple needs. This is particularly important given the chronic underfunding of BME violence against women and girls organisations.<sup>3</sup>

## Partnerships and strengthening local responses

Savera's expertise in working with BME women at risk of harmful practices makes it an invaluable partner and resource for a range of local agencies. Both Merseyside Police Public Protection Unit and Liverpool Children's Safeguarding Unit reported that Savera is their 'go to' agency when they refer victims of harmful practices for ongoing support. Savera's provision of support prior to, during and after police involvement is vital in keeping women and girls safe, with Merseyside Police saying there are indications that victims of harmful practices are far less likely to return to abusive families when they are supported by Savera. Savera's partnerships with other gender specific services allow each organisation to draw on its own areas of expertise while working together to ensure the best long-term solutions for shared clients.

Senior and key professionals in voluntary sector and statutory services reported that Savera's advice and training on the nature, indicators and risks of harmful practices, the barriers that impede BME women being able to access support, and how to respond appropriately to victims has greatly improved partnership responses.

## Empowerment

Supporting victims of harmful practices in their journeys towards empowerment is a long process with many stages along the way. Savera's ongoing support and encouragement creates a strong base for women to take steps forward at a pace that is right for them, while providing a safety net should risks or support needs return.

Clients' views and specialist knowledge as survivors are regarded by Savera as essential for the integrity and success of its work. In raising women's awareness of gendered expectations and inequality and what constitutes domestic abuse and harmful practices, Savera helps women and girls to identify abuse, understand and assert their legal and human rights, pursue goals and achieve self-determination.

Savera's tailored and ongoing trauma-informed support addresses the harms caused by long-term abuse as well as building women's capacity for independent decision making and self-determination. This is the process of helping a client move from her "victim" to her "survivor" self.<sup>4</sup> It is Savera's model of holistic support, addressing longer-term needs, that underpins the empowerment of their clients. Through their belief in their clients' strengths and abilities, Savera has brought about transformations in how women see themselves and what is possible for them, encouraging and enabling them to make informed choices and live lives based on their own decisions. Savera's support service has met all five evaluation outcomes and has achieved its goal "to empower BME women and girls at risk of domestic abuse and harmful practices to take control of their lives".

## Schools-based awareness raising programme

Savera UK's awareness raising programme for schools (delivered in partnership with Brook) draws on their expertise as a frontline specialist BME support service to teach girls about the nature of domestic abuse and harmful practices, including 'invisible' forms of abuse, such as coercive control, psychological abuse, and restriction of freedoms, and how to seek support and assert their rights. The programme provides schools with expert knowledge and a clear referral pathway to use should students require support. The programme was delivered in schools, mainly to female students, in a mix of assemblies and small group sessions.

The evaluation found that the group sessions considerably increased the awareness of girls across a range of ethnic backgrounds, helping to lessen the fear, silencing and stigma that frequently surround these issues in all communities. Most girls were extremely appreciative of the opportunity to learn about harmful practices that constitute specific types of violence against women and girls, and there is evidence that this knowledge will be disseminated among their peers. The sessions provided the majority of students with awareness of their rights and equipped them with confidence and knowledge to resist abuse and violence and seek safety and support for themselves and others should they experience it. 'Honour'-based abuse and FGM were the issues that appear to have had the greatest impact in raising awareness both of their existence and of associated legal rights and protections. There is strong evidence of most girls understanding their rights and how to assert these in relation to domestic abuse and harmful practices as a result of the sessions, with some saying knowing how to respond to abuse was the most important thing they had learned.

## Community engagement

Awareness raising and training with professionals, such as police, social services, Children's Centres, and voluntary sector agencies, has been ongoing throughout the project. Savera also undertook community-based awareness raising with women from marginalised BME communities. The recruitment of a Community Outreach Worker has increased the scope of community engagement work.

Savera's community engagement in issues relating to harmful practices is most effective when it is tailored to specific communities of women, whilst drawing links to the wider scale of gender-based violence. Savera's use of interactive methods, examples and case studies raises awareness about different forms of abuse in a way that is non-judgemental and relevant to women's lived experiences. This helps to impart tangible, relatable and trustworthy information about what constitutes domestic abuse and harmful practices, rights to protection and routes to safety. This kind of practical knowledge is particularly suited to being passed on by word of mouth, which is a powerful tool for raising awareness among marginalized and vulnerable women.



# INTRODUCTION

Savera UK<sup>5</sup> was formed in 2010, with the aim of working with Black and Minority Ethnic (BME) communities to support victims of, and challenge attitudes towards, domestic abuse and harmful practices (HPs) such as forced marriage, 'honour'-based abuse and female genital mutilation (FGM). Savera's engagement with local communities had found a lack of awareness of what constitutes domestic abuse; domestic abuse and harmful practices being treated as taboo issues; low levels of trust among victims when accessing services; and few regional culturally sensitive support services. Originally operating in the Merseyside area, Savera subsequently changed its name to Savera UK to reflect the widening geographical scope of its work.

Savera provides comprehensive support to women and girls at risk of domestic abuse and harmful practices and brings specialist knowledge and support to multi-agency cases relating to victims of forced marriage, 'honour'-based abuse and FGM. Savera played a lead role in developing a Merseyside Harmful Practices protocol.

Savera's work is steered by a Board of Directors and an Advisory Group. They are supported by their Patron, Nazir Afzal OBE, a senior lawyer and former Chief Crown Prosecutor for North West England, who has led nationally on legal issues relating to child sexual exploitation and violence against women and girls, and by their Ambassadors, Maya Jama, television and radio presenter, and actress Sunetra Sarker. Savera was nominated for the 2018 National Diversity Awards in the 'Community Organisation Gender' category, and was recommended by Elle Magazine as one of nine 'Incredible Women's Organisations' worthy of support in 2018.

In December 2016, Savera embarked on a three year National Lottery Community Fund Women and Girls Initiative project to expand their support for BME women and girls. This report presents the findings of the evaluation of the project.

## The aims of the project were:

- To expand the one-to-one support service for women from BME communities who are at risk from harmful practices and domestic abuse.
- To engage with young people in schools to educate about domestic abuse and harmful practices.
- To raise community awareness and reduce incidents of domestic abuse and harmful practices.

# EVALUATION FRAMEWORK

The overarching questions addressed by the evaluation were:

- What impact has the project had on BME women and girls who have experienced domestic abuse and harmful practices?
- What impact has the project had in raising awareness of women and girls about domestic abuse and harmful practices, including those who are at risk?

To answer these questions, the evaluation sought evidence for five key outcomes of support and awareness raising work undertaken by Savera UK.

**Outcome 1:** Savera UK has increased the provision of holistic person-centred approaches for BME women and girls at risk of domestic abuse and harmful practices.

**Outcome 2:** Savera UK has sought and responded to the views of BME women and girls by enabling feedback from service users to influence service delivery.

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The three elements of the project under evaluation were:

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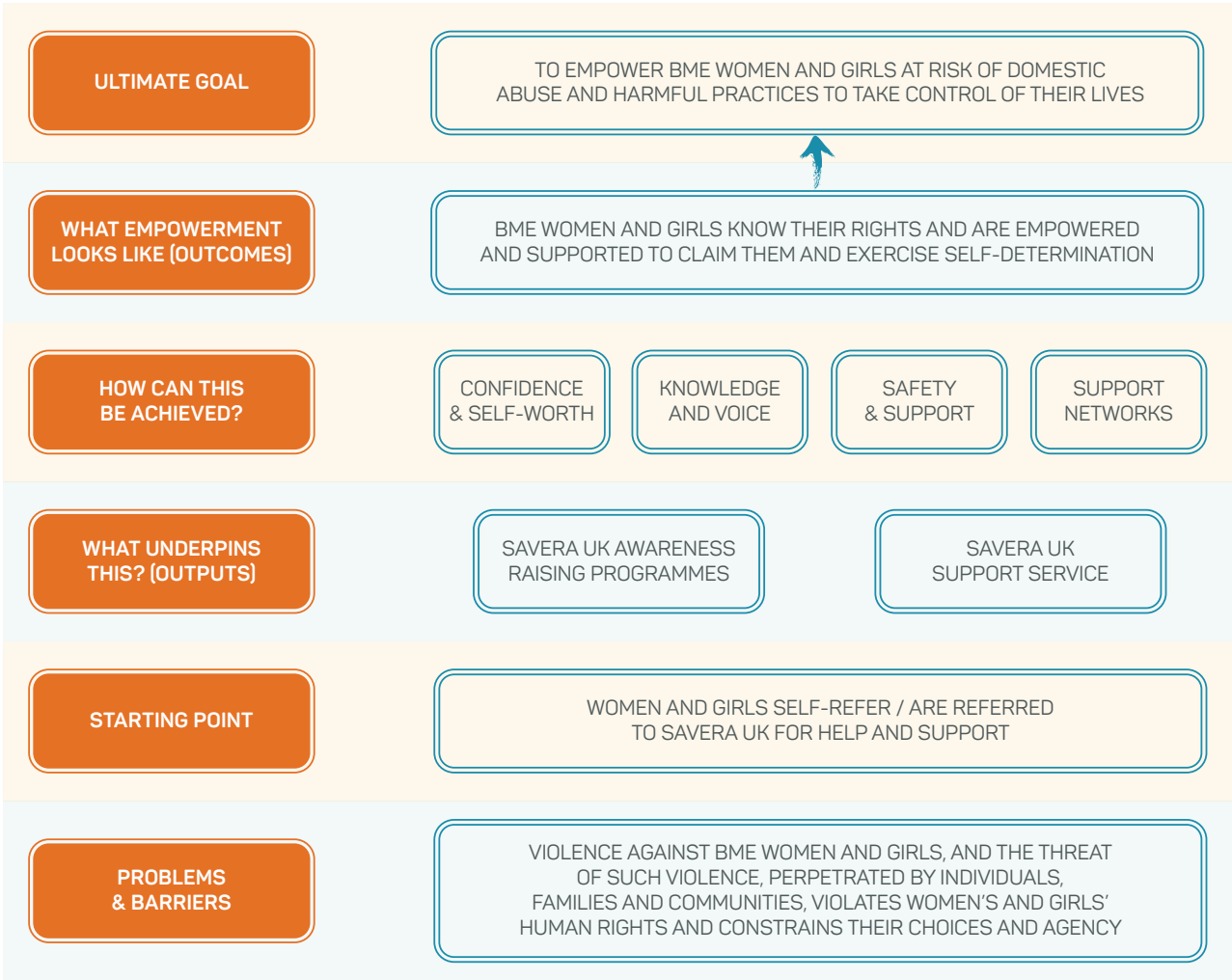
As staff time and resources are mostly concentrated on the support service, this is the main area of focus and analysis.

# THEORY OF CHANGE

The ultimate goal of Savera UK’s project is:

*“To empower BME women and girls at risk of domestic abuse and harmful practices to take control of their lives”.*

A theory of change diagram<sup>6</sup> was devised to theorise what empowerment would look like, by identifying the outcomes that might lead to empowerment, the activities that would underpin these outcomes, and the starting point for the empowerment process.





# VIOLENCE AGAINST WOMEN AND GIRLS

In keeping with the evaluation focus on the engagement, support and empowerment of BME women and girls, domestic abuse and harmful practices are seen as issues which need to be placed within a wider context of gender inequalities, and as forms of abuse that are either wholly or disproportionately experienced by women and girls.<sup>7</sup> Throughout this report the terms violence against women and girls (VAWG) and gender-based violence / abuse are used, as defined by the UN Commission on the Status of Women:

*Violence against women and girls is rooted in historical and structural unequal power relations between women and men, and persists in every country in the world as a pervasive violation of the enjoyment of human rights. Gender-based violence is a form of discrimination that seriously violates and impairs or nullifies the enjoyment by women and girls of all human rights and fundamental freedoms. Violence against women and girls is characterized by the use and abuse of power and control in public and private spheres, and is intrinsically linked with gender stereotypes that underlie and perpetuate such violence, as well as other factors that can increase women's and girls' vulnerability to such violence.*<sup>8</sup>

Additionally, the UK Government's National Statement of Expectations for Violence Against Women and Girls services states that:

*Violence against women and girls (VAWG) covers a range of unacceptable and deeply distressing crimes, including domestic violence and abuse, sexual violence and child sexual abuse, stalking, so called 'honour-based' violence - including forced marriage and female genital mutilation (FGM), gang related violence, and human trafficking.*<sup>9</sup>

Violence disproportionately affects women who experience multiple forms of discrimination.<sup>10</sup> BME women may experience racism, as a form of, or in addition to, gender-based violence.<sup>11</sup> Many women seeking asylum are likely to have experienced violence, sexual exploitation and torture that was specifically targeted at them because they were women, prior to their arrival in the UK.<sup>12</sup> BME women are more likely than white women to live in poverty, which greatly reduces the options and resources needed to escape abusive situations.<sup>13</sup> Multiple forms of oppression do not 'just happen at the same time' but are inter-related; for example, experiences of racism or living with insecure immigration status have a significant bearing on women's experiences of gender-based violence and their ability to access appropriate support services. An understanding of the intersectional impacts of gender and 'race' discrimination is essential for the development of policies and services designed to effectively meet the needs of BME victims of domestic abuse and harmful practices such as forced marriage, 'honour'-based abuse and FGM.<sup>14</sup>

Harmful practices which take the form of gender-based violence are often based on cultural norms, and are not confined to certain communities and societies, as "the ways in which culture shapes violence against women are as varied as culture itself".<sup>15</sup> Rather than seeing harmful practices as traditions and customs relating only to certain communities, it is more helpful to understand forced marriage, 'honour'-based abuse and FGM as specific forms of VAWG, which, whilst having distinctive cultural features, are human rights violations based on gendered power imbalances that normalise the control of women and girls.<sup>16</sup>

## Domestic abuse

Domestic abuse comprises cumulative and often interlinked physical, psychological, sexual, emotional or financial abuse that is committed by current or former partners and / or family members.<sup>17</sup> One in four women in the UK experiences domestic abuse,<sup>18</sup> and on average two women a week are killed by a current or former partner.<sup>19</sup> Systematic patterns of coercive and controlling behaviour are one of the most common forms of domestic abuse. Coercive control may or may not include physical and sexual violence and is primarily intended to isolate, frighten, degrade and control victims, with the aim of asserting power and dominance.<sup>20</sup> Being abused by an intimate partner leads to chronic fear which builds up over time, frequently resulting in trauma and devastating long-term mental health impacts, and services that work to support women experiencing domestic abuse must identify and assess its extent and effects.<sup>21</sup> Provisions for safety are essential; the risk of increased violence and murder is often greater at the point when women seek to leave violent relationships, as this represents a challenge to perpetrators' power and control.<sup>22</sup>

Many victims of domestic abuse find it difficult to seek and find help. Women may fear that reporting abuse or leaving will lead to an escalation of violence, that their children will be endangered by the perpetrator, or that they will not be believed by statutory services. They may not have the means to support themselves and their children, and be cut off from support networks.<sup>23</sup>

BME women face additional barriers to support for gender-based abuse, including: lack of awareness about what and where help is available, and of their legal rights; language barriers; lack of culturally appropriate services; lack of appropriate information from generic services; fear, or previous experience, of racism and stereotyping by mainstream services; women with insecure immigration status fearing deportation if they report abuse; cultural and religious constraints and notions of shame, taboo and honour within families and communities, and the fear of being cut off by their family and community for reporting abuse.<sup>24</sup>

## Honour'-based abuse

'Honour'-based abuse (HBA) has been defined as a specific category of VAWG that operates through patriarchal honour codes and family and community structures.<sup>25</sup> Whilst HBA sometimes affects men, victims are overwhelmingly female, with the notion of 'honour' being inextricably tied to women's behaviour. Reasons for perceived dishonour are often linked to actions that are deemed to compromise female chastity, such as refusing an arranged marriage, seeking a divorce, starting a relationship that the family does not approve of or being the victim of sexual assault.<sup>26</sup> Whilst HBA can take the form of domestic abuse, carried out by a husband,<sup>27</sup> it is often carried out by multiple perpetrators, usually kin family, husbands and 'in-laws', and sometimes by the wider community.<sup>28</sup> What distinguishes HBA from domestic abuse more generally is that it functions to restore and uphold the notion of 'honour' within the family and community, and to act as a warning to other women and girls against their committing perceived transgressions.<sup>29</sup>

HBA can include emotional and psychological abuse, isolation and imprisonment, and physical violence, such as attempted strangulation, being hit with fists and objects and being set on fire.<sup>30</sup> In extreme cases, women are murdered, with families often not publicly expressing remorse for the killing. Instead, victims are blamed for violating family honour: in this way, the aggressors perceive themselves to be victims and see the actual victims as the guilty party.<sup>31</sup> Whilst murder is an extreme manifestation of HBA, it is by no means rare. The UN Population Fund estimates that between 5,000 and 12,000 women are killed in the name of 'honour' each year globally.<sup>32</sup>

There are no precise national data on the extent of HBA.<sup>33</sup> Crown Prosecution Service data show a fall in police referrals to them of HBA related offences from 200 in 2016–17 to 145 in 2017–18.

<sup>34</sup> These figures do not reflect the extent of HBA in the UK, or the number of reports to the police. A Freedom of Information request submitted to every police force in England Wales asking how many reports of HBA they had received between January 2011 and August 2016, revealed 7048 reports, with most incidents recorded as assaults, threats to kill and kidnap.<sup>35</sup>

Survivors of 'honour'-based abuse and forced marriage are often forced to leave their families behind and relocate to another part of the UK as a means of staying alive. The decision to leave home is often spontaneous and unplanned, with survivors leaving behind their support networks and possessions. The severing of ties with family and friends, the loss of emotional and financial support, and difficulties with securing refuge or other accommodation, leaves survivors extremely isolated, traumatised and vulnerable, with many consequently being at risk of self-harm and suicide.<sup>36</sup>

## Forced marriage

The key issue of forced marriage (FM) is that it violates an individual's fundamental human right to freely consent to marriage.<sup>37</sup> This occurs when families find and choose a marriage partner, but either person does not consent, or consent is obtained under pressure.<sup>38</sup> For example, parents may attempt to impose an unwanted marriage on a daughter in order to prevent her being influenced by Western culture or to end her relationship with an 'unsuitable' partner.<sup>39</sup> Some forced marriages take place in the UK, sometimes involving one of the parties coming from another country to Britain to marry against their will. Other cases involve a British citizen being forcibly sent or tricked into going abroad to marry without their consent. Where women are subject to UK immigration rules, they may be told by their families that they will be sent back to their country of origin if they do not comply with marriage arrangements.<sup>40</sup>

Approximately 80% of victims of FM are female.<sup>41</sup> However, statistics alone do not tell the full story, and a gendered analysis is important in understanding the differing contexts and experiences of FM for women. Not only do women and girls more frequently experience FM, the impact is usually more severe for them than for men, as they are much more likely to be subjected to domestic violence, sexual violence, rape, forced pregnancy, domestic servitude, having their movements policed, and being forced to withdraw from education and employment.<sup>42</sup> Research has found that men who are pressured into marriage by parents may continue to have relationships with other women after marriage, and may use their coercion into marriage as an excuse for perpetrating domestic abuse against their wives.<sup>43</sup> In such cases, men are deemed victims of FM in law, and the marriage can be rendered void. Yet women who have lived within such marriages as victims of abuse are often thrown out of the home and face poverty, destitution and, if they are subject to immigration rules, deportation.<sup>44</sup>

FM can fall into the category of 'honour'-based abuse, with victims being vulnerable to abuse if they refuse, or want to leave, a forced marriage. Divorce may be perceived as bringing shame and dishonour, placing women at risk of violence or even being killed by family members.<sup>45</sup> Although leaving a violent FM may result in increased physical safety, women often continue to be pressured and abused emotionally, including through social media. Feelings of grief for the loss of family frequently accompany fear and distress, compounding the complex and difficult emotions experienced by victims and survivors.<sup>46</sup>

FM is a criminal offence in the UK. Civil courts can issue a Forced Marriage Protection Order (FMPO) to prevent FM from occurring or to protect someone already in a FM.<sup>47</sup> In 2018, the UK Government's Forced Marriage Unit (FMU) gave advice or support about FM in 1,764 cases.<sup>48</sup> These statistics may not reflect the true extent of the problem, however. The majority of cases are reported by professionals, colleagues, friends or family, with only a small number from victims. This may reflect the hidden nature of FM, with victims fearing reprisals if they speak out.<sup>49</sup>



## Female genital mutilation

The World Health Organisation (WHO) defines FGM as any procedure that involves “partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons”, and a violation of the human rights of girls and women:

*It reflects deep-rooted inequality between the sexes, and constitutes an extreme form of discrimination against women. It is nearly always carried out on minors and is a violation of the rights of children. The practice also violates a person’s rights to health, security and physical integrity, the right to be free from torture and cruel, inhuman or degrading treatment, and the right to life when the procedure results in death.*<sup>50</sup>

There is some debate about the use of the terms ‘female genital cutting’ (FGC) and FGM, with FGC being seen as a less emotive and neutral term in contrast to FGM, which, by referring to physical mutilation, may cause offense to the communities that carry out the practice.<sup>51</sup> Whilst recognising the need for culturally sensitive and informed use of language when engaging with women and girls who have undergone this practice, many of whom may not clearly identify their experience as a human rights violation,<sup>52</sup> this evaluation report will refer to FGM to acknowledge it as child abuse, violence against women and girls and a violation of human rights, in accordance with the WHO, the UK Government, the NSPCC and women’s rights organisations.<sup>53</sup>

FGM can result in both immediate and long-term physical and mental health problems, including severe pain and bleeding, chronic pelvic inflammatory infections, problems during childbirth, post-traumatic shock disorder and even death.<sup>54</sup>

FGM is a crime in the UK, and it is a criminal offence for UK nationals and UK residents to take a child abroad for the purpose of FGM. The law has been strengthened to include an offence of failing to protect a girl from the risk of FGM. FGM Protection Orders protect girls at risk of FGM.<sup>55</sup> In 2014, the government set up an FGM Unit, which collates and shares information on effective practice.<sup>56</sup>

## Immigration and asylum

Women who have come to the UK on a spouse visa, as a student, or as an asylum seeker, and experience violence or abuse, are particularly vulnerable as a result of their insecure and/ or dependent immigration status.<sup>57</sup>

Women entering the UK on a spouse or partner visa are usually sponsored by their husband or partner, and enter a probationary period before being eligible to apply for Indefinite Leave to Remain (ILR). Women in this situation can apply for ILR during the probationary period under the “Domestic Violence Rule” if they have documentary evidence that the relationship with their spouse or partner has broken down permanently because of domestic violence perpetrated by him or by his family.<sup>58</sup>

Women asylum seekers experiencing abuse from their husband and/or family members may be able to make a separate asylum claim, and have the right to be provided with safe alternative accommodation.<sup>59</sup> In addition to domestic violence, many female asylum seekers have experienced gender-based abuse (including rape, forced marriage and being trafficked for prostitution) in their countries of origin, and/or abuse, coerced / forced sex, during their flights to safety, and/ or in the UK.<sup>60</sup>

There are numerous barriers which prevent or deter asylum seeking and immigrant women from accessing help for domestic violence and harmful practices. A primary barrier is the fear of deportation should they disclose abuse, a fear that is often exploited by abusers in order to silence and control their victims.<sup>61</sup> Abused women on spouse or partner visas are likely to need professional help to apply for ILR, and, unless they are able to prove that they are destitute, the associated costs are often a significant deterrent to their ability to apply.<sup>62</sup> Asylum seeking women may not be believed when they disclose abuse and often find it difficult to obtain evidence of violence that will be accepted by the Home Office in support of their asylum claims,<sup>63</sup> with some left feeling that they have to battle against an “adversarial, angry or punitive” asylum system.<sup>64</sup>

## BME VAWG Services

The need for women-only services to ensure women have access to safety, justice and gender and trauma-informed psychologically healing environments is well documented.<sup>65</sup> These services are holistic, offering a 'one-stop shop' where women can access a range of support specific to their needs.<sup>66</sup> Women-only spaces and services are also empowering places where women can learn about and find the language to challenge the attitudes and practices that underpin gender-based abuse:

*This is not about the kind of segregation that you find in hierarchical patriarchal systems. The practice of having women-only moments is about creating spaces where new tongues and new concepts can emerge, where other ways of being can be imagined.*<sup>67</sup>

BME VAWG services provide culturally sensitive support to women and girls who experience domestic abuse and harmful practices, including those who have to relocate as a result of HBA and FM. Because such services possess the knowledge and competencies needed to address the impacts of multiple forms of oppression, including misogyny, racism, insecure immigration status, poverty and destitution, they can reach out to women who face barriers to accessing non-specialist services. This ensures an intersectional approach is embedded in service delivery rather than 'race' being an added consideration.<sup>68</sup> Such services are vital for accessing safety, obtaining legal advice and representation, facilitating recovery, building resilience and enabling empowering choices:

*Many [BME] survivors are more likely to access BME specialist services and they are often a woman's first point of contact with any formal support provider, particularly for women who encounter multiple barriers to mainstream services. Accessing a stable and trusted point of contact and a BME women only space can be invaluable to women who may be feeling isolated, persecuted, misunderstood, powerless and/or vulnerable.*<sup>69</sup>

## Empowerment

The idea of power is most commonly understood as an individual or group having power over another person or group in order to dominate and control. 'Power over' can be exercised as physical force, but can also be used psychologically to constrain what people can do or believe to be possible, affecting the ways in which they view their capabilities and rights. By contrast, 'power to' begins with the awareness that it is possible to act and bring about change for oneself, which leads to the development of skills and capabilities needed to exercise choice and agency.<sup>70</sup>

An important aspect of female empowerment lies in women having the knowledge that they have human rights with regard to gender-based violence, particularly when such violence is often seen as a normal, everyday occurrence.<sup>71</sup> Empowering women at a social level requires a transformation in gender norms so that women's positions are respected, and their lives are based on their own decisions, rather than on conditions imposed by others.<sup>72</sup>

The concept of empowerment that is used in this evaluation involves the provision of support to secure women's immediate safety and address longer term needs and enable them to assert their rights, but goes beyond this in order to transform women's perceptions of themselves and their places in the world, their choices, and their strengths and capabilities for action and self-determination. This concept is used to assess if and how the project has achieved its goal:

*"to empower BME women and girls at risk of domestic abuse and harmful practices to take control of their lives".*



# METHODOLOGY

The evaluation commenced in July 2017 and took place over 30 months. This allowed the evaluation to run alongside most of the project's delivery. The main focus of the evaluation is on project outcomes in relation to changes and empowerment for women and girls.<sup>73</sup> There is also consideration of the process and outputs of the project: i.e. staffing, referrals, number of cases, presenting issues, client demographics, services delivered and operational challenges.

The guiding framework for the evaluation is feminist standpoint theory, because of its commitment to building knowledge that is rooted in the experiences and perspectives of women, and emphasis on giving voice and listening to women and girls. Conducting research with women who have experienced gender-based abuse requires acute attention to safety and confidentiality because of the sensitive and potentially traumatic nature of the subject matter.<sup>74</sup> The ethical considerations of this evaluation were paramount as it involved working with vulnerable women, many of whom had escaped abusive situations in fear of their lives and who continued to be at risk. It was essential that participants had total confidence in the evaluation, had full knowledge of its purpose, were assured of absolute anonymity, gave free and informed consent prior to taking part, and at every stage had peace of mind about their involvement. Multiple methods as set out below were used to gather evidence for the evaluation findings.

## Interviews with clients of the support service

Eleven women were interviewed, using a semi-structured interview method that allowed flexibility to ask additional questions and invite women to expand on their answers and discuss their experiences in ways that were meaningful for them. The women chose their own pseudonyms. Interview questions centred on women's perspectives of the support they had received from the service, and the outcomes that mattered to them (Appendix 1). Follow-up interviews took place with five of the eleven interviewees; these interviews were tailored to individual women to enable a picture of any changes in circumstances over the duration of their support to emerge.

To avoid causing distress, participants were told that they would not be asked to relate in detail the abuse they had experienced; rather the focus of the interviews would be on the support they had received and knowledge they had gained from Savera. Most participants, however, used the interview as an opportunity to talk about their experiences of violence in a safe environment where they were listened to and believed. At the end of the interview, participants were asked if they had any concerns or questions, with the understanding that they could contact the evaluator through their Savera support worker (SW) if they had any follow-up questions. Each participant was able to talk confidentially with her SW after the interview, which allowed for an emotional debriefing if needed.<sup>75</sup>

## Observed focus group with clients of the support service

A focus group was conducted by Savera with 10 clients of their support service to discover women's views and ideas for shaping and improving the service. This was observed by the evaluator with the full knowledge and consent of the participants.

## Questionnaire with clients of the support service

A short anonymous questionnaire which asked women about their experiences of taking part in Savera's empowerment projects was completed by 10 clients (Appendix 2).

## Interviews with Savera UK's staff and directors

Informal interviews were conducted with management of the service and five support workers to gather information about the process and outcomes of the project work (Appendices 3 and 4). A group interview took place with three directors, including Savera's Chair and Vice-Chair. This explored the implementation and impact of the project, including sustainability, service development, project outcomes and ideas for enabling clients' views to inform service delivery (Appendix 5).



## Interactive voting and questionnaires in schools

The evaluation of four school-based awareness raising sessions focused on learning outcomes to assess if and how the sessions had increased participants' understandings of domestic abuse and harmful practices, provided them with language and confidence to name domestic abuse and harmful practices, awareness of legal rights, and knowledge about what to do if they or someone they knew was at risk of domestic abuse and / or harmful practices. The evaluation was of female-only sessions, to provide a more conducive environment for giving a voice to girls.

Sessions were evaluated through a short anonymous questionnaire and by voting technology. The questionnaire assessed after-session learning by inviting responses to a number of statements, and by asking students to state what was the most important thing they had learned. Voting technology assessed students' learning outcomes in a way that aimed to encourage active learning and participative engagement (Appendix 6).<sup>76</sup> Students were invited to vote on a number of questions at the beginning and near the end of the sessions, using a hand-held digital device. The statistical results appeared immediately in the session presentation slides, which integrated the evaluation into learning activities and informed group discussions.

One session was observed by the evaluator, and feedback from this enabled Savera to make changes to subsequent sessions. Over four schools a total of 46 girls aged between 12 and 17 answered pre-session voting questions, and 42 answered post-session. The exception was the question: 'Has this session given you more understanding of what is domestic abuse, forced marriage, 'honour'-based abuse, and female genital mutilation?' for which the technology failed to work in one school, where there are 33 answers for this. Forty girls fully or partially completed the short evaluation questionnaire. Thirty seven girls included information on age and ethnicity.

Parental consent for the evaluation was sought in accordance with the policies of each school. Young people's informed consent was obtained before the sessions began. Students were informed of the purpose of the evaluation, that all responses would be anonymous, participation was voluntary, and that feedback would be used in evaluation reports.<sup>77</sup> Anonymous monitoring information was collected on age, ethnicity and disability. Support was available for students during and after sessions if they became upset or needed to discuss any issues raised by the session in private.

## Focus groups at community-based awareness raising events

Two focus groups (FGs) were conducted following women only awareness raising sessions. Five women took part in the first FG, which comprised Chinese women; nine women participated in the second FG, who were all South Asian. The questions and answers in both FGs were interpreted by one of the participants. Participants were asked if as a result of the sessions their understanding of domestic abuse and harmful practices had changed or increased, if they understood more about people's rights and the law regarding domestic abuse and harmful practices and where women and girls can find advice and support, and how Savera could best meet women's needs (Appendix 7).

## Interviews with partner organisations

One-to-one interviews were conducted with key individuals from four partner organisations, to capture external perspectives on the effectiveness of Savera's project (Appendix 8).

## Literature review

A review of literature was carried out in the early stages of the evaluation to provide a comprehensive overview of existing academic, policy and other relevant publications on domestic abuse, 'honour'-based violence, forced marriage, FGM, women's immigration and asylum issues, and 'what works' when supporting vulnerable women from a range of BME backgrounds.

## Monitoring database

Anonymised data from Savera's case monitoring system was provided for the evaluation. Data fields covered the number of cases, the issues for which clients were seeking support, demographic information and referral sources.

## Qualitative data analysis

Interviews and focus groups were recorded and transcribed. Transcripts were read several times to identify outcome indicators and key themes.<sup>78</sup> Data analysis drew on knowledge relating to social justice and feminist perspectives on VAWG,<sup>79</sup> including Black feminist thought and intersectionality.<sup>80</sup> This, together with women's first hand testimonies, facilitated greater understanding of the ways in which the combination of gender and 'race' oppression shapes women's experiences of abuse, their different support needs, and what are the most effective responses.



# SAVERA UK'S PROJECT

This section presents the findings relating to the process of the project. This includes staffing, referrals, number of cases, presenting issues, client demographics, services delivered and operational challenges. Some data have been summarised or presented in total over the three years of the project to ensure anonymity where there are low numbers in certain categories. Where data are organised into separate project years, 2017 figures include one new case from December 2016.

## SUPPORT SERVICE

While Saveria has been operating to support women and girls since 2010, the current support service was set up in December 2016 as a result of funding by the National Lottery Community Fund. At this point, a new organisational system was implemented by the Service Development Manager, comprising a referral pathway, safety planning, and risk and needs assessments. Saveria's support service began by offering support to anyone who is a victim, or who is at risk, of domestic abuse and harmful practices and identifies as BME, but has more recently developed to extend provision to anyone affected by harmful practices across all affected communities. The service started with 18 pre-existing clients. The support service offers individual case work including one-to-one emotional and practical support, social and educational activities, advocacy with housing, health and other agencies and links to specialist legal and immigration advice and representation.

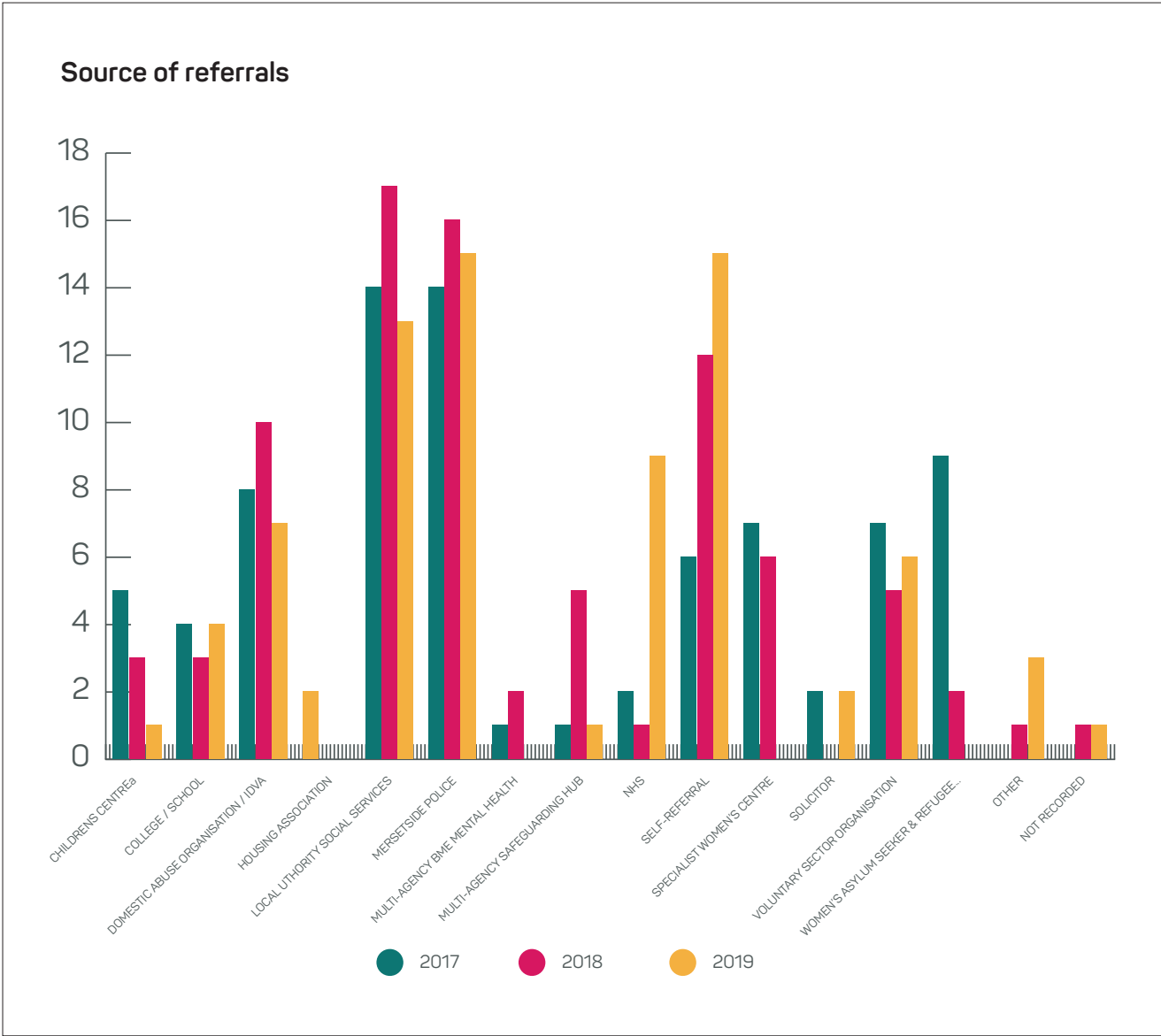
### Staffing

At the start of the project, National Lottery funding enabled the recruitment of a full-time Service Development Manager, a full-time support worker (initially split into two 18.75 hour posts) and a full-time administration worker. An initial aim of Saveria's directors was to have carried out one-to-one case work with at least 20 women (in addition to the existing 18 clients) in the first year of the project. Because of a far greater increase in referrals than anticipated, at the end of year one it was agreed with the National Lottery to allocate a larger portion of their grant to the support service. This allowed support worker hours to be increased to two 22.5 hour posts to respond to the increasing workload, but meant less funding being available for community engagement work. Over the course of the three year project, National Lottery funding for support worker hours was further increased to meet growing demand for the service, although staff turnover resulted in periods when the Service Development Manager alone was supporting clients in addition to the work required for her managerial role, or was working with just one support worker. From March to November 2019 two full-time support workers were in post; National Lottery funding covered one of these posts entirely and two days of the other. Merseyside Police and Crime Commissioner funding financed a further three days of the latter SW post.

## Referral process

Saveria UK has two referral pathways, one for self-referrals, the other for professionals. Professional referral is through a referral form, which requires information about type(s) of abuse, levels of risk, and any additional support needs. The more information that is provided at this stage by the referring agency the more easily Saveria is able to identify and respond to immediate risk, and quickly set up actions required for appropriate support. Delays sometimes occur when a referral form does not contain enough information, perhaps because the client does not speak English and the referrer has not been able to fully ascertain information about risk and harmful practices.

The sources of referrals for each year of the project are set out in the chart below. The majority of referrals came from Merseyside Police, social services, self-referrals and domestic abuse organisations. Self-referrals increased by 150% over the duration of the project, indicating that more women and girls are aware of Saveria as an organisation where they can directly obtain safety and support.



# Caseload

Over the three year project, the caseload grew to from 18 to 255, with the number of cases rising from 18 to 99 in the first 12 months. The substantial increase in referrals can be largely attributed to Savera's leadership in developing and promoting a Merseyside Harmful Practices Protocol, and to engagement and training activities carried out by Savera's staff, Board, and volunteers, to raise awareness of forced marriage, 'honour'-based abuse and FGM among criminal justice, health, and social care agencies.

At the end of the second year of the project, there were 178 cases in the database (including a small number of cases involving more than one client, either as couples or siblings). Staff were dealing with large caseloads and were under pressure to support a rapidly increasing number of referrals to the service. Whilst some referrals did not comply with Savera's referral criteria, most did meet the criteria for support, requiring risk assessment, safety planning and safeguarding provision, with many cases involving complex presenting issues, such as a need for immigration/asylum advice, relocation, housing, and ongoing support for social isolation and emotional wellbeing.

While Savera offers time-unlimited support to all clients who require this, as the project progressed and referrals increased, a caseload review enabled a clearer prioritisation of cases, with some cases being de-escalated to 'low-risk' where safe and appropriate. It must be emphasized that Savera never officially closes a case, as the risk of severe violence and murder is always present in the lives of the majority of their clients. Consequently, there is a vital need for an immediate response and time-unlimited support for all clients who require this. Savera is often contacted via their social media by clients who have moved out of area and who require help, for whom Savera provides telephone and email support.

Case risk management operates within a traffic light system as set out below.



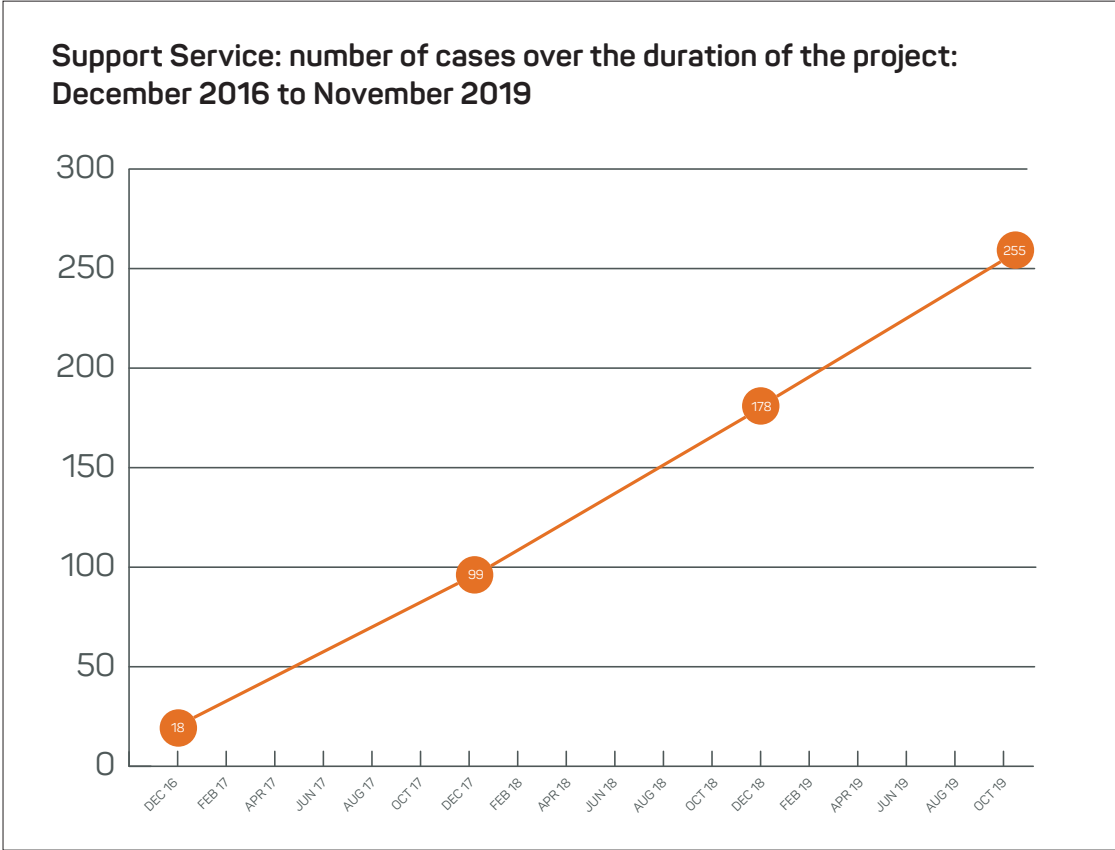
A snapshot measure of the caseload at September 2019 was 236 cases, with two full-time support workers (the National Lottery grant fully funded one of these posts and two days of the other) providing comprehensive support to nine high-risk, nine medium-risk and four low-risk clients, with three imminent referrals. Savera makes bi-annual contact with all clients on their database to review levels of risk and support needs. Sustaining this extensive amount of support has significant implications for the resources of a small staff team, demonstrating how essential long-term funding is to meet the growing demand for Savera's service.

Savera's directors continually oversee the support service caseload, the nature and complexity of cases, and pressures on staff, and act accordingly, including by increasing the number of staffing hours where budgets allow:

*At Board level, we do review at every meeting where are we up to, what's happening, what are the issues that the staff are dealing with, what do we as the Board need to be doing? (Director 3).*

One way of easing time pressures on project staff is the use of volunteers. Savera has recruited a small number of dedicated volunteers who are given full training and are supported in their role by project staff and / or a member of the Board. The volunteer role mainly involves offering low-level support, such as form filling or accompanying clients to appointments, although one volunteer (who had previous experience through a university placement) leads the drop-in, and Savera plans for some volunteers to progress to taking on case work. Most recently, Savera has formed a partnership with a local organisation that supports victims of sexual violence, in order to jointly recruit, manage and support volunteers. This initiative is in the early stages of development, and will be reviewed as it goes along. Savera will also continue with its own volunteer programme, in particular recruiting community champions who will provide peer support.

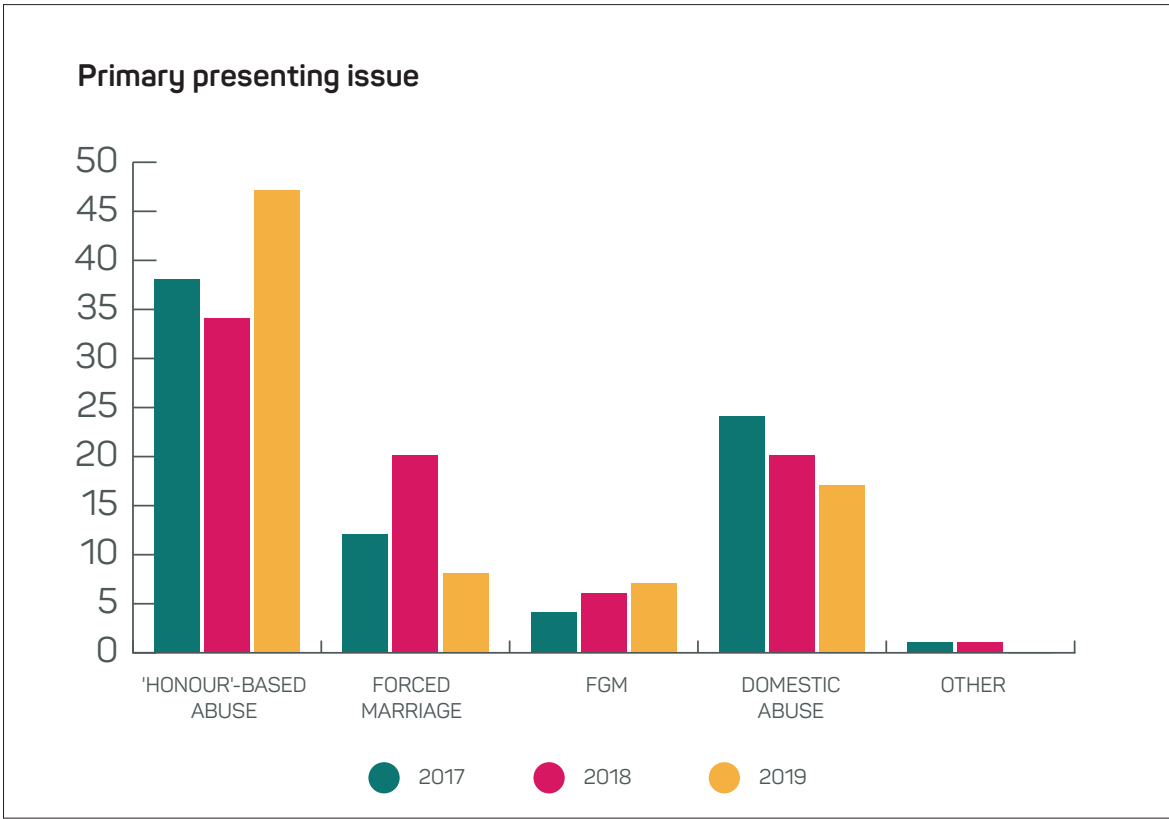
Caseload over the duration of the project. The National Lottery funded support service began with 18 pre-existing cases.



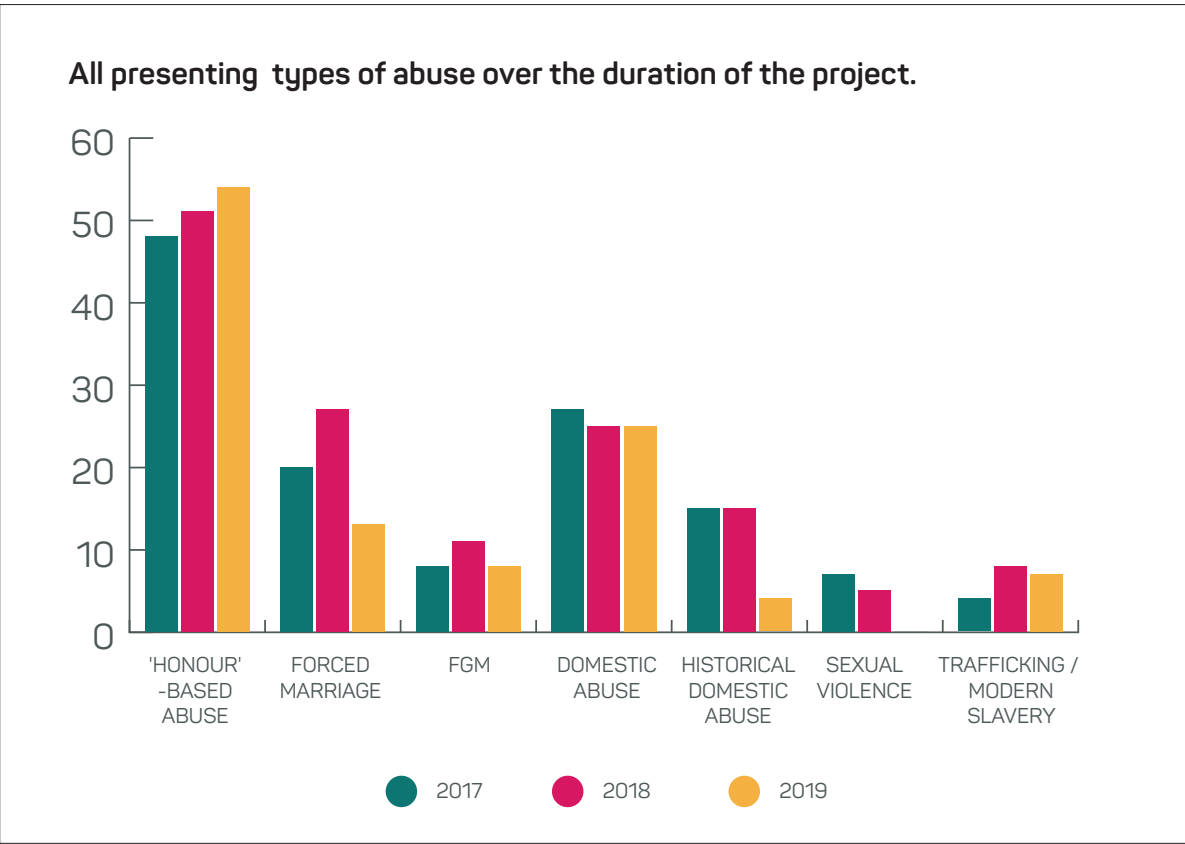


Presenting issues

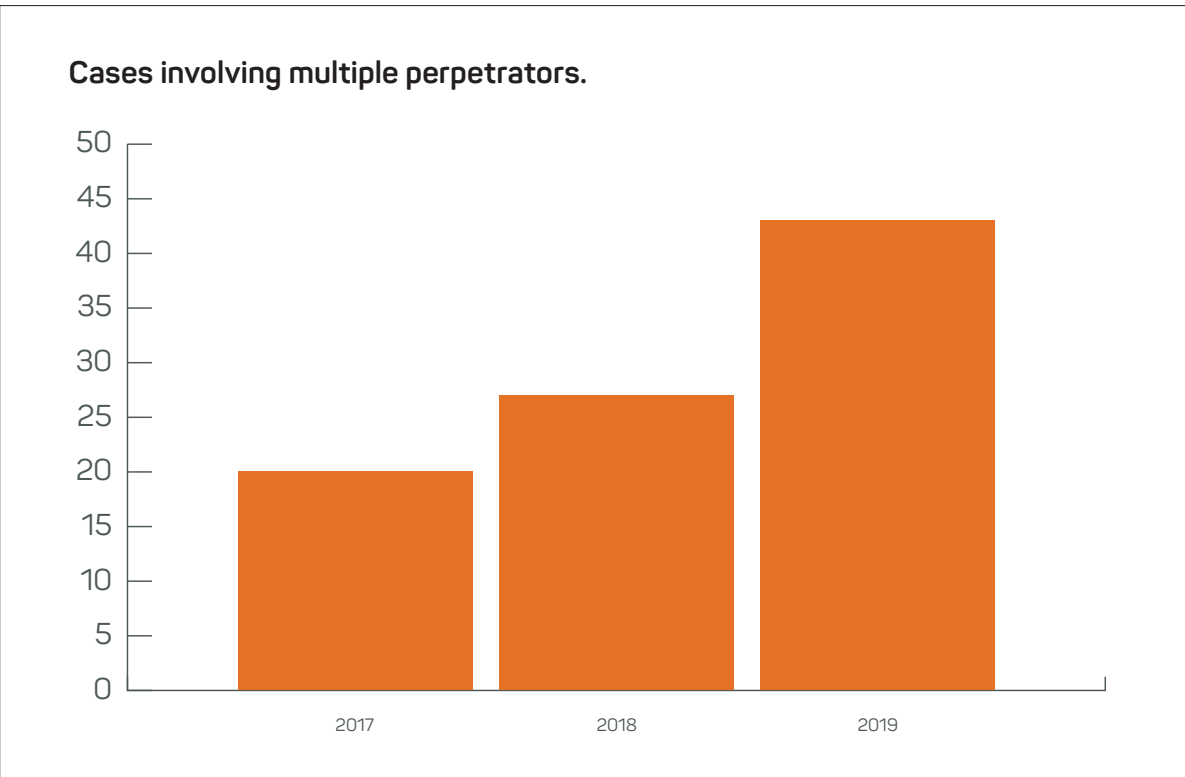
Most clients were escaping from an abusive relationship or family primarily because of 'honour'-based abuse. The issues recorded as primary presenting issues requiring Saverá's intervention and support were 'honour'-based abuse, forced marriage, FGM and domestic abuse, as presented in the chart below.



It is important to emphasise that the majority of cases involved more than one type of abuse, requiring support workers to address multiple areas of risk when safety planning and providing support. For example, forced marriage often includes 'honour'-based abuse and / or sexual violence; 'honour'-based abuse may be accompanied by domestic abuse and /or modern slavery; FGM might be linked to forced marriage. A number of cases involved trafficking and modern slavery in addition to 'honour'-based abuse, domestic abuse, forced marriage or FGM. Cases involving 'honour'-based abuse increased over the period of the project. Some women disclosed sexual violence, even if it was not reported as the primary presenting issue. Where 'historical domestic abuse' was recorded in addition to one or more harmful practices, the long-term impacts of trauma, including anxiety, depression and post-traumatic stress disorder that are often experienced by women with histories of domestic abuse must be recognised, as many will require ongoing support.<sup>81</sup> Multiple perpetrators were identified in 90 cases, with the number of cases increasing year on year (20 cases in year 1; 27 in year 2; 43 in year 3). [See charts on the following page].



The figures in the chart above relate to domestic abuse, harmful practices and other forms of abuse present across all cases.



Safety planning

Savera draws up a safety plan with each client at their first meeting. The safety plan is based on a risk assessment determining the level and sources of risk to the client, which often involve multiple perpetrators. Clients are given emergency contact details for the police and the telephone number of their Savera support worker. Most cases involve working with police and adult and/or children’s social services to ensure statutory safeguarding and emergency response provision is in place. When required, Savera operates a 24 hour call service for high risk clients; their internal risk indicator designates every ‘honour’-based abuse case as high risk.

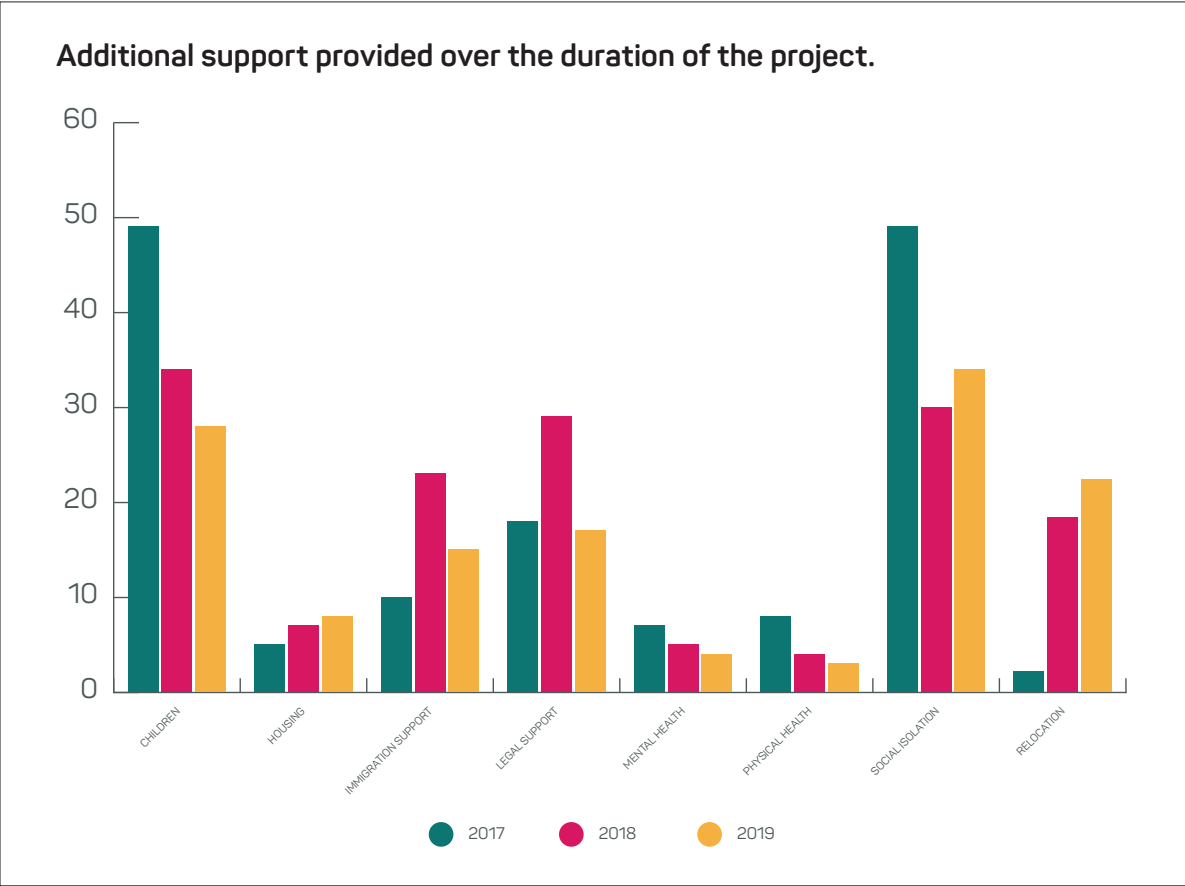
Additional support needs

Once a safety plan has been drawn up, and statutory safeguarding and emergency response and other actions are in place, Savera provides clients with a range of support specific to their needs. This may include help with relocation and housing; applying for an FGM Protection Order (FGMPO) or a Forced Marriage Protection Order (FMPO); making links with specialist immigration, child contact and other legal support; referrals to counselling, mental health and physical health care services and alleviating social isolation. Staff receive a high number of requests for advice from clients for whom other services have been unable to provide low level support such as form filling. This accords with recent research findings that funding cuts to generic advice services have resulted in more women turning to frontline women’s organisations for a wider range of provision.<sup>82</sup> Ongoing emotional and moral support is a major aspect of Savera’s service that cannot be adequately captured in a database; this is explored in detail through service users’ testimonies in the project outcomes section of this report.

The extent of additional support required by clients was not entirely foreseen at the beginning of the project. At that time, the Board had thought that once clients’ safety and protection needs had been addressed, most would no longer need Savera’s support. This proved to be far from the case, with many women needing high levels of ongoing and intensive support, as illustrated by the quote below:

*We have looked to provide the one-to-one service to a far greater number of people, because we are seeing a lot more people than we first thought we would be, but we also recognize the amount of time it takes due to the complexity of the cases. ... we thought we would be dealing with a crisis, and once that was sorted out, the client would no longer need our service. ... The issue of accommodation is huge, finding safe places in terms of staff time, working with other agencies to find safe accommodation and also physically going with clients to a safe house, to make sure everything is OK with them. ... when we have a little bit of extra money, we’ve increased [support worker] hours to deal with the complexity (Director 3).*

The following chart shows the areas of additional support provided across the client base. The category ‘children’ indicates support provided in relation to children in areas such as safeguarding, liaison with schools and health services, and legal processes including child contact. The category ‘legal support’ includes making applications for FMOs and FGMPs and areas where solicitors are involved, for example applications for non-molestation orders, pursuing a criminal complaint against abuser(s), divorce proceedings and child contact arrangements. ‘Immigration support’ involves collating evidence to support clients’ asylum / ILR claims, linking with specialist solicitors, helping clients apply for Legal Aid, accompanying clients to appointments, including court and Home Office interviews and lodging fresh and new claims. Cases involving housing and relocation rose over the duration of the project.



Savera provided interpreters for 57 women in 16 different languages. The highest need of interpreter by language was Arabic followed by Farsi, Kurdish, Bengali and Urdu.

Savera drop-ins

A key aim of Savera drop-ins (referred to by clients as coffee mornings) is to reduce the social isolation that is experienced by many of their clients, most of whom have left behind homes, families and friends to seek safety from abusive, dangerous and life-threatening situations. At drop-ins, women make friends, have a cup of tea or coffee and a chat, and engage in various educational and recreational activities including English lessons, courses designed to build emotional resilience, self-confidence and skills, cooking classes, yoga, and crafts such as glass jar painting, card making, knitting and cross stitching. Women can bring their children with them, and sometimes cook for each other.

Early in the project, drop-ins took place intermittently, but as their value in terms of social interaction and support became clear, they were developed into a regular and integral support service activity. Since January 2019, drop-ins have been provided on a weekly basis, with an average of 10 – 15 regular attendees. Drop-ins are facilitated by a member of staff and trained volunteers.

## Partnership work

Savera UK works in partnership with statutory and voluntary sector organisations in order to ensure the safety and wellbeing of their clients. Savera is a member of Merseyside Multi-Agency Risk Assessment Conference (MARAC)<sup>83</sup>, and attends all MARAC meetings that involve 'honour'-based abuse, either as the referring agency, or in an advisory role to provide information and guidance to other agencies to ensure victims' safeguarding needs are met. In addition to their role with MARAC, Savera works with the Children's Safeguarding Unit on cases which involve children and young people at risk of harmful practices. Savera attends strategy meetings convened by both children's and adult social services regarding their own clients. Lack of capacity makes it difficult for a member of Savera's team to attend all statutory meetings relating to clients who are not known to their organization; in these instances, Savera undertakes conference calls to provide expert advice, and welcomes referrals to their service.

Once Savera has attended to clients' critical support needs, they often refer women to other organisations for a range of health, legal, educational, and wellbeing support. Savera draws up agreements with all agencies they work with to provide a service delivery and confidentiality framework. In particular, Savera has partnership agreements with a women's health and wellbeing service, a women asylum seeker support service, and NHS mental health services, to ensure that a range of appropriate provision is made available to shared clients.

Savera is frequently contacted by other agencies seeking advice relating to policies and processes for harmful practices cases. Savera offers advice and guidance on areas such as MARF (Multi Agency Referrals Forum), MARAC referrals, referrals to the police, specialist country reports,<sup>84</sup> and Forced Marriage protection orders. As the volume of these type of calls increased over the course of the project, staff found it difficult to log them all, alongside processing a growing number of referrals and dealing with their own caseloads.

Savera co-ordinates training which is co-delivered with Merseyside Police to ensure there is local statutory agency awareness about identifying and understanding the particular risks relating to harmful practices, how to respond appropriately to victims, and what are the legal and safeguarding responses. Savera delivers similar training to agencies in the voluntary sector. Savera has delivered a Spotlight session on culture and safeguarding to the local Safeguarding Board, which covered essential procedures for cases involving harmful practices. The same information has been relayed to a GP member of the Clinical Commissioning group, with the aim of it being incorporated into nurse training.

## Challenges relating to partnership working

There have been a number of challenges in regard to raising awareness of harmful practices among some agencies. Savera's project workers and directors were particularly concerned about statutory services not always recognising the family and community contexts of 'honour'-based abuse and consequent levels of risk, which had sometimes led to delays in the implementation of safeguarding actions.

Savera's directors reported that while they are fully committed to working in partnership with other agencies to share responsibilities for client safety and to reduce risks, there were occasions when some agencies appeared to expect Savera to undertake actions that were outside their area of responsibility and authority:

*While we want to be what we are, a specialist service, because Savera staff are so good at providing good quality care, other agencies may say, "well you can do that, you're good at that". And while it was always our intention to work in partnership, it's finding the line between our work and work that we are not commissioned to do. There is our work that we do as our contractual agreement with the Lottery, and then there is work that is the responsibility of statutory services to deliver (Director 3).*

Although Savera has delivered training to a wide range of statutory and voluntary sector agencies, the expectation that Savera should take on actions that lie beyond their remit appeared to relate to some organisations having little experience of harmful practices. This can result in Savera staff undertaking actions that are the responsibility of other agencies, to ensure the safety of their clients:

*We always have to make sure that actions [agreed to be undertaken by partner agencies] are done, as we have no confidence that they always will be. We know the risks, we want to make sure that a safety plan and actions have happened, so we're constantly on the phone (Director 1)*

*And it's about time, this is a matter of life and death for the person we are trying to protect, so it's hard to say we won't do what is actually somebody else's job (Director 2).*

While Savera is frequently consulted on complex cases relating to harmful practices, directors cited examples where some agencies had tried to undermine Savera's expertise and advice when Savera staff had been obliged to challenge decisions in order to ensure a client's safety. Such situations are now a standing item at every Savera Board meeting:

*One of the things about governance issues, and this is a theme that comes up at every Board meeting, is the pressures being put on our staff by external agencies. And we do act quickly to address any indication that our staff are being bullied, or not being treated with respect by other agencies; that is something we deal with at Board level, because it's totally unacceptable (Director 3).*

While there is evidence that many organisations are greatly strengthening their responses to harmful practices as a result of Savera's advice and training (see project outcomes), changing attitudes and perspectives has at times presented a challenge. Directors identified an issue of some training attendees believing that harmful practices are somehow inevitable in certain communities, rather than accepting that this type of abuse is a universal problem, rooted in discriminatory attitudes against women and girls:

*I think it's the bullying attitude, and its related to what has been our emphasis on BME communities, and a lack of understanding about HBA and harmful practices. Director 1 has I'm sure, many examples, and I've heard some of them, around doing training, where the response has been, "well it's normal in that community". And while sometimes that might be a genuine lack of understanding, I think there are other instances where there is a view, "well they do that" (Director 3).*



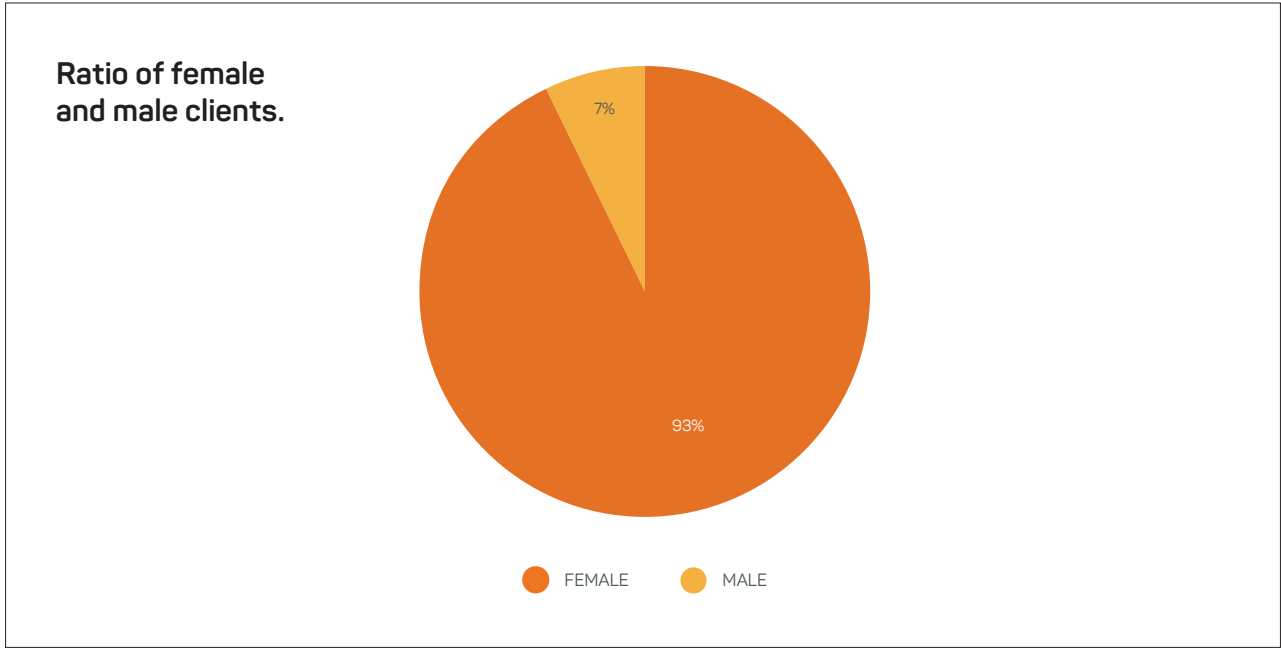
The findings discussed here present a contradictory situation in which Savera is perceived as the ‘go to’ agency for advice and referring women and girls at risk of harmful practices, while also sometimes being discredited when they raise the need for more awareness and diligence when working with victims of such practices. Savera sees this as an ongoing learning process and makes explicit on their referral form the safeguarding actions they will take in response to any indication that someone is at risk of harmful practices.

The evidence from interviews with senior and key professionals in statutory services points to an appreciation of the knowledge base that Savera has introduced to their services and demonstrates that Savera’s advice and expertise has been pivotal in strengthening local responses to harmful practices. This is discussed in more detail in the project outcomes section of this report.

Client demographics

Gender

Savera’s support service was predominantly delivered to women and girls. Over the duration of the project, 93% of clients were female. Male clients received support for ‘honour’-based abuse and forced marriage. Almost half of male clients were part of a female / male couple.



Around one in twenty women experiences extensive physical and sexual violence and abuse compared to one in a hundred men, with BME women facing additional barriers to services.<sup>85</sup> Women who are multiply disadvantaged have complex and layered levels of need and are “at the sharpest end of inequality”.<sup>86</sup> It is vital that both female and male clients receive a comprehensive package of support according to their needs, and a gendered analysis is important in understanding the differing contexts and experiences of harmful practices for women and men in order to deliver the most appropriate responses.<sup>87</sup> For example, forced marriage usually affects women and girls differently and more adversely than it affects men, as women and girls are far more likely to be at risk of domestic and sexual violence, forced pregnancy, having their movements policed, domestic servitude, and being forced to withdraw from education and employment.<sup>88</sup> As stated by Imkaan: “One way of thinking about this is, ‘a forced marriage is not a forced wedding’”.<sup>89</sup>

Clients’ age range and types of abuse by age

There was a wide age range of clients. Most were aged between 16-40, with smaller numbers aged 10-15 and 9 and under, and 41- 46 and over.

‘Honour’-based abuse, while being present across all ages from 10 upwards, occurred mostly with clients aged between 16 and 35. Forced marriage was mainly reported on behalf of, or by, clients aged 16-25 but was found in every age group up to 40. Domestic abuse was more frequently reported by clients aged 31-40, although was present across all age groups except those under 16. FGM was usually reported in relation to a child: this sometimes related to a mother disclosing the risk of FGM for her daughter(s). In these cases, the mother had often been referred for support relating to another issue such as domestic abuse and/or ‘honour’ based abuse, with FGM emerging as a risk for her child(ren) during Savera’s risk and needs assessments.

Clients’ ethnicity and immigration status

Collecting data on clients’ ethnicity and immigration status is integral to the analysis and delivery of a specialist BME women’s service.<sup>90</sup> Savera collects and uses this data to establish trends, identify different cultural and support needs, focus where information needs to be gathered from specific Home Office country reports on risks to women fearing gender based violence, and inform decisions on where Savera should best target its resources, so as to deliver services that are sensitive to clients’ specific needs. For instance, 51% of cases over the three years of the project related to asylum seekers, refugees, clients with spousal or student visas, or women with insecure immigration status who required advice and support for domestic abuse and harmful practices.

Cases categorized ‘asylum seeker’ or ‘insecure immigration status’ often involve Savera providing evidence to support a client’s asylum claim (including Home Office country reports), linking with specialist solicitors, helping clients apply for Legal Aid, accompanying clients to appointments, including court and Home Office interviews, lodging fresh and new claims, and providing the client with ongoing emotional support.

Over the course of the three year project, Savera supported clients of diverse nationalities, including those from Africa, Asia, the Middle East and Europe, as well as UK citizens. At point of referral, the majority of clients were residing in the North West of the UK, with smaller numbers from the Midlands, North East and South East.

# SCHOOLS-BASED AWARENESS RAISING PROGRAMME

This work commenced in July 2018, and was delivered in partnership with Brook, who have expertise in promoting sexual health and relationship education with young people. The aims of the programme were to raise awareness of healthy and harmful relationships, domestic abuse, 'honour'-based abuse, forced marriage and female genital mutilation. Brook co-ordinated the sessions by liaising with schools to introduce the domestic abuse and harmful practices programme and request its inclusion in the school curriculum. The session content was put together by Savera, as a specially designed training package for use with young people. The programme was delivered mainly to girls.

Before the programme was delivered, Savera and Brook convened a focus group with young people to gather views to inform the content of the sessions. Six young people aged between 12 – 14 took part: five girls and one boy. Two girls were from BME backgrounds.

The awareness raising programme was delivered in 12 schools. Available data show that 10 assemblies and 4 small group sessions were delivered to girls aged between 12 and 17, with a further 7 mixed-sex assemblies (Appendix 9). Mixed sessions were intended to raise the awareness of boys to facilitate wider peer group understanding, and to encourage young people to work together to speak out against harmful practices. Mixed sessions were introduced towards the end of the project, and were not part of the evaluation remit.

# COMMUNITY ENGAGEMENT

The original role of support worker included community engagement to raise awareness of domestic abuse and harmful practices, women's and girls' legal rights, and where those at risk could seek support. Because of the steep rise in referrals to the support service, however, support workers' time and resources were of necessity largely taken up with the provision of one-to-one support for the duration of the project. Nevertheless, various awareness raising and training work with professionals, such as police, social services, Children's Centres, and voluntary sector agencies, has been ongoing throughout the project. Additionally, a focus on communities affected by harmful practices led to four community-based awareness raising events with women from different BME communities (Appendix 10).

A Community Outreach Worker was recruited in July 2019, partly as a result of National Lottery funding. Work has commenced on making contact with local services and communities, with the aim of establishing regular community drop-ins and engagement and awareness activities.

# PROJECT OUTCOMES

Outcomes are the changes, benefits, learning and other effects that have occurred as a result of Savera's project.<sup>91</sup> Outcomes have been evaluated in relation to the support service, schools-based awareness raising and community engagement. Evidence for outcomes is drawn from all data sources, and informed by a literature review, as robust background knowledge against which Savera's work and women's individual experiences can be better understood. As staff time and resources are mostly concentrated on the support service, this is the main area of analysis.

## SUPPORT SERVICE

The outcomes relating to the support service are organised into interlocking themes which describe women's journeys from abusive and life-threatening situations to safety, self-determination and empowerment. Savera's clients' voices feature prominently throughout, to properly represent the depth and profundity of their experiences. Participants are referred to by a first name; all names are pseudonyms.

### Holistic support

(Outcome 1: Savera UK has increased the provision of holistic person-centred approaches for BME women and girls at risk of domestic abuse and harmful practices)

### Lifeline and safety net

*His friends and family were harassing me and telling me to go back to [country of origin]. In [country of origin] females have no power and police do not get involved in domestic incidents unless there has been a case of murder. ... But they [in-laws] were blackening my name, spoiling my character. And the law is that I could be hanged or stoned for having another relationship. What they said about me was completely wrong, it was so untrue. ... Nobody has considered the abuse I have been through, how I had to live with that situation (Naseem).*

When women and girls first arrive at Savera they are usually extremely frightened and traumatised. Most have escaped abusive and dangerous situations and are alone and destitute. Many have been forced to leave home and relocate in another part of the UK; some are seeking refuge in the UK from another country. Many are with their children. It is often a pattern or severe (but rarely one-off) incident of domestic or 'honour' abuse, and / or a threat of forced marriage, with sometimes the fear of being murdered by family members or a wider network of perpetrators, that has driven a woman to seek help.

At the beginning of the National Lottery funded project, a new support structure was implemented by the Service Development Manager, comprising a referral pathway, safety planning, and risk and comprehensive needs assessments. By addressing women's multiple needs within a methodical system that can be easily accessed by the whole support team, Savera has streamlined and increased the provision of holistic person-centred approaches for BME women and girls at risk of domestic abuse and harmful practices.

Throughout the course of the project, the number of women and girls who were supported by the service rose from 18 to 226.<sup>92</sup> Ninety three per cent of clients were female. The initial, and essential, area of support is securing women's safety. Women are allocated an individual support worker who firstly undertakes a risk assessment and safety plan with the client to ensure actions are put in place to maximise her safety, and if appropriate, that of her children. This usually includes working with police and / or social services to ensure statutory safeguarding provision. Most clients require support with multiple and overlapping presenting issues, such as forced marriage / fleeing an abusive family / emergency housing. Support workers therefore address several areas of risk when safety planning and prioritizing actions.

Savera support workers demonstrate strong relational and reflective skills and work with sensitivity and care to gain the trust of women and girls who are referred to them. Central to this is reassuring clients that Savera would never contact family members or anyone in their community. Personal details are collected only after the client has received initial advice and has decided to engage with the organization: this provides an additional layer of safety for women and girls who make contact when they are under extreme stress and fear.

Once a safety plan is in place, support workers use a template to assess individual needs, so that the assessment is client-focused and completed within a framework covering all areas of support and intervention that may be required. Interviewees said this gave them encouragement and a basis on which to reflect and discuss their support needs:

*The nice thing about the women here, they start to ask what they can do, they do that step instead of me, as they can see that it is difficult for me to talk about what I need... They have a list that they go through and that is such a help (Joy).*

Most of the women who were interviewed were frightened of being harmed or even murdered because of family and community codes of 'shame' and 'honour'. This might be because they had refused a forced marriage, had left a violent husband, or were being blamed for the breakdown of a marriage. After Louise's abusive husband left her and their small children, he and some members of her family threatened her life:

*After he left my family received a lot of threats from him, and from members of my paternal family. They have turned against me; they say that I have put the family to shame, and that I shouldn't live. My ex-husband has threatened to kill me; he has threatened to kidnap my children and take them to [his country of origin].*

There is evidence from different sources of Savera support workers intervening quickly at crisis points to provide a lifeline and safety net within their wider support system. SW 1 reported an incident where an asylum seeking client texted to say she was intending suicide. SW 1 alerted emergency services and the client's life was saved. With Savera's help, the client subsequently accessed appropriate mental health support. This client recently reported that her mental health has greatly improved, and that because of Savera's ongoing advocacy and emotional support, she has hope for her future. Another client related how Savera had responded immediately to her request for help to escape a forced marriage by alerting the police, who provided her with an escort on the day she left home. Savera had arranged her travel to another city where they had secured her a place in a refuge. In a case where a girl had been taken abroad to be forcibly married, Savera worked closely with Children's Safeguarding and the police to ensure she was brought safely and swiftly back to the UK, where Savera provided her with ongoing practical and emotional support.

As a member of Merseyside MARAC, the Savera staff team has received training in MeRiT, the MARAC risk assessment procedure.<sup>93</sup> Because of the high risk of serious harm or murder, all cases of 'honour'-based abuse are referred to MARAC, and are heard in a closed session involving only those organisations directly engaged with the particular case.<sup>94</sup> The support system that was implemented by Savera at the beginning of the National Lottery funded project has enabled significantly more effective engagement between Savera and MARAC. Savera attends all closed sessions that involve harmful practices in order to advise partner agencies and provide support to victims. A Liverpool MARAC officer stated that: "Savera plays a much more active role particularly in the closed MARAC. There is a clearer structure to Savera, and this has greatly benefitted contact and communication by and with MARAC". A senior MARAC officer reported that Liverpool MARAC has benefitted from the specialised knowledge and experience that Savera brings to the partnership:

*Savera brings a breadth of knowledge about 'honour'-based violence, forced marriage and other harmful practices, either as the referring partner or in an expert advisory role, particularly if other organisations do not have a great deal of knowledge about harmful practices.*



This is a particularly important finding, as perpetrators often use covert tracing and surveillance methods to find their victims, which may include the involvement of people unknown to the victim. It can be difficult for agencies who have little knowledge of these tactics to recognise and respond to them:

*I think community based 'honour'-based abuse, it's not always tangible, clients tell us that they feel they are being watched by people they don't know ... it's much more hidden and insidious and that is something it's hard to get other professionals to understand as it's much less tangible (SW 4).*

Savera works closely and effectively with the police and social services to ensure the safety and wellbeing of their clients. Both Merseyside Police Public Protection Unit and Liverpool Children's Safeguarding Unit reported that Savera is their 'go to' agency when they refer victims of harmful practices for ongoing support. These agencies rely on Savera's expertise and guidance with cases that involve harmful practices, and Savera's advice is routinely sought in multi-agency safeguarding meetings that are convened and chaired by the Children's Safeguarding Unit.

Savera has worked hard to raise awareness of harmful practices in statutory partnership agencies. The Children's Safeguarding Unit described the importance of their partnership with Savera, particularly Savera's role in raising awareness amongst statutory safeguarding organisations of how to identify harmful practices, the additional risks posed by multiple perpetrators, and how to safely intervene in accordance with the Merseyside Forced Marriage and Honour Based Violence Protocol:<sup>95</sup>

*I feel we've built up a good rapport with Savera, they've been pivotal in helping us sharpen our practice in identifying people at risk, [so as to] pull together a multi-agency safeguarding meeting and devise a multi-agency safeguarding plan. And I don't think we'd be as advanced in that without the input of Savera. ... I think Savera has been the focal point for police, Children's Services, Adult Services, in connecting these different services, and making us realise that we've got a lot of work to do.*

## SUMMARY INTERVIEW: MERSEYSIDE POLICE PUBLIC PROTECTION UNIT

The interviewee's role in Merseyside Police is to ensure that Merseyside Police's policies regarding Domestic Abuse, Honour Based Abuse and Forced Marriage, and Stalking and Harassment, are current and are implemented throughout the force. The officer works within the force's strategic Public Protection Unit, which supports the four operational Protecting Vulnerable Persons Units across the force.

Whilst the police inform women of their choices regarding generic domestic abuse support agencies, because Savera is one of the few organisations in Liverpool and surrounding area that offer support on harmful practices, Savera is promoted within the force as being the 'go to' agency for referring someone experiencing HBA, FM, or FGM for one-to-one support. Savera refers clients to Merseyside Police when there is an immediate or urgent safeguarding issue.

Savera plays an important role in advising Merseyside Police about cultural practices and national guidance on different harmful practices, and is valued by the police for the extensive emotional and practical support it provides to victims. The importance of involving Savera in harmful practices cases is a standing item on the police case review checklist. Savera's provision of support prior to, during and after police involvement is vital in keeping women and girls safe; there are indications that victims of harmful practices are far less likely to return to abusive families when they are supported by Savera. A key aspect of Savera's engagement with the police is to raise awareness with regard to the needs and perspectives of victims, and Savera will appropriately challenge statutory agency decision making and processes where they believe these may not have been addressed:

*The workers there [Savera] are good at being a voice for the victim. Sometimes the officer can be frustrated as this may not be what they want to hear. But Savera is the voice of the victim and what they need. I think that is a good thing, they are good at challenging, and that is what we need.*

The officer sees the need for a range of local agencies who provide support for victims of domestic abuse to provide them with a choice of services. Where Savera excels is in having the cultural knowledge and expertise that enables them to provide specialist support for harmful practices that is not usually available in mainstream organisations:

*And in Merseyside we have been very lucky to have Savera. When they started it was mainly an advisory role, and the fact that they have had this money from the Big Lottery to be able to employ case workers has definitely filled a gap that I can't tell you how much.*

Another partner organization that confirmed the vital role of Savera in securing women's safety is WHISC (Women's Health Information & Support Centre), which works to improve the health and well-being of vulnerable and isolated women across Merseyside:

*Women have already had support from Savera by the time they come to WHISC. They have provided them with safety, they've provided them with clothes; [attended to] their wellbeing. Some of the women have been frightened in some of the hostels they've been placed in, and Savera has got them out and found them a safe place to live. They have given them travel expenses, arranged appointments with a solicitor. They have been with the women every step of the way. They keep in touch for as long as the women need support.*

WHISC refers BME clients who are experiencing domestic abuse and/or harmful practices to Savera. Once Savera has attended to clients' critical support needs, they may refer women to WHISC for additional wellbeing support as part of an agreement between the two organisations to work together to provide appropriate support to their shared clients. This agreement is one of two such agreements with local specialist women's organisations that have been drawn up by Savera to enable Savera to draw on its own specific areas of expertise whilst forging partnerships with appropriate gender-specific agencies to ensure the best outcomes for each client. This embodies the solution focused and comprehensive model of support that has been identified as underpinning women's organisations' "ability to support, mobilise and inspire women and seek to establish long term solutions to the challenges they face".<sup>96</sup>

All of the clients who were interviewed felt safer, supported and listened to because of the help they had received from Savera. The majority were at risk from multiple perpetrators, with some describing how their families had put extreme pressure on them to marry against their will, or to remain with abusive husbands, telling them that to leave the marriage would lead to them being killed to uphold family 'honour':

*In my country, even if a husband hit her, they say she need to go back. Families say you are married, it's like, you have to go back to him because it is your home, and my family say, "you need to go when you dead, you need to leave. You can't leave your husband's house like this." And one day it was too much, and I take the step. And I was scared, scared, scared ... I feel safe here [Savera]. They said to me that if I need help at night time or day time we will help you (Rihanna).*

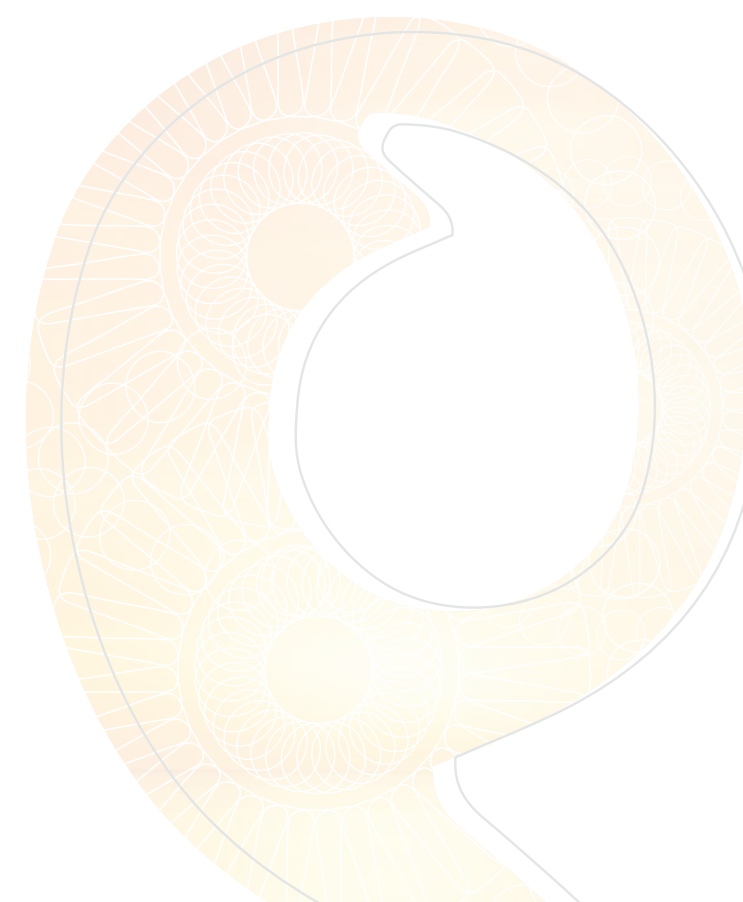
Rachel, who is under threat of forced marriage and 'honour'-based abuse, was clear that she felt considerably safer after coming to Savera:

*Oh my goodness, definitely. Most certainly. They've told me what I need to do to keep myself safe, and that I have to report to the police if there's something I feel scared about, or if a member of my family contacts me. I know how serious this is. They've told me that the most important thing is that you feel safe.*

Most interviewees expressed an overwhelming sense of relief that they had found an organisation that could help them with their full range of support needs, where there was usually one person who could help them navigate through different agencies and systems. Of particular importance was knowing that support was not time-limited, and that they could call on Savera for ongoing help and advice, with some contrasting this to the more limited support that is usually available from other organisations:

*My case has been put in front of MARAC, I was high risk, and until my case was closed, Savera helped me throughout my journey, they were there every time I needed them. Sometimes I feel that I am helpless because other organisations are not playing a part like that, but Savera always did. In fact, they call me regularly, and I wish other organisations were like that (Naseem).*

*I do [feel safer]. Because social workers are not there constantly. With Savera, it isn't that. They will support me as long as I need them. ... that's ongoing, I don't have to tell one person everything, then tell again to another person. They [Savera] are just a phone call away (Gulpreet).*



## Women-only provision

Savera's support service has an all women staff team, and Savera's directors are committed to maintaining this. Although Savera supports a small number of male victims of HBA and FM, women who use the service said it was very important to them that Savera staff and events are women-only. The reasons they gave for this were: feeling unsafe near men; feeling more comfortable being supported by, and with, only women; their cultural needs for a women-only service; feeling that women are more likely to have more understanding and empathy with victims of abuse, and that having a male support worker would be a barrier to disclosing and discussing abuse:

*I'm glad it's women-only. There are barriers, certain things that I wouldn't tell a man. I don't think I would feel comfortable talking to a man (Louise). I think I feel safe knowing that it's all women. I don't trust men at the moment, and I feel more comfortable. ... I feel at ease knowing it's all women staff, I don't have to think about what I can say (Gulpreet).*

*I think that women are more appropriate here as they have that way of understanding on an emotional level, and they can imagine themselves into the same ways. So when I told them I was beaten, they could imagine how bad it would have felt. [With women] it's relatable. If a girl says somebody was trying to tease her, to harass her, to rape her, that's something only a woman would understand. A man would not understand how it would feel to be harassed, to be raped (Laura).*

The reasons given by Savera's clients for preferring women-only provision are supported by a large body of research that demonstrates the vital role of women-only services in ensuring safe, gender-specific and trauma-informed environments.<sup>97</sup>

## Emotional support

*I come first, she [SW] say, "nice to meet you, welcome to Savera". She hug me, she kiss me, and these things. And she listen to me very, very carefully. She listen from her heart. I was crying, she held my hand, she said, "don't worry, now you are not alone, we are with you, we believe you". So, she give me hope (Sara).*

When they were asked, "what has been the most helpful or important thing that Savera has done for you?", most interviewees responded that this was the emotional support they had received from support workers. Uppermost was being able to talk about their experiences, being listened to, understood and believed, finding someone they could trust, and being given hope:

*She has listened to me. They all have understood what I need. They said, "whenever you need us, we are here" (Angelina).*

The Savera team is clear that offering one-to-one emotional support is a fundamental part of their service. WHISC reported while they offer counselling to women with lower levels of need, they refer women who require higher levels of emotional support to Savera, and the provision of emotional support is a valued aspect of Savera's work for statutory partner organisations, who are aware that once they have fulfilled their roles in securing the safety of the victim, there remains a lot more work to be done:

*We can breathe a sigh of relief because she's safe, but look at what she's lost and how do you replace that? She's lost her family in her country of origin, she's lost her family here, she feels very isolated, she's been moved to a safe place, but she doesn't know anybody there, she's in a different town, how does she pick up her life from now? I think Savera are able to provide lots of examples of survivors of harmful practices who've struggled but who are able to pick up their lives (Liverpool Children's Safeguarding Unit).*

Most interviewees spoke of the ways in which Savera had helped alleviate their acute levels of mental distress. Rebecca reported that before she came to Savera, she could barely speak or do routine tasks, but through a combination of listening and gentle questioning, she was able to talk to her Savera support worker about what had happened to her as the first step to regaining her mental health:

*When I first come to Savera, I couldn't even comb my hair. I couldn't put on dress. Now I can. Before I met them, I could not speak, I was choked with the feelings inside of me. When they came to see me, I keep pouring and speaking (Rebecca interview 1).*

Support workers are painstaking in gaining clients' trust and providing them with ways to speak about their experiences and consequent needs:

*She is very isolated and at first appointment she said she was fine, but she'd applied for asylum, she said you wouldn't understand. But I said to her, "why don't you try me?" And then she opened up and there was so much, I was there for over 3 hours. But because of everything that she's been struggling with, it hit her, and she didn't know what to do with it (SW 1).*



Many of Savera's clients experience conflicting emotions: not wanting to disobey their families, and anxious and upset that they are perceived by their families as a "bad daughter", or a "bad wife" for exercising their rights, whilst also wanting to make their own choices and decisions and build their own lives. This often results in intense feelings of grief for the loss of families and others who they love, but from whom they have been forced to flee and hide because of abuse and fear. These emotions were palpable in many of the interviews, and rather than use the term 'recovery' to describe the end point of women's paths through Savera's support service, it may be more appropriate to refer to 'incorporation', a concept which acknowledges that abuse and the loss of past lives and loved ones is not something women can simply 'get over' and 'move on' from. However, it may be possible to learn from and adapt to the damage caused by abuse, as part of ongoing growth and 'renovation' where both positive and negative experiences are integrated into survivors' sense of self and ongoing journeys, offering them a "realistic, achievable and potentially empowering goal".<sup>98</sup> In this respect, Savera support workers build relationships of trust to enable complex fears and emotions to be managed and assuaged, helping women take steps forward:

*Just being there, just believing in them, makes such a difference. A lot of the time they've been battered and bruised and told they're not worth it, and having somebody there to say, "you can do this, and I'm here to help you every step of the way" (SW 1).*

Survivors' journeys are seldom linear, and clients move both forward and back because of the impacts of abuse, loss and grief, ongoing or renewed threats from perpetrators, long-term trauma, or in response to official decisions that are beyond their control:

*I feel that because I recently got refusal from asylum, that has let me so down, that after being brave, after doing all these things, I am not getting anything. ... He strangled me many times and the last time he strangled me in the midnight, and I felt would have died in my sleep. And here, he is living his life, he is working, and has a visa, but after suffering all those things I feel that I should have support, why I have suffered those abuses and why I have raised my voice and told the police, because nothing happened. My family told me that because of society pressure they will support me to live in the UK, but they can't support me if I go back [to country of origin]. They want to disconnect for the sake of their security and safety. I feel that I am losing everything day by day (Naseem).*

Sara spoke of her immense fear of a male family member, who had threatened to murder her in the name of family 'honour', and while she has total trust in Savera and the police, not knowing where the perpetrator is causes her to feel constantly at risk:

*I don't feel safe 100%. Not because of Savera or the police; I believe Savera, I believe the police. I don't feel because I am not well. My [family member], I don't know if he is in [country of origin] or in the UK, if he know where I am.*

Being abused by a partner or family member(s) causes chronic fear, often leading to significant trauma and devastating long-term mental health impacts.<sup>99</sup> Studies have found that on average, 64% of abused women are living with post-traumatic stress disorder (PTSD), which is far higher than lifetime prevalence of under 26% in the general population.<sup>100</sup> Symptoms associated with PTSD include recurring memories of abuse; dreams or feelings of reliving abuse; changes in consciousness including loss of memory; loss of interest or involvement in life; feeling hopeless or pessimistic about a future; difficulty sleeping; poor concentration; hypervigilance; being easily startled or panicked; a sense of shame, guilt, violation or stigma; feeling a complete apartness from others; isolation and difficulty in making or maintaining relationships; distrust; hopelessness and despair.<sup>101</sup> Abused women are at greater risk of self-harm and attempted suicide, with particularly high rates among South Asian women<sup>102</sup> and female asylum seekers.<sup>103</sup> PTSD is likely to be more severe and long-lasting for women who remain in ongoing danger, experience multiple incidents of abuse, encounter secondary victimisation through negative reactions from others, and who are exiled from their families and communities.<sup>104</sup>

Meeting the needs of survivors living with the effects of trauma requires services that engender trust. This entails a multifaceted approach encompassing:

- Treating victims and survivors with respect
- Believing and telling clients they are believed
- Active listening and not judging clients for how they may think, feel or act
- Going the extra mile to show that clients are worthwhile and worth helping
- Giving encouragement; acknowledging how they coped and survived
- Motivating women to keep going by highlighting strengths and inner resources
- Being realistic about what can be achieved, and not overwhelming with tasks
- Not giving up - being persistent with other agencies to ensure things get done
- Working on coping strategies and strengths to enable clients to make safe and healthy choices which lead to feeling in control and individual empowerment.<sup>105</sup>

These essential components of trauma-informed support were evident when women were discussing the support they had received from Savera. Whilst women's ability to 'move forward' is rarely linear, the evaluation found women progressing through a number of stages from life-threatening situations to safety and empowerment, and that Savera's support, based on building relationships and trust, had significantly improved their emotional health and well-being:

*Savera help me because I been suffering domestic [abuse] and other things as well. And they help me because I was suffering depression, they gave me back to my life, I was very down (Rihanna).*

*Savera has given me the courage to find out for my future. You know when you need someone to push you? Yeah, Savera do this. I think for right things (Sara).*

*And just to have somebody there; I call her my angel, I really do, because it's not that she's there just doing her duty, she goes beyond that, she makes sure that I have what I need, she tells me she can come and see me or I can come to her any time I like. ... And any of the ladies who work with Savera, I can ring them up, and they're just as supportive. The dedication is there, and the passion, you can see it's not just a job for them. ... They do everything they possibly can to keep you motivated (Gulpreet).*

Women reported that being referred for counselling was helpful but waiting lists were long, and a number said that the emotional support they had received from Savera was just as, and often more, helpful than external counselling, which Savera staff reported as often lacking culturally specific approaches. Recent research looking at services for women experiencing multiple disadvantage found that the gender-specific, trauma-informed mental health services needed to effectively treat women with backgrounds of abuse were most often located in the voluntary sector rather than in NHS settings.<sup>106</sup> In 2018, Savera ran a six week 'Just for Me' course, designed to build clients' emotional resilience and self-confidence. This was attended by two interviewees, who reported it was of benefit for them.

Two women who took part in follow up interviews were experiencing ongoing symptoms of trauma after receiving between 6 and 12 months of support from Savera. These interviews revealed uncertain outcomes in that neither woman felt confident about moving on from Savera's support. Moving backwards in relation to emotional wellbeing is a common problem for clients who may feel anxious about their support coming to an end.<sup>107</sup> Laura, who is at risk of forced marriage and HBA in her country of origin, revealed fluctuating progress when, after six months of support, her case with Savera was designated inactive due an assessment of low risk (although she had been reassured it could be reopened should the risks increase). Since this interview, Laura's case has been reactivated due to her distress about the potential risks to her of HBA and forced marriage, as well as uncertainty over the outcome of her application to the Home Office to remain in the UK. Laura's progress towards self-determination can be charted in terms of intermediate steps: she has gained a Masters' degree and obtained part-time work and financial independence, and has benefited greatly from Savera's ongoing support:

*And here, I have my little freedoms, and I think, I love this life. I want this life. ... Here people were telling me, "you are really talented, you are going to be able to do anything you want to do". And I was thinking please don't say this to me because if you encourage me here, and I can't do what I want to do with my life, I'll be very demotivated. I was on anti-depressants, [and] Savera motivated me. I am better now, but still have my bad days, ups and downs, and mood swings. ... There is no medicine for this. It's just the motivation and the people around you who can make you believe in yourself. Here, I have the right people who can make me feel better.*

Laura's case is an example of the time-unlimited support given to clients, which requires sustained funding and resources. Savera recognises that all of their clients can be at continuing risk of HBA and, even when they are settled and happy, they can never feel completely safe. Knowing that their support will continue for as long as needed is vital for clients' emotional security and wellbeing. Although Savera staff are under a great deal of pressure to deal with a high number of referrals and increasing caseloads, none of the clients who were interviewed for this evaluation reported having to wait to speak to or see their support worker, of feeling rushed during meetings, or that their support had been curtailed. As discussed in the Savera Project chapter of this report, while Savera offers time-unlimited support to all clients who require this, as a small team under immense pressure to support a growing caseload, there is a need to prioritise caseloads and referrals according to current level of risk.

Of the women interviewed, some had moved on and, at this stage of writing, did not require further support. The majority felt safe and continuously supported by Savera. It is noteworthy that Savera was seen by many interviewees as a safe and caring family, when their own family had set out to harm and even murder them. This helped to create a great deal of trust in Savera, a sense of self-worth, and a secure base from which clients took important steps towards rebuilding their lives:

*But now I've hand-picked people to be in my life; when I come here [Savera] they understand me, they really do. And they make you feel they are your family. The first people I told about my [degree] results, was not my friends, not even my boyfriend, the first people I told was [SW 5] and the rest of the team in Savera. Because this is my family, and I wanted my family to know first (Rachel).*



## Savera drop-ins

Savera works hard to reduce the isolation of clients who have left behind friends and family to live in a new and unfamiliar place. Savera's drop-ins (referred to by clients as coffee mornings) have proven to be of particular benefit in helping women become part of a community of women with whom they can identify, socialise and make friends. Here, women can learn a new skill, such as card making, knitting, and cross stitch, as well as take part in yoga classes and share food. The drop-in also provides a range of educational programmes such as English classes, self-confidence courses, and opportunities for women to be involved in Savera's projects. Drop-ins are facilitated by staff and volunteers.

The importance of the drop-in as a means of providing a structure for women to access additional support and connect with other women became apparent partly through early findings of this evaluation. This knowledge was the impetus for drop-ins to be increased from occasional events to weekly events:

*Because the drop-in is popular. It's for social interaction, it's for ongoing support, it's that place in the week where you can see your support worker, touch base, develop friendships. And it's no longer just a nice thing to do, it is actually essential (Director 3).*

For many clients, drop-ins are a particularly valuable opportunity for safe and supportive social interaction, as in other culturally specific gatherings there may be a risk of victims of harmful practices being identified:

*[At drop-ins] I met so many remarkable people who'd been through similar things to me. And I met my very first best friend. It's really good to have that because I didn't have anyone from my cultural background. I can't go to places where there are people from my cultural background. I met her, she was around my age, and I was so happy. Because here is someone who I can relate to, who I can talk to in my own language, who's been through a similar experience to me (Rachel).*

*Speaking to other women at the coffee mornings makes me feel that I am not the only one. Because at the start, I felt that I was the only one. And we come and sit in a group of other ladies going through similar or worse things, then I feel like someone's watching over me, that Savera will help in whatever way they can (Gulpreet).*

A small number of women who were interviewed did not attend drop-ins, as because of the abuse they had suffered, and as they remained in danger, they found it hard to trust people, and had decided to remake their own lives by severing all ties with their previous lives, culture and language:

*I met too many people, [at a coffee morning] but, it's maybe my problem, but I spoke with everyone, yeah, but I'm sorry but I don't trust (Sara).*

*I don't have any friends, even though I have lived here for [several] years and I have the language, it's hard for me to talk to people. I don't want to say where I am from. No one knows where we are from. We made our own life, we made our own story, no one knows the reason why we fled. ... I don't speak my language; actually if I speak my language in the house my child going to have a panic attack (Joy).*

This indicates the need for different types of support according to the circumstances of individual clients. Savera staff and directors are very aware of the need to balance women's safety with the importance of women meeting other women with whom they can form safe, supportive friendships. Clients are not pressured to attend drop-ins, and those who are quoted above were very happy with the one-to-one support they were receiving from Savera.

While it is evident that the drop-in brings substantial benefits for many support service clients, Savera's directors discussed some aspects of the drop-in that they and project staff are working on to improve. These are:

## Boundaries and keeping women safe

All of the women who attend drop-ins have experienced abuse and a range of harmful practices. Women are at different stages in their support: some have started to heal and gain confidence while others remain extremely traumatised and vulnerable. Savera encourages social interaction and the development of friendships among the women who use their service, recognising that these relationships are often mutually supportive and are vital to reducing social isolation and building social skills. However, Savera staff and directors are mindful of keeping women safe, as there have been instances where women have disclosed information about themselves and their circumstances to other women in the drop-in that has made them vulnerable, either in relation to the possibility of their whereabouts being discovered, or in terms of a deterioration in their mental wellbeing. To address this, Savera staff have held group sessions at drop-ins where they discussed personal boundaries, safe relationships and the importance of not being pressured to give out personal information:

*We're trying to give them a bit of space and a chance to be themselves. But at the same time, there is strong woman there and vulnerable ones.... It's a good place, it's a safe place for women to get to know each other. But we have to have a balance so we can ensure it is safe for everyone (Director 1).*



## Integration

Savera's clients reported that drop-ins and English classes had introduced them to women of different faiths and ethnicities, with whom they had formed friendships. While integration generally takes place, staff and directors have observed that some women may choose to mix only with women from their own communities, and to speak only their own community languages. Staff and directors encourage women to speak English, and provide activities that promote interaction with the larger group:

*We have had occasions where a group of women will choose to speak their own language, to the exclusion of others. And you can imagine they are just having a chat. But when I and the other [director volunteers] are there, we do say, in a very gentle way - as these are people who speak English, and we provide English classes at the drop-ins, which is all about integration and developing those skills - but personally, on a few occasions, I've had to say, "I'm feeling left out!" (Director 3).*

## Moving on and peer support

Savera aims for the empowerment and independence of their clients, whilst providing a safety net should risks return. Consideration is therefore given to how to support clients to move on to other support networks once they are ready. This would also create more capacity for newer clients who require the facilitated support of the drop-in. Directors observed that there are very few culturally appropriate, safe groups for women that are nearby or accessible by public transport. The Community Outreach worker who came into post in July 2019 is working to develop culturally appropriate groups for women in local BME communities, which as well as being a means of reaching out more widely to socially isolated women, will provide a next step for clients who are ready to move on. This may in turn create opportunities for women to develop their own autonomous networks or peer-support groups, which can be an important way of empowering women to build confidence and skills, and to 'reinvest' what they have learned from Savera for their own and others' benefit.<sup>108</sup>

## Practical support

The impact of abuse is not over once the initial threat has been addressed and, in addition to ongoing safety provision and emotional support, survivors require help with practical matters such as safe housing, financial resources, and legal representation when seeking divorce and safe child contact. Cuts to welfare and legal support mean more women are facing barriers to the practical resources that are essential for rebuilding their lives after abuse.<sup>109</sup> Holistic support from specialist agencies that understand the ongoing risks and legacies of abuse helps women feel safer to move forward, and must therefore include the provision of a range of practical support.<sup>110</sup>

Savera supports clients to apply for benefits, secure a safe place to live, and access healthcare; provides links to specialist legal and immigration advice and representation; liaises with schools to obtain places for clients' children and to ensure schools are aware of safety risks; accompanies clients to appointments and acts as an advocate with various other agencies; provides English lessons for clients who do not speak English; provides food and Foodbank vouchers, clothing, baby equipment and children's toys; and gives advice with applications for education courses and jobs.

Merseyside Police observed that receiving practical support from Savera, (such as help with opening a bank account) provided clients with resources and life-skills needed to live safely and independently. WHISC confirmed the value of Savera's wide ranging, holistic support:

*From the point they take them on, sorting out their housing needs, making sure they're safe. Going through all the legalities, getting them appointments, helping if they get a letter, like from the [Home Office] and they need help to respond, helping them move on, helping them when they get leave to remain in the UK.*

A number of interviewees said that Savera was the only organisation that had properly addressed their needs or problems:

*Because for the first time, I knew for sure that – and actually she [SW 3] proved it, she solved a problem that for me had gone on for months. I sent emails, I sent complaints, to the Home Office. You know how the system works, you can complain, no one cares. And she solved it. In a matter of two weeks! ... And that's the first time that happened. Other agencies do not really do anything – you cannot see results. I would go from one place, from one office to another, digging, trying to contact different organisations, and you don't really see results (Joy).*

There is evidence that Savera's intervention on behalf of clients has helped with cases that had become 'stuck' in a system. An interview with Louise revealed that Savera had provided her with a great deal of timely and relevant support in relation to 'honour'-based abuse. This client was at extremely high risk, having received death threats from her ex-husband and members of his family. Louise was involved in child contact proceedings, and before contacting Savera, felt she was not being properly heard by the court or her solicitor. After Savera became involved, Louise reported that her solicitor had become much more responsive to her case.

English classes provided by Savera enable clients who do not speak English to overcome structural and language barriers. An example is Jasmine, who did not speak any English when she was referred to Savera, and required an interpreter. Jasmine attended Savera's English classes and drop-ins, both of which increased her proficiency in spoken and written English. An added benefit of these activities is that Jasmine has made friends with women from her own and other countries, which has greatly reduced her social isolation and loneliness. Jasmine can now communicate fairly well in English, and can converse in shops, with her children's teachers, and use the bus. Jasmine is currently studying English and Maths at a further education college, and plans to complete an Access course so that she can get a job and support herself and her children. She has gained confidence, knowledge, self-determination and a future to look forward to. When asked what she has learned from Savera, Jasmine replied:

*My rights. I can do anything I want. I have freedom to do everything myself. Before I thought, my life is finished, I have two kids, what will I do? I can't communicate, I can't work, I am not useful. I can't see anything positive. Savera is helping me with all these things.*

An important aspect of Savera's service is providing links to immigration and asylum support. During her time with Savera, SW 3 brought background experience in asylum and immigration issues to her role, giving the organisation valuable expertise in supporting women experiencing domestic abuse and harmful practices who also required immigration support. Whilst clients in this situation are always referred by Savera to specialist legal firms for advice and representation, SW 3's knowledge of immigration and asylum processes enabled her to gather relevant information to support clients' asylum claims. This has expanded the scope of Savera's work, and responds to a growing area of need, as many of Savera's clients who are claiming asylum are making a second or third claim, and are living on Section 4 support.<sup>111</sup> Savera continues to provide support in these cases by gathering supporting evidence, linking clients with specialist solicitors, helping clients apply for Legal Aid, accompanying clients to appointments, including court and Home Office interviews, lodging fresh and new claims, and providing the client with ongoing emotional support. Savera has also helped clients obtain Section 4 support and has successfully challenged decisions where this support was initially refused.

Interviews with clients who were making an asylum claim demonstrate the immense value of this part of the service. The empathy and understanding shown by their SWs was essential for women facing uncertainty over asylum decisions. Some interviewees reported not being believed by immigration officials when they disclosed abuse, and of having their asylum claims refused. The anxiety of appealing immigration decisions and fear of the prospect of having to return to their countries of origin had a severe impact on the mental health of these women. For instance, Sara was seeking asylum to escape 'honour'-based abuse which included death threats from her family. Savera liaised with the police about the threats to Sara's life, found her a specialist solicitor, collated evidence to support her appeal against a failed asylum application, and provided ongoing emotional and moral support:

*[SW 3] help me about my papers with the Home Office, and she find for me solicitors. ... It's big thing. Because for three years in this country, there is no one who listen to me. The most important is she work with me about my papers. When I get my papers, I'm going to work and work so that I can get my children to live with me. She's now busy with the solicitor about my papers, she is busy with the divorce. If they [Home Office] believe you, you're lucky, if they don't believe you, back to the beginning.*

Interviewees who were living on asylum support reported not having enough money for food, transport and clothing. Savera is acutely aware of this problem, and relies on donations of women's and children's clothing and baby equipment, and administers Food Bank vouchers to women who cannot afford food:

*They've helped me with everything. Even with food, there was times when I've not had food at home. But I didn't ask, because I am the adult of the house and I should provide for my children. But there's vouchers there, they just leave them there if you need them. Today in the coffee morning there were boxes of bread and pastries there for you to take, without anybody watching over you (Gulpreet).*

A Women's Resource Centre report on the value of women's organisations found that one of the many reasons specialist women's services are so necessary is that they: "Act as an important point of access for many BAMER women: many new arrivals to the UK have little information about their rights, often relying on women in their families and in their community for support. Many BAMER women would also not access mixed services for cultural and/or safety reasons."<sup>112</sup> Given that most of the women who Savera support do not have families and communities to turn to for help, and are often destitute, Savera is even more vital as many BME women's only source of information, guidance, advocacy and support.

## Voice for the victim

Both Liverpool Children's Safeguarding Unit and Merseyside Police said Savera plays a vital advocacy role within statutory decision making processes. The Safeguarding Unit reported that there had been several instances in case meetings when Savera had identified indicators of risk connected to harmful practices. On these occasions, Savera had been the voice for the victim, reminding social services that not understanding the nature and severity of specific harmful practices could result in someone's death.

All interviewees spoke of various ways in which Savera had spoken out on their behalf, and of the difference this had made to their interactions with agencies such as the Job Centre, solicitors, and family courts. This was particularly important for women whose first language was not English:

*[SW] was there for moral support, but when my solicitor and barrister was talking to me, she did input and I was happy for her to do that because she made sure that I was coming across nice and clear, and made sure she told them what I want in a way that was clear to me, because my English is not always very good (Gulpreet).*

*Last time I was in the court, I was getting scared. My support worker help me. She explains a lot of things I forget to my solicitor (Jasmine).*

## Cultural responsiveness

*'Honour', culture or tradition can form no part of abusive behaviour and are only ever a means of self-justification for the perpetrator of abuse. However, understanding culturally specific circumstances which often accompany HBV will be important in supporting victims and survivors. It will also be important to tackle the heavily gendered norms of behaviour, expectations and entitlement which are common to these cases, as they are to other forms of domestic abuse.<sup>113</sup>*

BME women are more likely to use women-only BME specialist services, which are vital for women who are feeling isolated, threatened and powerless.<sup>114</sup> Women who have negative experiences of generic services because of lack of culturally appropriate responses are likely to return to abusive situations where they are part of a community that embodies familiar cultural norms.<sup>115</sup> As a specialist BME service, all Savera's staff are trained in cultural sensitivity and competence, which covers safeguarding and harmful practices and how to challenge unacceptable practices carried out in the name of culture and tradition. Savera staff have a good knowledge base of different cultural norms and practices and demonstrate a high level of competence in delivering services that reflect cultural needs and address multiple forms of oppression and the sense of loss a woman may feel if she has left her community or country behind. This helps women feel understood, safe, and not judged. Merseyside Police said there are indications that victims of harmful practices are far less likely to return to abusive families when they are supported by Savera.

SW 4 reflected on the importance of Savera being a specific BME service that victims and survivors of harmful practices can be confident will meet their needs:

*There's no other service like it. BME communities are hit hard by these issues, and it's very under-reported. It's important for BME women to know it's here for them, particularly women who self-refer, a lot of them find out through our website. They are looking for information on what they are experiencing, they have that need, they see that we deal with harmful practices. ... Often, they may have faced rejection or hostility from other services that are not BME specific, which is part of the institutionalised racism within our society. So, I think that's what leads them to us, they genuinely need our specific service that looks out for them, because of past experiences of services that have failed to meet that need.*

All of the interviewees said that Savera had understood and responded appropriately to their cultural needs. For most, this lay in the fact that Savera was a specialist BME women's service:

*[SW] understands – she said she comes from a culture which is more male dominated. But because there are so many women here who have gone through similar things, they understand it more (Gulpreet).*

*It's hard explaining these things to people from a different culture, but when I come here, I don't have to explain. They know (Rachel).*

*When I first got introduced to them [Savera], they understood pretty much all my mind set. I am in a foreign place, with foreign people around me; every culture is different and it's so hard to explain your culture to someone who is not familiar with it. ... But when I try to explain my culture to [Savera staff], they actually understood what I was trying to tell them. They have a very big idea of what our cultural ways and patterns are (Laura).*

Savera helps to dispel beliefs and attitudes that underpin and excuse abuse and harmful practices by explaining to clients that control and abuse perpetrated in the context of 'honour' or culture are wrong.

*He used to keep me isolated and I thought it was part of the culture, and he was saying he was possessive about me, and I'd think that he loves me, and that's why he does like that. ... and after talking to [SW 2] about my situation, I got to know that these things were about honour, and that I didn't do anything wrong (Naseem).*



Savera's clients reported that the drop-ins, English classes and confidence course that are offered as part of the support service had introduced them to women of different faiths and ethnicities, helped them learn about different cultures and form friendships, as well as helping them integrate into wider society. This is an outcome relating to holistic provision that has been identified as a wider benefit of BME women's organisations, in that they often foster social integration and community cohesion.<sup>116</sup>

Savera uses interpreters with women who do not speak English; interpreters are carefully vetted to ensure they have no connections to the client or her family. Where it is not safe to use a face-to-face interpreter, Savera uses a telephone interpreter service. All interviewees who had required an interpreter felt safe and supported during interpreted assessments and conversations. A small number of clients suggested that website information and leaflets in various community languages could be developed to make the organisation more accessible to women who do not speak English. This is an identified area of need. However, there are financial implications to this, which, given budget restraints, must be balanced against the significantly increased demand for the support service. Savera is planning to recruit and train volunteers who speak different languages as interpreters for their clients, which will help address the need for different languages as an internal part of the service.

There is strong evidence that an intersectional approach is embedded within Savera's service delivery. SW 3 suggested that evidence for attributing successful outcomes to Savera is that many of their clients arrive for support feeling let down by other agencies who may not have understood their specific cultural or legal circumstances and requirements. Once they see that Savera understands their needs, and has acted swiftly to address these, clients gain trust and confidence that Savera is working to achieve the best possible outcomes for them. For example, Savera was successful in getting a client's Legal Aid reinstated when it became apparent her legal representative had not understood the cultural context of her asylum claim. Savera draws on its specialised cultural knowledge and expertise when working with other agencies who may lack awareness of the gender power structures and cultural norms that prevent women leaving abusive families or partners:

*A lot of other services do not understand cultural pressures and hierarchies. Women do not have a voice as they may do in other communities. It's not as easy for them to access services. A lot of them don't speak English, they are not allowed to go out, they are watched all the time, they are not allowed to have access to their own funds. Even if they are working, it's controlled by the man usually. And so many [services] don't understand these things, it's like, "well why doesn't she just leave?" (SW 5).*

Savera plays an important role in advising Merseyside Police, Merseyside MARAC, social services, and a range of voluntary sector agencies about cultural practices and national and local guidance on different HPs. The importance of involving Savera in HP cases is a standing item on the police case review checklist, and Savera's expertise in cultural issues and harmful practices is an essential aspect of both MARAC and Children's Safeguarding proceedings.

## Enabling

In the context of the provision of holistic support, enablers are dedicated individuals who understand abuse and the impacts of abuse, and who offer a range of resources appropriate to different needs and circumstances to enable women to begin to feel safe, have support in dealing with other agencies, start to manage the legacies of abuse for themselves and their children, and begin to rebuild their lives.<sup>117</sup> Findings throughout this report demonstrate the numerous ways in which Savera acts as a long-term enabler for women and girls who have experienced gender-based abuse, by breaking down barriers, showing women what can be possible for them, and offering appropriate information and knowledge to develop life-skills, encourage independent decision making, and help navigate pathways to independence:

*When we first meet clients, they are extremely vulnerable. We help them in various ways ... letting them know that they don't have to live with abuse and that with our support they can make choices that are right for them. We support them to see that they do have a future. When women come to us, they may have nowhere to go, with lots of barriers in front of them, and working with them we are able to turn that round, so that they are working, accessing education ... We are breaking down taboos and barriers for them and other women and girls in their community (SW 2).*

For all interviewees, the value of Savera's support service is that it is person-centred, based on a comprehensive assessment of needs, and encompasses emotional support, advocacy, advice, practical help to start rebuilding a life, and in-depth knowledge of the different cultural, community and structural issues and barriers clients frequently face, underpinned by genuine care and compassion. Knowing that their support will continue for as long as needed is vital for clients' emotional security and wellbeing. This level of support has expanded what was at first envisaged as a service that would be provided in response to a crisis or specific incident into a model of holistic, tailored, proactive and intensive work with BME women and girls at risk of domestic abuse and harmful practices, which is testimony to the commitment, reflectiveness and dedication of project staff and directors. Maintaining this level of support requires sustained funding, and increased demand for the service makes evident the need for more support staff and resources:

*I think ours is such a necessary service, and what we've achieved in such a short time is remarkable. But I don't know how sustainable that is, it's such a high-pressured job. We need to expand, to support more people. We have such potential to grow (SW 4).*

## Involving and engaging women and girls

(Outcome 2: Savera UK has sought and responded to the views of BME women and girls by enabling feedback from service users to influence service delivery)

There is a long history of women setting up support services as a feminist response to gender-based violence, with many being themselves survivors of abuse.<sup>118</sup> An important part of this history is the establishment of VAWG support services by BME women for BME women; for instance, Southall Black Sisters, who, through a combination of service provision, campaigns involving survivors, and feminist activism provide “truly important insights into an experience outside the reach of white women”.<sup>119</sup>

As VAWG services became integrated into mainstream policy and strategies, the scope for collaborative and collective organisation decreased. To resolve this, many VAWG services redoubled their efforts to listen to and act on the views of service users, so that services could be developed in ways that effectively met women’s voiced needs. More recently, a focus on ‘co-production’ has led to considerations of how survivors of abuse, as experts by experience, can play a more active and equal role in service planning and delivery.<sup>120</sup>

Savera UK is keen to engage with the women who use their support service, to listen to their views about the service, and to explore ways in which women and girls can be involved in shaping service design and delivery, seeing this as integral to organisational development. Early in the project, Savera’s Board discussed ideas for client participation, including how Savera might better involve clients at Board level and in peer advisory roles. At that time, it was decided that due to their current circumstances, most support service clients were at the stage where they were ready for this level of involvement, and this was identified as an area for development. As the project progressed, various means of consultation and engagement were developed, including projects in which women were involved in the design and delivery of campaigns that brought messages about ‘honour’-based abuse and other harmful practices to a wider audience. In the third year of the project, three clients were participating in the work of Savera to raise the voices of clients with the support team and the Board.

## Client focus group

Focus groups can be an effective way of engaging with disadvantaged and marginalised groups, particularly when exploring people’s thoughts and ideas with regard to sensitive topics.<sup>121</sup> In 2019, additional funding enabled Savera to recruit a Community Outreach Worker, and to develop plans to conduct focus groups with clients of the support service and women in local communities to gather views to inform service delivery. In preparation, Savera drew up guidelines covering key principles for conducting focus groups, including ethics relating to confidentiality and anonymity, informed consent, support for participants during and after a group, and feeding back to participants on how their contributions will be acted on.

In August 2019, Savera carried out a focus group with 10 support service clients. The focus group was a safe and appropriate method of gathering information, as its aim was to discover women’s views and ideas for shaping and improving the support service and did not require participants to disclose information about their personal situations. The focus group fully adhered to ethical considerations regarding anonymity, group confidentiality, voluntary participation and informed consent. There was one facilitator who asked questions, and another who attended to consent forms and who was available to provide participants with support if needed.

The questions covered issues such as how could Savera improve accessibility, if women felt safe using the service, if the service could be improved for women who don’t speak English, if activities worked well or could be improved, if women would feel confident should they need to raise a concern or a complaint, and how could Savera reach more women in communities and publicise its services while keeping the service safe and confidential for clients. The discussion was lively and interactive, with participants responding confidently to the facilitator’s questions and exchanging ideas with each other. The facilitator encouraged all members of the group to speak and helped the discussion flow with the use of supplementary questions and by rewording some questions for women whose first language was not English:

*The ladies were, on the whole, confident and willing to give their views and take an active part in the FG. Even the quieter members were able to express a view and share ideas. ... I was impressed by their ability to articulate their views so passionately. The questions facilitated discussions amongst the participants and generated some good ideas. ... I felt the focus group achieved its aim of generating feedback about the service, new ideas, and give Savera UK an opportunity to use the information to shape services.*

The focus group participants were overwhelmingly positive about Savera’s support service. They offered a number of suggestions as to how the service could be improved; for instance, more English classes and learning and skills-based activities, and further group activities such as the Counter-Narratives course (see below). Women also discussed placing leaflets and posters about Savera in places where BME women, particularly migrant and asylum seeking women, are likely to see them. Another idea was for information for new arrivals to the UK, that would include advice on rights to protection in the UK and where people could go for help.

The focus group feedback has been discussed by the Board. As a result, it was agreed to create a three to six month activity programme that will be put together with clients, who will have full input into designing its content.

## Client participation at Board level

By the third year of the project, a number of clients had gained confidence and skills to be able to participate at Board level, and two survivors had taken on the role of Savera UK Ambassador. In addition to championing Savera more widely, Ambassadors work with the team and the Board to amplify the voices of Savera's clients.

Directors are considering other ways of enabling more clients to contribute their views and ideas at Board meetings, for instance, by inviting women to attend meetings to talk about their experiences of Savera's service and to offer ideas for improvement and development:

*They could come with a friend, or a support worker. And for us to listen and say, "tell us, if we could do better, what would it be?" ... We can help them write it down, if they want to read something (Director 3).*

It is recognised that some women might feel intimidated by talking at a Board meeting, or may not feel able to speak freely about any concerns they may have about the service. Directors are therefore considering ways of gathering clients' opinions through an independent facilitator:

*I want them to have the confidence to be honest, not worry if they will still get the service from us. And that's why I would like it to be somebody independent, to take their honest opinion; I know they would say nothing bad in front of us! (Director 1).*

Two directors regularly volunteer at drop-ins and so are familiar to clients who attend these weekly events. In addition to assisting staff with drop-in activities, the directors act as a conduit for clients' verbal feedback to the Board. One suggestion from a client was a request for an additional drop-in. This was relayed to the Board, where it was agreed that while current resources make this difficult, it is something that could be developed by the Community Outreach Worker. It is envisaged that an additional drop-in would be a resource for women in the community to access information and take part in activities, as well as being an opportunity for Savera's clients to receive support while gaining more confidence by socially interacting with a wider community of women.

## Responding to interim findings of this evaluation

Clients' views on the support service were fed back to the Savera Board and Service Manager through quarterly evaluation progress reports. This enabled Savera to respond to findings as they emerged, rather than after the evaluation had been completed. There were several interview questions that sought women's views on how Savera could shape or improve the service. These asked interviewees questions about the way sessions were carried out; how Savera had responded to their specific cultural and emotional needs; safety; preferences for a women-only service; aftercare needs; if they would recommend Savera to anyone else experiencing abuse and harmful practices; and any other ideas about how Savera could make it easier for women and girls to come to them for help.

The responses to these questions were almost entirely positive; there was no criticism of the service and there were only a small number of suggestions as to how Savera might improve provision. One woman suggested that Savera might contact university counselling departments with information about Savera so that universities are better informed when supporting and referring students at risk of harmful practices. Another client hoped that Savera could expand on its community and school work with young women, and was encouraged to learn that Savera is engaging with girls through its school programme, and raising women's awareness in communities:

*It's important for the next generation to understand that there is help there. If I'd known that these charities exist in the early days of my marriage, it would have been better for me. Because talking about it to others in your own community, you get told, "Oh, that's normal, you have to put up with it" (Gulpreet).*

A small number of clients suggested that website information and leaflets in various community languages could be developed to make the organisation more accessible to women who do not speak English. This is an identified area of need, but given budget restraints, Savera feels that the cost of these resources has to be balanced against the significantly increased demand for the support service. Savera uses face- to-face or telephone interpreters with women who do not speak English, who are carefully screened to ensure they have no connections to the client or her family.

When Savera advertised for a new support worker, the evaluator informed the Board that the majority of women who were interviewed for the evaluation said they prefer to be supported by an all-women staff team, and included a number of anonymous quotes to illustrate why this was so important for female clients. The Chair responded that:

*[We] fully understand that and that will be our way of working with our women clients, especially now we have this evidence. If we recruit men staff, we will consider all these [factors] and their role will be identified carefully and how they will be working.*

The value of the drop-in for women to access additional support, connect with other women, and learn skills, became apparent partly through women's views that were gathered for this evaluation. This feedback has led directors to commit to the weekly drop-in, even though significantly increased demand for the core support service means resources are stretched:

*This morning I re-read the last evaluation report to the Board. And my perception of the drop-in has changed; I used to think it would be a nice thing to have, but from the feedback from service users, I can see it is important. And we are putting resources into it (Director 2).*



## Co-production

Co-production is the involvement of people who use a service in the design and / or delivery of the service or service activity. It generally operates on different levels:

- descriptive – where people who use services and support workers work together to achieve individual outcomes, but activities do not change the way services are delivered, and co-production is not meaningfully recognised.
- intermediate – where there is more recognition of clients' views, for example where people who use services are consulted, but do not make decisions.
- transformative (also called co-creation) – where new relationships between staff and people who use services are formed, and people who use services are recognised as experts in their own right. Professional and user knowledge is combined, and service users are valued as people who are significantly involved in the creation, planning, delivery and evaluation of a service, with an emphasis on achieving outcomes that are important to users of the service.<sup>122</sup>

The latter stage embodies a democratic approach to user involvement that is concerned with promoting and increasing people's autonomy, capacity and empowerment, which relies on service providers and service users learning from each other's expertise and exploring each other's perspectives.<sup>123</sup> This is what distinguishes transformative co-production from other forms of involvement or consultation.

Co-production requires adequate resources to cover the cost of activities, facilitation, staff time, and training in the philosophy, principles and practical applications of co-production for all involved, for it to become embedded in the culture of an organisation.<sup>124</sup>

## Savera UK and co-production

Despite Savera's large and complex support service caseload, and the considerable demands this has placed on staff time and project resources, there have been several projects that involved clients of the support service in designing and delivering projects and events that aimed to raise awareness and bring about wider social change.

**Break the Silence** was a play that was performed as part of Savera's annual event for National Memorial Day to remember victims of 'honour' killings. Two clients were involved in creating, planning and delivering 'Break the Silence'; one as a performer whose identity as a survivor was not disclosed, and whose face wasn't seen by the audience. Savera UK's Chair reported that participation in this project has resulted in both survivors gaining significantly more confidence and feeling empowered through being part of the project team and as members of society. One is now taking part in Savera's Youth Programme and is being supported to become a member of their Youth Advisory Board; through this she has made friendships and is practicing and improving her English.

The **#ImSpeakingOut** project involved support service clients and Savera Youth members in designing campaign messages about harmful practices to disseminate via social media. All clients of the support service who attend the drop-in were invited to participate in this project, with four volunteering to take part. The four clients met with an external designer/ facilitator and discussed whether they preferred to be identified within the project team as volunteers or as survivors. The women chose to be identified as survivors, as they were confident that the young people involved in the project would respect and maintain their confidentiality. Additionally, it was recognised by Savera staff that the women had expertise and important insight as survivors that enhanced the project's authenticity and enabled genuine power sharing. Survivors and young people worked together to produce campaign images and messages, with the finalised image being decided on by a majority vote of the participant designers.

**The Counter-Narratives project** was delivered by Liverpool World Centre with the aim of moving conversations about extremism beyond those that often feature in mainstream media. The project worked with socially marginalised groups, helping them create counter narratives to prejudice and hatred. Liverpool World Centre worked with Savera to facilitate a series of linked sessions with a group of women whom Savera supports. The women worked in pairs to create digital stories to act as narratives to counter prejudice about women's experiences as asylum seekers and as victims of gender-based violence. Although the women were not involved in the design of the project, they were instrumental to its outputs, which are being developed for wider dissemination.

Feedback from survivors who participated in these three projects shows that their contributions were listened to and treated with respect by everyone in the project teams, and that taking part has increased their self-esteem, given them more confidence in their own abilities, widened their knowledge, and provided them with opportunities to improve their language skills:

*I'm a very shy person but when I feel like I'm listened to it tremendously helps with my self-esteem (# Speaking Out).*

*It made me feel part of a team and part of a family sharing our experiences and understanding each other more (Counter Narratives project).*

*They listen my opinions and my speech in spite of my English is not so good. But this makes me happy and encourages me (Breaking the Silence project).*

*I learned a lot. I now know that everyone is creative in their own way (# Speaking Out).*

The Counter Narratives project gave women a safe and supportive environment in which to discuss and share experiences, while working together to amplify their voices and raise public awareness about gender-based abuse and living as asylum seekers:

*I was involved interactively. We talked about a lot of things involving domestic abuse, female genital mutilation, 'honour'-based violence, adapting to life in the UK. It brought about support from the women and Savera has offered a lot of support.*

Participants said that their specialist knowledge as survivors of harmful practices had influenced the messages that were disseminated through a performance and a social media campaign:

*I came out with an idea that became favourite (# Speaking Out).  
I have a desire to support and help the people who suffer like me  
(Breaking the Silence project).*

Savera's Chair said that their clients' involvement in these projects was crucial in shaping the messages that they want to send out to wider society to raise awareness and break the silence surrounding harmful practices. Survivors related how their participation has involved them in wider social change work:

*[By participating] I can do whatever I can to help people who are in the same circumstances that I was in (Breaking the Silence project).*

*I took part in answering the public's questions about 'honour'-based abuse and forced marriage, raising awareness (# Speaking Out).*

*I think by the time the video goes out our voices will be listened to. I also hope this will eventually drive a change to stop all harmful and barbaric practices (Counter Narratives project).*

It has been suggested that social action through co-production can be an important way for survivors to regain the power that was taken away from them by abuse and by cultural and social attitudes.<sup>125</sup> Participation in these projects has had an empowering effect; for example, one woman gained strength and a sense of agency by being able to safely and anonymously voice her experiences to the public, and by being heard and understood:

*I feel as though speaking about experiences you have gone through strengthens you as an individual and more importantly it adds emotion to information that is being passed to relative strangers. By doing so people will connect and understand more to what you have to say (# Speaking Out).*

The value of Savera's co-production activities lies in their recognising their clients as assets whose involvement is essential to the integrity and success of the organisation's social awareness projects. These projects offered survivors of abuse opportunities to engage with a wider group of people as part of a team where there were mutual responsibilities and a respectful exchange of knowledge and ideas. Taking part has increased women's confidence and self-esteem, helped develop their interpersonal and communication skills, and has provided them with a range of technological and creative abilities. Furthermore, women became catalysts for social change as their experiences and specialist knowledge as survivors of abuse informed and shaped messages that were disseminated to a wider public. These projects demonstrate the potential of co-production for supporting victims and survivors of gender-based violence and oppression in transitions from recipients of services to agents for change.

## Understanding abuse

(Outcome 3: BME women and girls have awareness of what constitutes domestic abuse and harmful practices, and where they can go for advice and support)

*Naming involves making visible what was invisible, defining as unacceptable what was acceptable, and insisting that what was naturalized is problematic.*<sup>126</sup>

There are various ways in which Savera ensures BME women and girls have awareness of what constitutes domestic abuse and harmful practices, and where they can go for advice and support. Women's and girls' ability to understand and talk about domestic abuse and harmful practices leads directly from the holistic support that has been described in Outcome 1.

Most women who are referred or who self-refer to Savera have reached a point where they are no longer able to tolerate physical violence, and are reaching out for help. Some are seeking support because of coercive and controlling behaviour by spouses, family and/or in-laws. At first, clients do not generally identify the control they have been raised with as abuse, particularly if they are used to being treated differently and unequally because they are female. Because of cultural norms that minimise, ignore or negate violence towards women, several interviewees did not know about abuse other than physical violence before they started receiving support from Savera:

*Specially in my culture, there is so much pressure on women to perform the way they need to ... Mental abuse, I never knew this was abuse, I thought it was something you had to put up with (Gulpreet).*

*Before I wasn't know what I been through. For one year, I am scared every time to tell someone, because in my country, I only once tell my mother. And she say, "one day you will be fine, one day it will be fine" (Rihanna).*

An important part of feminist work with abused women is providing names that describe women's experiences.<sup>127</sup> This helps women define behaviour that they may have believed to be normal and permissible as unacceptable, and as part of a wider problem of violence against women and girls. Savera's provision of emotional support coupled with cultural sensitivity and competence gives women the language and confidence to name and begin to talk about their experiences, and to identify their experiences as abusive.

Through one-to-one work with clients, Savera support workers gain a whole picture and can explain about different forms of abuse that women may have believed to be an accepted part of life. It can take time, ongoing emotional support and sometimes external counselling, for clients to redefine what has happened to them:

*A lady today said she'd not experienced domestic abuse, and I said OK, tell me what's been going on. And she explained all about his controlling behaviour, keeping all the money, raped her. But for her, because he'd never hit her, she'd never seen herself as a victim of domestic abuse. We had a really good talk; it was really sad for her because she cried a lot. [She said] "It's not rape because he's my partner, he can have sex with me whenever he wants." ... But she's in the right place; she's getting counselling (SW 1).*

Savera helps women and girls to identify and understand abuse, and through individual support, Savera's leaflets and website information, and the support letters Savera writes on their behalf, clients are introduced to terms such as 'honour'-based abuse, coercion and control, and are able to relate these terms to their own experiences. There may be some clients for whom naming specific forms of abuse could have a negative and alienating effect however, and support workers use their judgement about using widely endorsed, yet official, terms with individual clients, while at the same time needing to be explicit about the risks posed to clients from particular forms of abuse:

*There are some clients where I don't know if it would be productive to say this is what's happened to you - I'm not a counsellor - I don't know if it would always be helpful. We support our clients come what may, we believe our clients. Whether it's HBA, FM, FGM, domestic abuse, I say it's down to each individual case whether it's something that is going to add. If it's going to give them a sense of empowerment and agency then yes, we will encourage them to use those terms. And if they are pursuing an ongoing court case, they will need to use these terms. But if they don't want to, they don't have to. It's not one lived experience, and we have to be mindful of that. ... [Where there is a current risk] we have to talk about it, say, "you are at risk of a forced marriage if you go on this holiday". We have to be very black and white about it (SW 4).*

The template that support workers use to assess needs and initiate support lists types of abuse that clients may have experienced, and this provides an opening for women who are often confused, distressed and traumatised to name and begin to talk about what has happened to them:

*[There was] a client who didn't know what she needed, didn't talk about what had happened. I was trying to get to know her, and when I used the template, within half an hour she had told me about the domestic abuse she had experienced, and childhood sexual abuse. ... She opened up about so many things that she had never told any agencies about before, through my asking questions based on the template (SW 1).*

Savera's risk and needs assessment has enabled hidden forms of abuse to be identified where it may not have been picked up by other agencies. For example, there are several cases where FGM has emerged as a risk for a child when the mother had been referred for support relating to abuse and immigration and / or social isolation.

Most interviewees reported that Savera had helped them understand a lot more about domestic abuse and harmful practices. Louise reflected on the way she was silenced, coerced and controlled by her ex-partner, whose violence included threats to her life. After receiving support from Savera, she is now able to speak openly about his abusive behaviour, refusing to conform to social and cultural expectations that abuse should remain hidden and undisclosed:

*Savera can support you, they tell you what's going on and how it's wrong. ... I knew when he was hitting me, it's wrong. But I knew I could do nothing about it. If I did, he would have harmed my family. I was trapped. He knew I wouldn't tell anyone about the things he was doing and saying to me. I couldn't tell anyone, my family, my friends. No-one. I couldn't be in touch with my friends. And another thing that might have shocked him is that I am open about this now. Everyone will be thinking, "how could she say it?" ... It's supposed to be kept in the house, a secret.*

Women were clear that being able to understand and name abuse is a vital step towards asserting their rights and moving forward in their lives.

*They've helped me understand, they've helped me rationalise, you know, this happened, that happened, cultural reasons ... their knowledge and them telling me, "you can do things", listening to me, encouraging me, supporting me to move forward (Rachel).*



## Raising awareness within partner agencies

Women and girls having reliable information about what constitutes domestic abuse and harmful practices, and where they can go for advice and support, also depends on the agencies with which they come into contact being able to convey accurate and beneficial advice. To this end, Savera delivers training and provides advice to a range of statutory and voluntary sector organisations.

This is particularly important as Savera staff described how staff at some agencies have told them that they are reluctant to ask questions of victims, or challenge harmful practices, in case they are accused of racism. Savera addresses this by providing a safe space for professionals to discuss their concerns with Savera staff, who have the cultural competency and expert knowledge of victims' needs and legal rights to answer questions clearly and unequivocally. This provides a conducive environment for informed discussion to take place, so that professionals can fully understand the high level of risk for victims, the additional barriers faced by BME women, the need to respond quickly and appropriately to secure victims' safety, and how to effectively challenge norms and attitudes that excuse violence against women and girls.

Savera's directors reported challenges with awareness training, with some attendees expressing a belief that harmful practices are somehow inevitable in some communities, thereby normalising and excusing violence against women and girls. The importance of challenging such views and imparting an informed perspective is recognised by senior statutory sector staff, who see Savera's training as pivotal in enabling services to respond more effectively and appropriately to harmful practices.

Despite these challenges, there is evidence that organisations are greatly improving their responses to harmful practices as a result of Savera's advice and training. The Children's Safeguarding Unit stressed the importance of Savera's awareness raising work, stating that Savera has developed a good reputation with statutory services, which ensures their advice and awareness raising is taken seriously by a range of local agencies. The statutory agency training on harmful practices which Savera co-delivers with Merseyside Police has achieved demonstrable outcomes: Merseyside Police Public Protection Unit reported that the training has resulted in some attendees requesting advice about cases they are working on, and this has generated referrals to the police, leading to the safeguarding of victims.

Savera's training is requested by local voluntary sector agencies that work with vulnerable women, including BME women and women with insecure immigration status. The quote below provides evidence of the beneficial impact of this:

*[Savera's] training includes knowing the risks and what the signs are, what to do if a woman comes in for help, the risks relating to multiple perpetrators. ... The FGM awareness was crucial for my outreach work in different communities. Now, I am more aware of what women are saying when they talk about different kinds of abuse, and I can pass on what I have learned to people who haven't heard of these things. Everyone I've known has come away from one of their sessions saying they will remember what they have learned (WHISC).*

## Awareness of rights

(Outcome 4: BME women and girls have awareness of their rights and how to assert their rights in relation to domestic abuse and harmful practices)

The findings discussed in this section emerge from the holistic support described in Outcome 1, and women gaining knowledge and confidence to name domestic abuse and harmful practices as discussed in Outcome 3.

## Entitlement to rights

The women who Savera support have generally been subjected to deeply embedded gendered power structures that have shaped how they have understood their place in the world and how their lives were to be. Many of Savera's clients have been repeatedly told by their families and / or husbands that they do not have any rights, and that violence is a normal part of everyday life for women. Savera supports women and girls to understand that being physically or sexually assaulted, and threatened or coerced by a person or people you know or live with, is just as much a crime as violence from a stranger. Furthermore, Savera communicates to women and girls that community and cultural norms based on women's subordinate status, gendered expectations, and notions of shame and honour are wrong, which helps to transform women's sense of self, helping them to understand their rights and envisage future possibilities and different lives. This corresponds with models of VAWG support and education that advocate raising women's and girls' awareness of their rights within a gender equality analysis.<sup>128</sup>

The following quote illustrates the value of this:

*I didn't believe in myself, I didn't think I could. Whatever my family conditioned me to believe I would believe, but [SW 1] told me that my happiness matters and that whatever I want for my life is what I deserve, and I believe her. Which is really hard for me to do because I've been led to believe that women don't matter (Angelina).*

Many clients experience a great deal of self-blame and guilt about disclosing abuse and naming members of their families as perpetrators. Savera helps women understand that they were right to report abuse, and that they are deserving of help and support:

*The main issue is self-blame, so through Savera's support and awareness raising clients come to realise they are in no way to blame themselves. We tell them with every single step that they have done the right thing, they are brave in going to the police or self-referring, because a lot of them feel quite guilty. There is loyalty for their family, such a dilemma, and we have to support them to disconnect from their family for their own safety. ... It's their family: all they have known in their entire lives, and often the hardest thing is convincing them that they have done the right thing, that they were not in a safe situation, that they can now take control of their own lives (SW 5).*

Eliminating clients' feelings of self-blame involves Savera helping women believe they possess equal human rights<sup>129</sup> as well as legal rights, and are justified in resisting HBA, FM and other forms of abuse. Violence against women and girls has been explicitly identified by the United Nations as a core concern with respect to women's human rights, because it jeopardises women's bodies, mental wellbeing, freedom and lives.<sup>130</sup>

Developing an awareness of rights in relation to gender equality is intricate and can take time to achieve, as the concept of wider rights can be difficult to accept at first for women who have been accustomed to believe they have few rights, and who fear losing their family and community:

*The majority of our women come from communities and cultures where this is all they know. This is what they've seen their mothers and their grandmothers do. You put your head down, and you nod, you don't have a voice, you don't speak back. So, when you have the initial meeting, and take on the case, and you start a journey with that person, you start to pick at those things. It's like peeling an onion, and you say, why do you think that is? And do you know that that's wrong? And this is how it can be; these are your rights. With a lot of our women, it's the fear. It's the fear of being judged, excluded, ostracised, shamed (SW 3).*

Interviewees spoke of how Savera had reassured them that they were not to blame for the abuse, and had helped them understand the patterns of denial and victim blaming that perpetrators often use to justify their actions. This led to them developing self-belief and a sense of their rights:

*I had a sense of doubt until I came to Savera. They told me I am right to fight for myself, you are a strong woman, and everything will start falling into place once you start thinking that you are right (Laura).*

*I did sometimes think, is it my fault? But now I'm getting stronger, the longer I am away from him, the stronger I feel, and when I sit with other women, and listen to them, I realise, "no, it isn't your fault". That's what they [abusers] want you to think. Especially in our culture, men get the right to do whatever they want, women have to behave, you can't do this, you can't do that, type of thing (Gulpreet).*

## Barriers

A significant number of clients are referred to Savera by the police or social services, and have already made a complaint against their abusers. Savera also works with police and statutory safeguarding processes when clients and / or their children are at risk and they have not until then been involved in a formal reporting process:

*If it's a situation of immediate danger or high risk, our first point of call is the police. ... When we alert the police, it doesn't mean the client has to press charges, but we always let the police know so the case can be heard at MARAC, where we can introduce safeguarding measures. This means we can move them and introduce the [Honour Based Abuse] protocol, liaising with professionals to put safeguards in place (SW 4).*

Savera informs women of their legal rights and always encourages women to report their abusers to the police. Taking legal action against abusers is often a very difficult decision for clients, particularly if it involves making a formal complaint against members of their family, and abuse is something that women in their family have been accustomed to accepting. Women in this position often just want the abuse to stop:

*They might think, "Oh, this has happened to my sister, to my auntie, all of the women in my family have always been hit and they've always been treated like this, and no one's ever done anything". So that's why it's normalised. Trying to get them to see that it is a criminal matter, and a lot of women don't want to go down that route; they don't want to do that, they just want to live safely. They don't want to start a court process (SW 1).*

Clients are often extremely frightened of the police, particularly if they come from societies where police are unlikely to help victims of gender-based abuse. Savera's support workers reassure clients that they will remain safe and supported throughout the criminal justice process, and that their personal details will remain confidential:

*We would always encourage women to go to the police. We offer a great deal of support and advocacy, to make sure that it is done in a way that is safe, discrete, protected. For instance, we ensure that in the police and social services there is information lock down, only certain people can access it, as sometimes family members may work for those services. Many of our women come from countries where there is no support from police, and they have a fear of the police, as they don't see them as people who can help and that they may put them at risk. Reassuring them is crucial. This is the same in any culture (SW 2).*

Other barriers prevent women from feeling safe to assert their rights. Perpetrators may have threatened them that reporting abuse to police will result in their children being taken into care. Clients who are seeking asylum or who are living in the UK on a visa are often fearful of deportation should they approach the police. Savera advises women that they have rights as asylum seekers to protection from family or partner abuse, or if they may have rights under the "Domestic Violence Rule"<sup>131</sup>:

*We can help women understand that all that is not true, the police will help them and will not take their children away. We let them know what they are entitled to, and that domestic abuse is not acceptable (SW 5).*

Even when women have mustered the courage to assert their rights, they may find it difficult to be believed, particularly if they are reporting crimes relating to 'honour'. Savera's directors and project workers reported that, despite improvements in police and social services' understanding and responses, it can sometimes be difficult for some police officers and social workers to recognise that a case involves 'honour'-based abuse, or to understand the family and community contexts of the violence, and who consequently may underestimate risks and delay taking safeguarding action. On such occasions, Savera support workers challenge decisions and work tirelessly to convince agencies of the high-risk nature of 'honour'-based abuse, and allow the client's voice to be heard:

*I've had situations where services don't identify a high risk or they have particular ideas about communities that put barriers up and stop vulnerable women accessing services (SW 2).*

*We should all be working towards the same goal with the client but if social workers will not allow the client to be heard; we need to be learning from each other, we are not there to be critical, of course we need to challenge, but we need to work sensitively and appropriately together to ensure the best outcome for individual clients (SW 1).*

Both Merseyside Police and Liverpool Children's Safeguarding Unit affirmed the vital role Savera plays in appropriately challenging statutory agencies when the severity of risk may not have been fully recognised, and praised Savera's advocacy in ensuring a voice for victims.

Further barriers can emerge when clients try to access housing and benefits. Sometimes perpetrators have seized a client's documents with the aim of preventing her from claiming any state support, and Savera will make clients aware of their rights, what they are entitled to claim, and negotiate with various agencies to find a solution to the lack of essential paperwork:

*Trying to explain why she doesn't have any documents, but it's just like, "sorry there's nothing we can do", instead of trying to get round it, and looking at what can be done instead. It wasn't until I got involved and got a Child Tax Credit letter which we helped her to apply for because she didn't even know she was entitled to that. But if services don't work with her to figure out how to get around that ... (SW 1).*

In some instances, delays in finding them somewhere safe to live puts clients at risk of returning to an abusive family or partner. Savera works with clients to help them negotiate with different agencies to claim the support they are entitled to:

*The first time she went back because she was trying to access housing, trying to get her benefits sorted out, but because there were so many barriers put in front of her, it was actually easier for her to go back. So this time - she's left a second time - I'm taking her [around different agencies], and it's a challenge, but I'm helping her, staying involved, keeping her motivated, saying this is what we need to do. It's making a difference. And so many services don't realise that all these barriers are preventing a woman from leaving an abusive relationship (SW 2).*

Some clients who were seeking asylum reported not being believed by immigration officials when they had disclosed abuse, and those whose asylum claims had been refused and were going through appeal were often in extremely vulnerable and precarious situations. The notion of rights to protection from abuse was an abstract one for clients who were appealing a failed asylum application, as the rights they held in the UK could disappear if they had to return to their country of origin:

*In my country, I can't say these things, I can't choose these rights. Can't think about it. Maybe in UK you have more freedom. In my country, what do you mean woman abuse? The woman means woman, she have to listen, she have to stay home, she have to cook every day, she have to clean every day, she have to say yes about everything. ... I know I have done nothing wrong. But every day in my country, we have five, six, seven women killed every day from husband. No one talk about it (Sara).*

The fear and despair felt by interviewees who were waiting for asylum decisions had severe impacts on their mental health; while they trusted that Savera was doing all it could to gather all necessary evidence and secure legal representation to support their cases, they were subject to official decisions that were beyond their control.



## Learning about rights

Despite the various barriers described above, this evaluation has found ample evidence of Savera raising clients' awareness that domestic abuse and harmful practices are a violation of their rights, what are their rights relating to immigration status, and that as women they have rights to initiate divorce and have their children live with them. This is illustrated by the quote below:

*When I met her, and learned all she had been through and was going through, I was able to inform her of her rights. Particularly around Legal Aid; that she didn't have to ask her husband for money, that she didn't need his and her in-laws permission. I also found out that she had British Citizenship. But she was still very scared, because they had told her she had no rights because she was brought in [to the UK] on a spouse visa. And they'd drilled into her head that she had no control, they had all the power. And she had no one else to tell her anything different, so she was convinced they were right. So I found a legal representative and took her to an initial meeting, just to give her a bit of comfort and security, to know that as a single female and single mother in the UK she could start legal proceedings if she wanted to. ... And what annoyed him [ex-husband] even more was she was becoming empowered through learning English through our classes, coming to our drop-ins, and as she was with us more and more, any doubts that she had, any worries she had, any questions she had, she could address with me, and also [at] the meetings that we continued to have with the legal representative around access to children, and where she stood in relation to divorce and Legal Aid (SW 3).*

All the interviewees said that Savera had helped them understand both their legal rights and wider human rights, and for most, this awareness had increased their self-confidence and helped them feel more protected:

*I have learned a lot from Savera. I have more confidence through Savera. Without confidence, you can't exercise your rights in the first place. Gradually, the more I recover, the more I can say 'this is not right' (Rebecca).*

*I used to think it was OK for parents to beat their child. It's OK for them to treat you the way they want. ... I thought that because they had brought me into the world, they somehow had the authority to beat me, keep me the way they want to do. And Savera said while you are in this country there are laws to protect me. So I know that in this country I am more protected (Laura).*

*In my culture, it's very difficult for someone to leave. I have women in my culture say, "well, you've put up with it for so long, why not put up with it longer until the kids grow up?". So, to have somebody like Savera say, "you don't have to put up with it. We're here to help you." I wish I'd known about them earlier (Gulpreet).*

Having awareness of their legal entitlement to protection from abuse led many of Savera's clients to envision their rights to an independent identity and to pursue a future. For example, Jasmine had been told by her husband's family she had no rights in the UK; that her sole focus should be on her husband and children and she should listen to and obey her husband and mother-in-law, both of whom were abusive to her. As a direct outcome of Savera's support, Jasmine has learned English, gained confidence, and has a firm understanding of her legal and human rights:

*At first, I thought my life was finished. I can't speak English, I can't talk. I can't work, I haven't any work experience. I was lost, but when I talk to everybody here, I know I can do what I want. [SW 3], she say, "you have the same rights as your husband. You are human, you have rights as well, you don't need to be scared of anything."*

Savera reports that as a result of their interventions and support, the majority of their clients have gained awareness of their rights and a determination to exercise these:

*Talking to our clients and identifying abuse, and what isn't right and acceptable, I think about 90% of our clients take that away with them and go, "right, I know what is and isn't right", and know how they should and deserve to be treated, and that they are not on their own (SW 3).*

## Asserting rights

### (Outcome 5: BME women and girls feel safe to assert their rights in relation to domestic abuse and harmful practices)

Being able to exercise one's rights involves overcoming the cultural and structural barriers described in the previous section, and placing trust in support systems and legal processes. Savera supported many of their clients to pursue legal proceedings, which may relate to civil law (e.g. child contact, divorce), or criminal law, for example, applications for non-molestation orders, pursuing a criminal complaint against abuser(s), applying for FMPs and FGMPs. The number of clients receiving such support rose in the second year:

*I'd say about half of our clients are involved in cases such as child contact, divorce, taking out a non-molestation order to ensure no one can contact them, pursuing criminal charges for domestic abuse. We are often in court supporting clients [moral and emotional support] (SW 4).*

The number of clients obtaining specialist immigration support peaked in year two of the project, due to wider awareness of Savera's work with victims of harmful practices, and their partnership work in referring clients to specialist immigration law firms and agencies. SW 3 explained how Savera's specialist knowledge is instrumental in supporting and encouraging women to pursue their immigration rights:

*When women initially enter the UK and claim asylum, HBA is not always identified. ... I think the reason why numbers are increasing is that we get called in, as the organisation that specialises in these issues, when we can identify the HBA aspect of the case and work holistically in our support of the client. I think a lot of the stress, anxiety and fear comes with not having any legal status and rights, and the woman will not know what's going to happen to her. So as soon you secure that you have established a right for them and can say, "well actually this is the process, these are your rights, and we are going to follow this through until the end". Obviously not making any promises about the outcome, because we have no control over that; but what we can say is that partnership working and sharing information is key in ensuring that we get the best outcome for the client.*

What is clear from the above account, and from the testimonies of clients who were interviewed, is the importance of Savera's support in helping women feel safe to assert their rights. There was a great deal of qualitative evidence throughout the evaluation of women having trust and confidence that Savera was providing them with the support they needed to exercise various kinds of rights. For instance:

*I feel like someone's watching over me, that Savera will help in whatever way they can. And it's not just the [emotional] support; they're there. They've said, "if you need us to go to the solicitor, we'll go with you; if you need legal advice, we can get you it". So it's support all around, mentally, physically, they are there (Gulpreet).*

*And I think Savera are actually really helping me, with Savera I feel more safe, they are helping me with what I need to do, with the child arrangements proceedings (Louise).*

Exercising rights does not in itself guarantee protection or safety, however, and there is often a danger of reprisals from a family and / or ex-partner. This is a particular risk with HBA, where, despite special measures being put in place by police and courts to protect victims being seen or having their whereabouts discovered, perpetrators frequently go to great lengths to trace victims in order to punish and reassert control. In these circumstances, victims may face consequences including forced marriage, escalated violence and even murder.<sup>132</sup> Clients who are in this situation are constantly vigilant, and may have to move to another part of the UK, or abroad, to ensure their greater safety, where Savera continues to provide them with telephone support for as long as is needed:

*We have one client who says, "I know I'm as safe as I can be, but I'm always looking over my shoulder". And she wants to emigrate to another country, where there is no connection to her family. And we support that; to us that's us feeling so much better that she will be safe. ... Safety is our ultimate goal, our main lens (SW 4).*

Savera provides clients with relevant information, and encourages them to assert their rights themselves, seeing this as an important way for clients to gain confidence that they can do things independently, as a vital step towards achieving self-determination:

*I said to her "call the solicitor; your English is great, it's improving every day and the more you use it, the better it will get. If you think the solicitor hasn't understood, then you can always call me, but I know you can do it yourself". So she did, and there were no issues about it. ... [Last time] we were in court, she said to the barrister, "no, that is not right for me, I want the children back under my care". There has been such a significant change; yes, we had an input, but she's played a big part herself (SW 3).*

# Empowerment

## Pursuing goals

There is ample evidence that Savera's holistic support gives women the strength, knowledge and self-belief to move forward in their lives. Often this involves working with clients to explore options and choices, plan actions and set goals:

*For half a year I couldn't decide what to do, I was coming here [Savera] about twice a week for advice. Because when you've been given a choice after all your life being told you can't do anything, everything is so alarming. [Savera asked] what are my interests, where I'd like to see myself in the future, and we made lists, pros and cons, to think things out. ... They also helped me with money handling, they helped me look for jobs, they helped me with my CV. I've come out of my shell basically (Angelina).*

When they are ready, Savera will help clients apply to colleges, so they can gain qualifications needed to access further education or obtain employment. Part of this may involve working in partnership with other gender-specific agencies, to provide volunteering opportunities in a safe, supportive environment which increases women's self-esteem and skills. This demonstrates a range of successful outcomes, as women gain confidence and abilities to venture into mainstream establishments and go forward in their lives. SW 3 described this as letting go in a good way:

*You are part of that life-changing journey, so when they move on, it's almost like sending your child to their first day at school. You worry! Are they going to be OK? Will somebody talk to them? Are they going to settle? It's letting go in that way. But I mean that in a very positive way!*

Taking initial steps towards self-reliance was the point at which some clients started to have doubts about their ability to make their own decisions and live independently. This is understandable given they had spent most of their lives in controlled environments where they were at risk of violence or even murder should they disobey family and community rules, and may now be living with grief and loss and the impacts of trauma. The Savera team recognises this, and provides support throughout and beyond this transition time, demonstrating belief in clients' strengths and abilities to encourage and sustain them:

*When I left home, I was very young; I was very controlled. And they [Savera] have given me that freedom to believe in myself and to know that I am worthy. And they always said to me that I am going to go far, and I didn't see that, and now I am getting these good results and it just makes me feel so good that they believe in me (Rachel).*

Empowering women and girls who have experienced domestic abuse and harmful practices to take control of their lives can take a great deal of time; progress towards self-determination and empowerment can fluctuate, and is best measured in intermediate steps and milestones.<sup>133</sup> This was evident in the interviews with clients, including those who were interviewed twice to ascertain changes over several months. All interviewees had benefited immensely from Savera's support service and taken significant steps forward, but some had not been able to achieve their goals because of factors beyond their and Savera's control. For instance, Laura has gained a Masters' degree and obtained part-time work, giving her financial independence from her family, who had perpetrated 'honour'-based abuse and threatened her with a forced marriage. Returning to her country of origin would mean she could see her much loved siblings, but would also put her at risk of forced marriage and further violence. She has benefited greatly from Savera's ongoing support, but her ability to plan her future was overshadowed by uncertainty about the outcome of her application to remain in the UK:

*If I can stay here I can plan for my future, I can be the woman I have always dreamt of being. ... Sometimes I wonder if I am doing the right thing. I question myself, whether I should just do what my parents want. Sometimes I feel motivated, but some days it's really hard to cope. I miss things at home; I have some people there who I love a lot. ... Savera is an organisation whose people are actually fantastic for supporting me. ... The first time I said what I wanted for my life, I started being a person for the first time. It gave me the confidence to do what I needed. I feel that Savera are putting me on the right path. They say you have the right to make your own decisions, you have the right to have your dream job, you have the right to be the woman that you want to be.*

Savera support workers talked a great deal about extending hope to clients who had come to them without any hope. This undoubtedly occurs when securing women's safety and with the provision of support to BME women who have often faced multiple barriers to accessing other services. In the context of clients who experience loss and grief for their families, who may doubt their ability to move forward, or who face barriers to pursuing goals, offering hope is not a message that everything will be fine. Rather, it is something that confirms women's strengths and achievements, while acknowledging that there are complexities and uncertainties alongside opportunities.<sup>134</sup> Therefore, while they do all they can to facilitate positive outcomes, Savera SWs are careful not to make promises about matters over which they have no influence, for example, decisions on immigration and asylum applications.

The holistic provision clients receive from Savera creates a bedrock for women to take steps forward at a pace that is right for them, while letting go when they are able or ready. A strong theme in the interviews is that Savera's continual support and encouragement, even if it is only in the background because the immediate risk has passed, is key in giving women inner strength to move forward.



# CASE STUDY A

Client A initially sought support from Savera in 2016, when she was at risk of forced marriage. Several months later, Client A re-established contact with Savera when further communication with her family reignited both their abusive behaviour and attempts to force her to marry against her will. Client A's second experience of Savera occurred after the development of the National Lottery project, and whilst her first experience of Savera was good, she feels their subsequent support has far surpassed this. Because of this, she now views Savera as her family:

*And this time round, it has been the most supportive, close-knit, it's so empowering for me to have a family, and my family is Savera. And it's very hard for someone like me to trust, but with Savera, they genuinely care.*

One of the key reasons for her gaining emotional strength and confidence was knowing that Savera would provide time-unlimited practical and emotional support. When she returned to Savera, Client A's mental health was extremely fragile. Savera supported Client A with visits to a psychiatrist; however, Client A feels that it is Savera's steadfast support that has been most beneficial for her mental wellbeing:

*They help people. And they've helped me. I thought no one in this world could ever help me, even my psychiatrist I think had given up on me, but Savera has never given up on me.*

Over several months, with Savera's support and encouragement, Client A's confidence and self-belief grew and flourished: she was able to continue with her education, and in 2018 she achieved a First Class degree. She now has the strength, confidence, knowledge and sense of self to move forward in her life:

*Savera said, "we're not going to leave you. We are here to support you as long as you need us". I'm going to be working now, and they've helped me with that too. They're not only there to support you with family issues, they are there to support with anything that you need help with.*

## Self - determination

*Specialist women's services have led the way in creating an empowerment approach, which seeks to restore the control to women and girls that is stolen by violence. The support they provide aims to not replace the control of perpetrators with control by experts/professionals, through creating an environment in which survivors can exercise self-determination.<sup>135</sup>*

Savera's structured support and awareness raising with women who use their service has enabled many of their clients to understand, believe in, and assert their rights to live an independent life. This involves Savera unpicking gendered assumptions and norms, assisting women to imagine futures and to seek out opportunities they may not have been allowed to believe were possible. Framing such discussions within a gendered analysis widens the focus from a view that sees harmful practices as a problem specific to certain cultures to an understanding of harmful practices as part of a broader societal problem of violence against women and girls and gender inequality.<sup>136</sup> Support workers reported that they often have conversations with clients about gendered expectations and restrictions on women's freedoms, and, for many, this helps to clarify that as women, they are entitled to make their own decisions and govern their own lives as a matter of equal human rights and justice. The outcome is that clients have increased confidence, raised consciousness and self-belief to assert their right to self-determination, for themselves and for their daughters:

*It's just you have to make the decision today that you have to stand for yourself; you will never be able to stand for anybody else if you can't stand for yourself. So that's what I believe, and you know what, I started getting this confidence from the day I started speaking to Savera. If I am not standing for myself, I will not be able to stand for my future. My future could be my child. And if that child is a girl, she will have to live the same life as I am living if I don't stand for myself. ... Because that doesn't happen out of destiny, we have to fight for it (Laura).*

*There were so many times when I didn't know what to do and Savera helped me find a way round, and if I can help somebody else in the same way, I'll feel I've accomplished something. My daughter says you have come so far, I am proud of you, and you are a role model for me (Gulpreet).*

# CASE STUDY B

Client B was referred to Savera when she was an asylum seeker who had experienced both 'honour'-based abuse and domestic abuse. Savera found Client B a solicitor to help with her asylum claim; a Savera support worker attended the asylum interview with her. Her application was successful, and Client B was granted refugee status.

At the time of her first evaluation interview, Client B had been a Savera client for 8 months. Savera was helping her navigate the transition from asylum seeker to refugee: supporting her move out of an asylum seeker hostel to find somewhere to live independently, helping her apply for benefits and accompanying her to the Job Centre to look for work. When she first came to Savera, Client B had very little confidence due to her experiences of abuse, and Savera referred her for counselling and a confidence building course at a women's health and wellbeing organisation. Client B spoke of the holistic, person-centred provision she had received from Savera:

*[Savera] help me with everything. They help me what I need when I want them. They gave me strength to live my life, said to me what you want to do you can do. ... I can't speak before in front of people, eight months ago. But now I can. Before I can't speak for myself, because of what I been through, I can't speak in front of no one even the police, I was scared [of] them. And now I'm OK.*

As a specialist BME service, Savera sensitively and appropriately addressed the cultural and gender specific pressures Client B had experienced. Client B credited Savera with helping her understand about abuse and control, and that she had rights to live her own life and make her own choices:

*Savera told me, "it's your life; you can choose what you want, you can do what you like. You can wear what you want. We are here to help you". ... They change my life. I say I want study and they say, "you can study. You don't need to scared if we are here".*

Several months later, Client B had found a job, moved to another city, found herself somewhere to live, and had a support network of friends. She has enrolled at college, and has plans for further study. Client B believes that Savera understood and met all her needs during her time with them. Savera has played a significant role in building Client B's confidence and self-belief, and has enabled her to achieve self-reliance, independence and self-determination:

*She now has so much confidence ... she has a job, as she has been granted refugee status. The difference in her since she first came to us is amazing! The perfect outcome! (SW 1).*

Savera embodies the effective model of VAWG provision that promotes safety and addresses the specific harms caused by abuse, as well as building or restoring women's capacity for independent decision making and self-determination. This is the process of helping a client move from her "victim" to her "survivor" self<sup>137</sup>:

*In summary, after God, Savera has been the propelling force that has brought me this far. I think I got involved with one of the best organisations regarding such help (Rebecca).*

All interviewees said they would pass on what they had learned from Savera about rights to self-determination to other women and girls, indicating that these women now have raised consciousness about gender justice. This demonstrates a potentially wider impact of the project, as empowering messages are conveyed to other women and girls who are not in direct contact with the service. Savera's International Women's Day events have played a part in raising clients' awareness of the value, capabilities and strengths of women and girls. Savera has provided clients with opportunities to co-produce and participate in awareness raising campaigns, which has given them a voice as survivors, and resulted in their being agents for social change.

Savera's clients are women and girls who, because of controlling and oppressive environments, the impacts of abuse, insecure immigration status, racism, and barriers to mainstream support, were largely cut off from the social, economic and emotional resources needed to exercise self-determination. Supporting victims of harmful practices in their journeys towards empowerment is a long process with many stages along the way. Holistic provision stands in sharp contrast to the short-term risk reduction and time limited interventions that are often the focus of commissioners of VAWG services.<sup>138</sup> It is Savera's model of holistic support, addressing longer-term needs, that underpins the empowerment of their clients. Savera acts as a long-term enabler for BME women and girls who have experienced gender-based abuse by creating a different power dynamic with which they can take control of their own lives:

*I've made sure any events they [Savera] do, I'll bring my daughter along because I want her to see it isn't just me and her in this situation. I took her to the International Women's Day event, and I said, "look, there are lots of others in our situation, and don't you ever feel you have to do anything you don't want to". And if my daughter can achieve what she wants to do, then going through what I've gone through and showing her you don't have to put up with it, I'll feel as her mum I've accomplished everything (Gulpreet).*

# SCHOOLS-BASED AWARENESS RAISING PROGRAMME

Education and awareness raising have been identified as fundamental to VAWG prevention work, with schools being well placed to deliver programmes that raise awareness of VAWG, challenge the gendered stereotypes and attitudes that underpin VAWG, develop an understanding that abuse is unacceptable, and help young people foster healthy relationships based on equality and respect.<sup>139</sup>

In a report on ‘honour’-based violence, forced marriage and domestic abuse,<sup>140</sup> Safe Lives highlights the importance of prevention and early intervention through education, seeing statutory Relationships and Sex Education (RSE) as an opportunity to raise young people’s awareness about issues such as consent, particularly in relation to forced marriage. They stress that to effectively and safely deliver education on ‘honour’-based abuse, forced marriage and domestic abuse, schools will need to draw on expert knowledge, respond appropriately to any disclosures that arise from discussing such topics with young people, and establish referral pathways for students who require support. Moreover, it is critical that that FGM, HBA, FM and domestic abuse are understood as forms of gender-based violence and as part of the wider inequalities experienced by women and girls, and that any work to address these forms of violence is based on an understanding of women’s and girls’ autonomy and rights to bodily integrity and self-determination.<sup>141</sup>

Four group sessions delivered by Savera UK and Brook as part of a larger schools-based awareness raising programme were evaluated in the context of the five evaluation outcomes. The focus was on learning outcomes to assess if and how the sessions had increased girls’ understandings of domestic abuse and harmful practices and provided them with language and confidence to name domestic abuse and harmful practices, awareness of legal rights, and knowledge about what to do if they or someone they knew was at risk of domestic abuse and / or harmful practices.

## Holistic approach (Outcome 1)

Throughout the course of the 3 year National Lottery funded project, Savera, in partnership with Brook, delivered a school-based programme comprising four 3 hour group sessions, and seventeen assemblies to raise awareness of healthy and harmful relationships, domestic abuse, ‘honour’-based abuse, forced marriage and female genital mutilation.

To ensure the programme reached students from a wide range of ethnic and cultural backgrounds, a main request when Brook approached schools was that sessions include BME students. Schools then put together a group and advised parents on behalf of Savera and Brook, with schools seeking parental consent in accordance with their own school policies. When a smaller group session wasn’t possible, Savera and Brook adapted the presentation to be suitable for an assembly.

Savera reported advantages and drawbacks to both types of delivery. Assemblies were felt to be a good way of raising awareness among a wider group of girls in one session. On the other hand, it was recognised that while some assemblies were very interactive, with girls happy to ask and respond to questions, the large group format could also be a barrier to engagement. With smaller group sessions, Savera and Brook were able to include more information and ensure greater participation in learning activities. These sessions were more relaxed and informal than assemblies, mostly generating good interaction and group discussion, although it was noted that a small minority of students appeared nervous about speaking about abuse and harmful practices in an intimate group setting.

The Savera member of staff who delivered the sessions with Brook suggested that it would be useful for parents to receive more information about the session and be given the opportunity to ask Savera questions through the school beforehand. Brook has indicated that for future engagement work, they will create a briefing template for schools to use when they write to inform parents about the sessions.

Much of the session content drew on Savera’s expertise as a frontline specialist BME support service to teach girls about the nature of domestic abuse and harmful practices, including ‘invisible’ forms of abuse, such as coercive control, psychological abuse, and restriction of freedoms, and how to seek support and assert their rights. The programme provided schools with expert knowledge and a clear referral pathway to use should students require support.

The programme was delivered mainly to girls, with a number of mixed-sex assemblies. Mixed sessions were intended to raise the awareness of boys to facilitate wider peer group understanding and to encourage young people to work together to speak out against harmful practices.



## Cultural awareness and diversity

Savera was careful throughout the sessions not to frame HBA, FGM and FM as problems connected only to specific cultures, while making clear that harmful practices as a cultural tradition or norm are never acceptable, and are illegal in the UK. Thirty five per cent of the 37 students who answered the question on ethnicity in the evaluation questionnaire were from a BME background. Savera believes that rather than ‘singling out’ students from BME communities to take part in awareness raising sessions, it is important that participants are from diverse cultural and ethnic backgrounds. In this way, awareness will be raised among girls from a range of ethnicities who are likely to pass on what they have learned to peers from a variety of backgrounds, which will help to more widely dispel the fear, silencing and stigma surrounding these issues in all communities. Savera further points out that white girls and women are also at risk of abuse if they form relationships with men who believe in harmful practices. There is evidence of this approach being successful, as evaluation feedback from girls of various ethnicities indicated that the sessions had considerably increased their awareness. For most, ‘the most important thing I learned today’ centred on awareness of harmful practices:

*FGM. Honour based abuse. Didn't know much previously (British Asian, age 17).*

*FGM was definitely shocking and important to me (White Irish, age 13).*

*That FGM, honour based abuse, and forced marriages happen everywhere – including Western countries (age 15, ethnicity undisclosed).*

## Understanding gender inequalities

The work with students in schools was informed by an intersectional gender analysis, by teaching that any woman or girl can be subjected to different forms of abuse, that women and girls disproportionately experience domestic abuse, ‘honour’-based abuse and forced marriage compared to men and boys, and that BME women experience higher rates of suicide and domestic homicide than other women in the UK. The sessions contained references to gendered norms, beliefs and attitudes that are root causes of harmful practices such as FGM, forced marriage and HBA. The evaluated sessions were female only; these sessions were effective in creating safe and supportive settings in which girls could learn about domestic abuse and harmful practices, reflect on gender stereotypes and myths that reinforce discrimination and violence, engage in discussion and ask questions, and learn about their rights and how to assert these.

A minority of participants in all four sessions appeared unsure about the gendered nature of the topics being discussed. Of 40 responses to the end of session questionnaire statement “one in four women in the UK experiences domestic abuse, and on average two women a week are killed by a current or former partner”, 31 strongly agreed, 7 agreed a little, 1 disagreed a little, and 1 was not sure. Five students were not sure if “FGM is a form of child abuse and violence against women and girls”.

In order to fully meet guidance that FGM, HBA, FM and domestic abuse should be understood both as forms of gender-based violence and as part of the wider inequalities experienced by women and girls, it is suggested that the sessions should provide a more precise explanation about the links between gender inequality and violence, in that men and boys are less likely to respect women and girls and more likely to use violence if they are not encouraged to treat women as equals, and that women and girls are less likely to understand that they are experiencing violence and abuse if they are used to being treated differently and unequally because they are female.<sup>142</sup> This would provide the context for a clearer message that women and girls of all ethnicities experience multiple forms of control, abuse and violence based on their gender, and that forced marriage, ‘honour’-based abuse and FGM are specific forms of VAWG that disproportionately affect BME women and girls. Thus, whilst having distinctive cultural features, particularly with regard to the notion of ‘honour’ and the frequent involvement of multiple perpetrators, these harmful practices are defined as human rights violations based on gendered power imbalances that normalise the abuse of women and girls.<sup>143</sup> This could be accompanied by a slide showing the following UN definition of VAWG, which creates a framework for this key message and subsequent discussion:

*Violence against women and girls is rooted in historical and structural unequal power relations between women and men, and persists in every country in the world as a pervasive violation of the enjoyment of human rights. Gender-based violence is a form of discrimination that seriously violates and impairs or nullifies the enjoyment by women and girls of all human rights and fundamental freedoms. Violence against women and girls is characterized by the use and abuse of power and control in public and private spheres, and is intrinsically linked with gender stereotypes that underlie and perpetuate such violence, as well as other factors that can increase women's and girls' vulnerability to such violence.<sup>144</sup>*

## Involving and engaging girls (Outcome 2)

### Young people's focus group

At the start of their partnership to deliver a school-based awareness raising programme, Savera and Brook convened a focus group to gather young people's views to inform the format of the sessions. Six young people aged 12 – 14 took part: five girls and one boy. Participants were asked their views on how long a session should be, what would help to make the session safe and supportive, what should be covered in a session on healthy and harmful relationships, what age would be important to talk about this topic, and what activities would help a session work well. The findings of the focus group were that most participants preferred single sex sessions, favoured an informal rather than a traditional classroom environment and would rather have mixed activities over powerpoint only. All participants indicated that they would like a group agreement; all said the sessions should be either a full day or afternoon only, and that due to the content they would not want to return to normal lessons on completion of the session. All wanted a quiz to measure learning at the end of the session, and for participants to be awarded a certificate on completion of the session. There was a small discussion on domestic abuse and harmful practices; Brook reported that girls showed an interest in learning about healthy and harmful relationships, possessive relationships, and the difference between forced and arranged marriage.

The views of the young people who took part in this focus group were taken into account in the delivery of the programme in that sessions were held in safe spaces; a learning evaluation quiz was integrated into the sessions; the sessions used mixed educational activities; and students identified group rules themselves, which were discussed and clarified by the session deliverers and agreed by the whole group. Where possible furniture was arranged to create a large table in the middle of the room, with separate tables to work on when carrying out the activities. This set up worked well and will be the continued format. Making sessions either a full day or afternoon only, and not having to return to normal lessons because of the content, depended on schools' timetables and feasibility. While certificates for completing the session have not yet been made available, the facilitators intend to arrange this when planning future group sessions.

Because the majority of focus group participants said they would prefer sessions on domestic abuse and harmful practices to be single sex, and as the female only school-based sessions provided safe and supportive spaces to discuss these issues, consideration should be given as to whether single sex groups would be most conducive to empowering and amplifying the voices of girls and young women in future engagement and education activities.

## Responding to feedback from school sessions

Feedback from a student who took part in one of the early sessions was: "Some case studies in the HBA section would be useful to put it into a real life scenario". Consequently, Savera showed a video about a British Pakistani girl who was murdered in an 'honour' killing in all ensuing group sessions. After the video, Savera asks students what they have learned from the film, what they understand about the notion of 'honour' and forced marriage, and what they would do if they or someone they knew was in a similar situation. This generated a great deal of discussion and questions from the group in the observed session, and proved to be an effective way of shaping the content of the programme to reflect what is important to girls and young women.

## Savera Youth

In 2017, Savera undertook education work on harmful practices with a group of Sixth Formers, who in turn facilitated an awareness raising session with younger students. During this session, a set of questions was put together for a Question Time event with panel guests including the Merseyside Police and Crime Commissioner and Savera UK's Patron, Nazir Afzal. A clear message that emerged from the event was the need for more education and awareness raising work with young people, as a means of preventing harmful practices. The Savera Youth Programme was developed as a direct outcome of this participatory work with young people.

Although the Youth Programme lies outside the scope of this evaluation, it deserves attention as a valuable means by which Savera sought and responded to the views of young people, many of whom were BME girls and young women, and engaged them in the co-production and delivery of a learning project. Savera UK's Youth Programme demonstrates the value of peer education, in that through raising awareness of harmful practices among a group of young people, knowledge and key messages have been disseminated far more widely, through a Question Time event, at a Savera UK Youth Conference and via social media.

The Savera UK Youth conference was a youth-led event on harmful practices. The conference spread knowledge and factual information about forced marriage, FGM, and 'honour'-based abuse to a wider audience of young people, using first-hand experiences, poetry, an interactive film about harmful practices, and a question and answer session. Savera UK's founder and Chair reported that their Ambassador's tweet and Instagram about the conference reached over 17,000 people. Through creating the interactive film, young people gained writing, camera, presentation and media skills: the film included an Instagram account that acted as the profile of the main character, who was being forced to marry. The film was integral to the conference and the hashtag allowed people to engage in a social media conversation leading up to and during the conference:

*This interactivity tied the conference and the film project together and encouraged shared conversation and social action. Even with the final scene being shot at the conference, the film was successfully launched and received an incredible response from the audience.*<sup>145</sup>

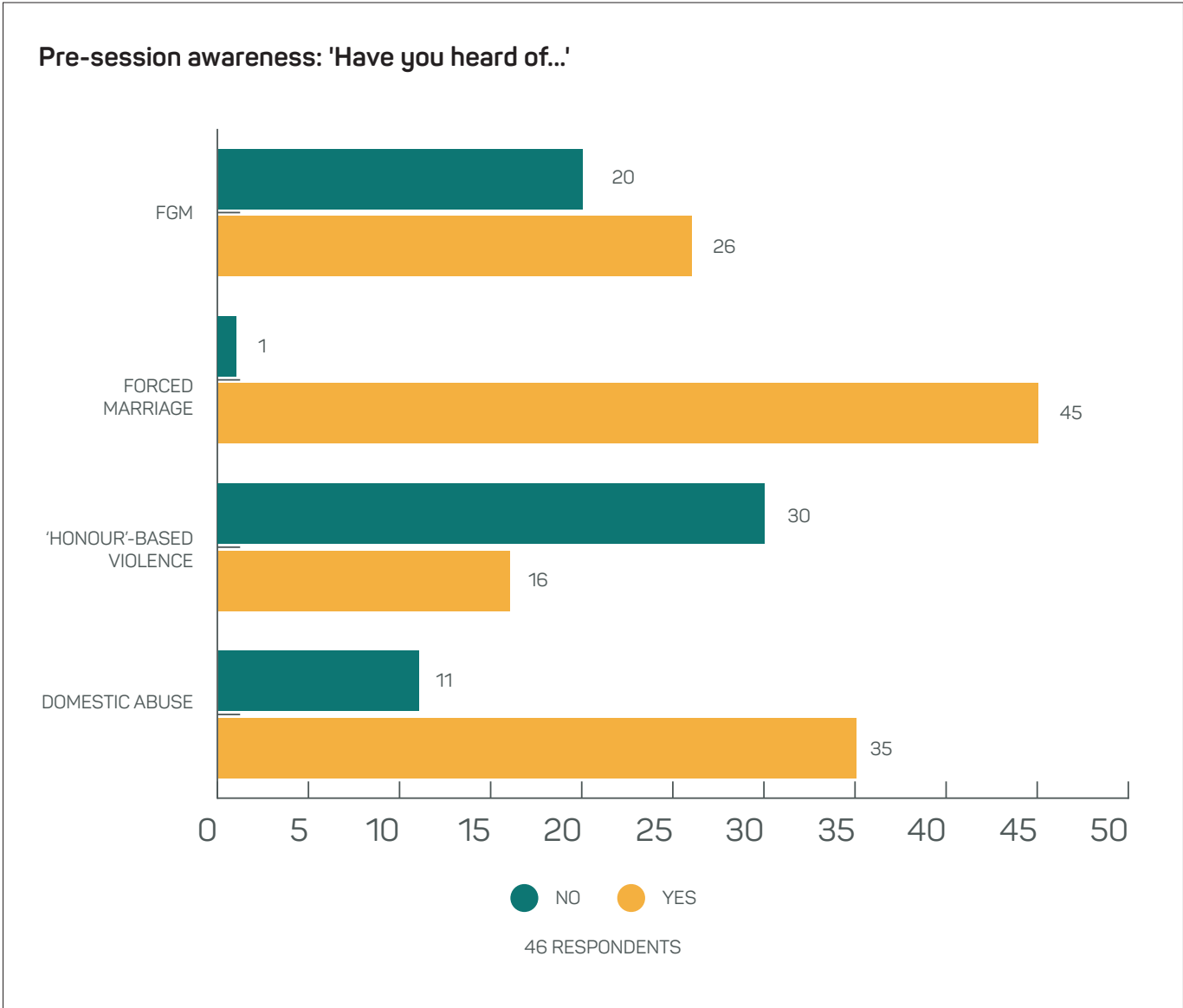
Since the conference, Savera has established a Youth Advisory Board (YAB). At the point of writing, four young people from the Youth Programme have signed up to the YAB, and will work with the organisational Board and staff to develop the Youth Programme so as to increase engagement with young people through education and in the local community.

There are important reasons for including local elements in campaigns and interventions with young people to combat abuse and violence, and for ensuring that those who receive these programmes are involved in their development. Young people's co-production of such projects can significantly increase the authenticity of their design and delivery, which is important for young people themselves.<sup>146</sup> In their review of interventions with young people aimed at preventing intimate partner violence, Stanley et al. suggest that co-production with young people can be achieved through various means including: "incorporating material co-produced with young people into programmes; through engaging them in participative learning activities such as drama and by training and involving them as peer mentors or facilitators."<sup>147</sup>

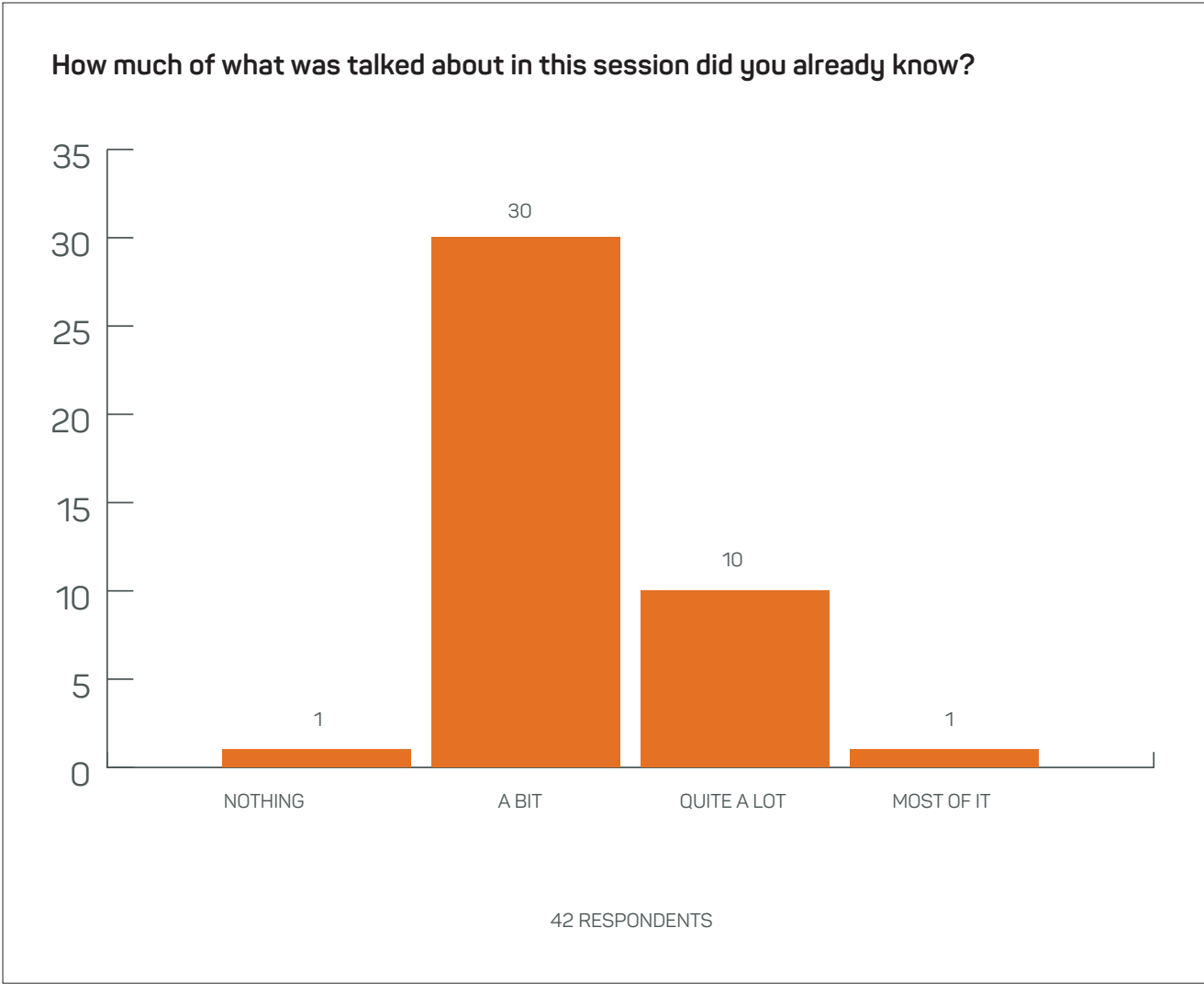
Savera UK’s Youth Programme and Youth Advisory Board have fully met the criteria for what is widely held to be a model of effective practice in co-production with young people. Savera’s involvement of young women and girls, including those who may potentially be at risk of domestic abuse and harmful practices, as peer educators and youth volunteers has shaped and directed an innovative and important aspect of their prevention work. production with young people. Savera’s involvement of young women and girls, including those who may potentially be at risk of domestic abuse and harmful practices, as peer educators and youth volunteers has shaped and directed an innovative and important aspect of their prevention work.

Understanding abuse (Outcome 3)

The answers to the question on pre-session awareness for the evaluation of four sessions of the schools programme shows that of a total 46 participants, 26 had heard of FGM; 45 were aware of forced marriage; 16 had heard of ‘honour’-based abuse; and 35 were aware of domestic abuse.



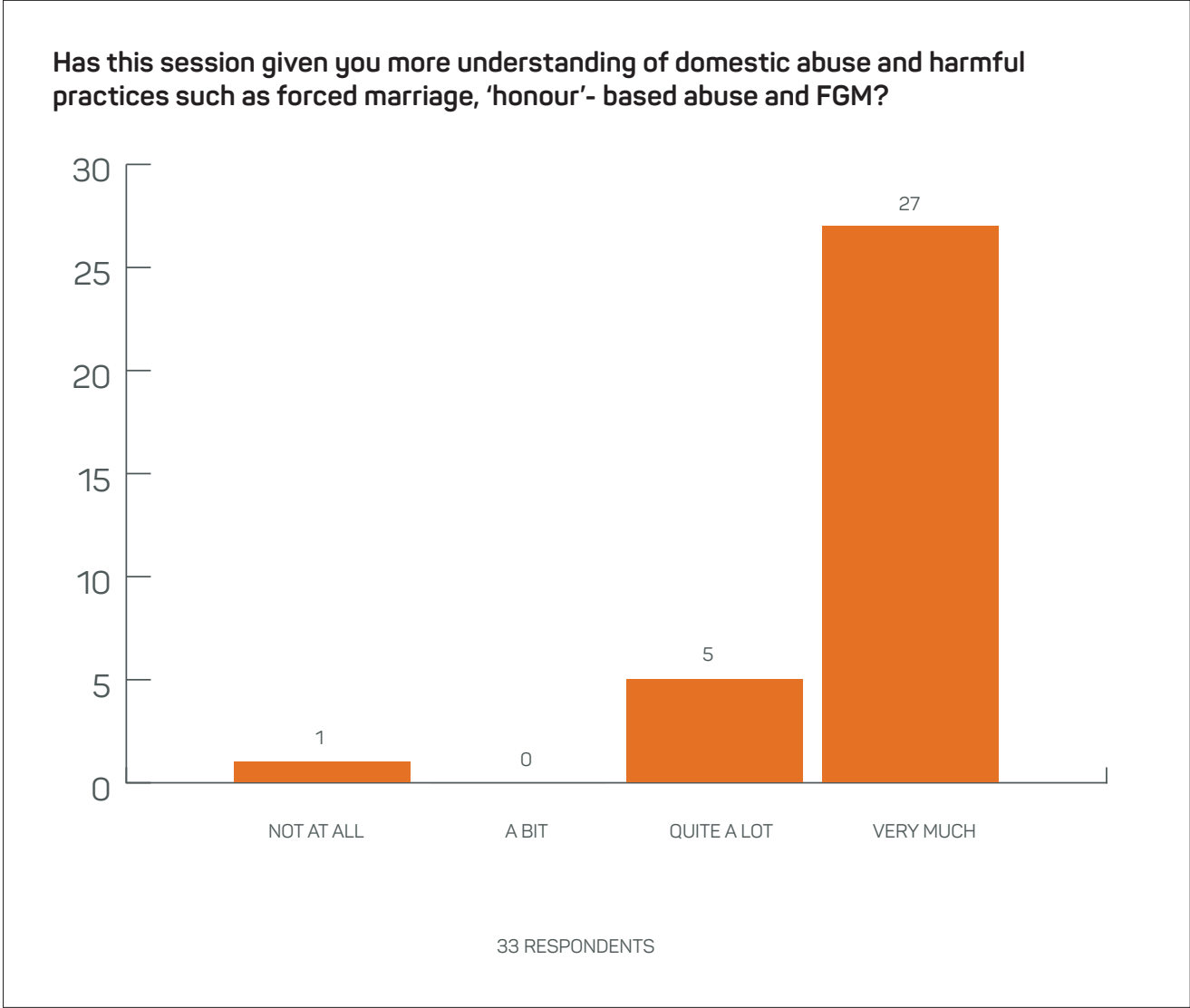
When asked after the session 'how much of this session did you already know?', of 42 girls, 30 answered "a bit", 10 "quite a lot", 1 "nothing" and 1 "most of it", with responses to further questions indicating that the sessions had considerably increased most students' knowledge of domestic abuse and harmful practices.





In order to further determine end of session knowledge and learning, students were asked:

*'Has this session given you more understanding of domestic abuse and harmful practices such as forced marriage, 'honour'- based abuse and FGM?'* The majority of the 33 students who answered this question said that the session had increased their knowledge "very much" (27), or "quite a lot" (5), with only 1 answering "not at all".



At the end of sessions, 23 girls felt "very confident", 14 "quite confident" and 5 "a bit" confident to name and talk about domestic abuse and harmful practices, which is an important factor in being able to disclose abuse in order to seek advice and support.

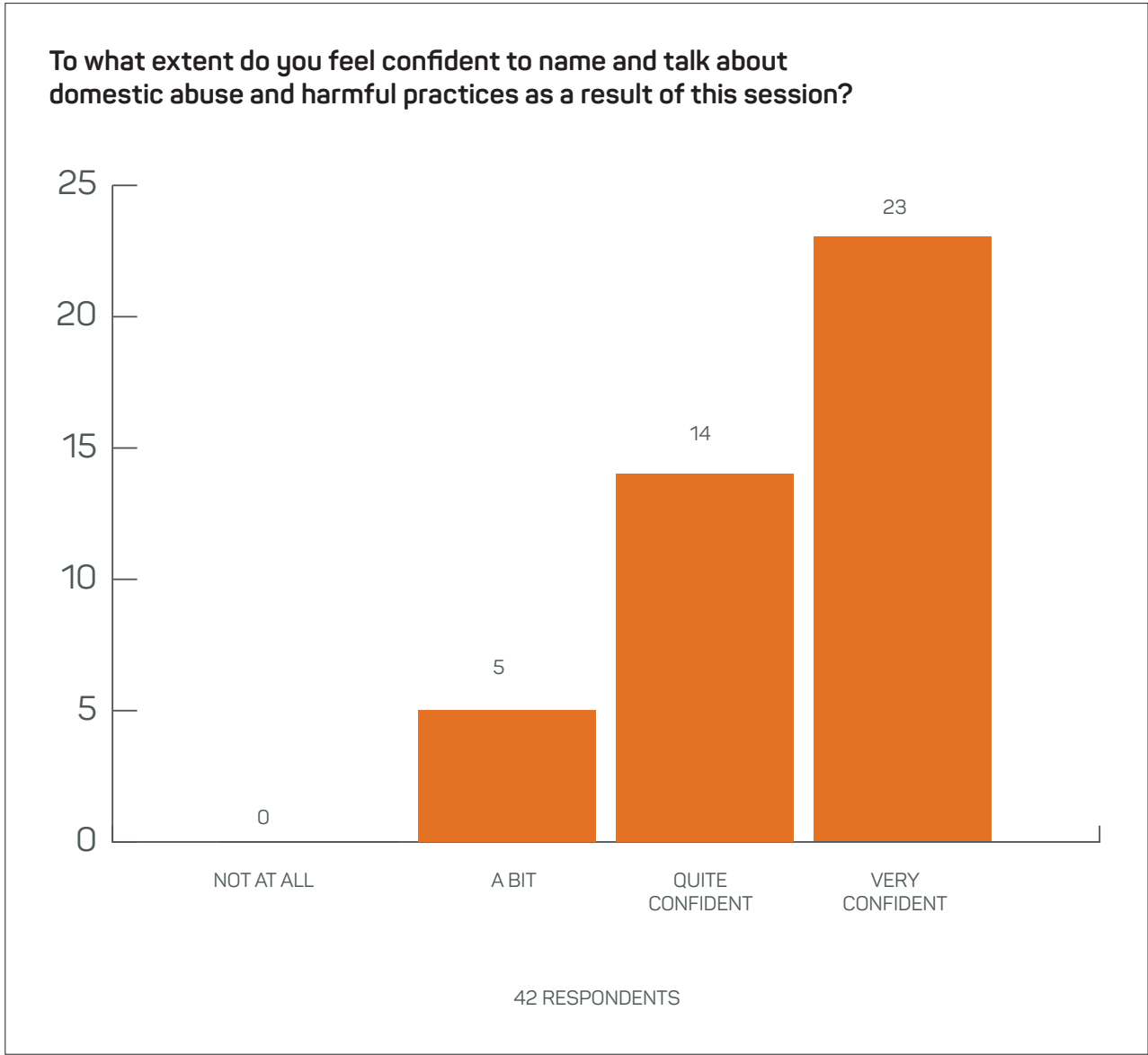


Table 1: End of session awareness of domestic abuse and harmful practices (40 respondents)

| Statement  | Strongly agree | Agree a little | Disagree a little | Strongly Disagree | Not sure |
|--|----------------|----------------|-------------------|-------------------|----------|
| Domestic abuse can be emotional, psychological and financial as well as about hitting someone.   | 39             | 1              |                   |                   |          |
| Coercive control is an act or pattern of assault, threats, humiliation and intimidation that is used to harm, punish, control or frighten victims.   | 33             | 2              |                   |                   | 5        |
| One in four women in the UK experiences domestic abuse, and on average two women a week are killed by a current or former partner.   | 31             | 7              | 1                 |                   | 1        |
| Victims of forced marriage may experience physical, psychological, financial, sexual and emotional pressures from their families and communities to get married.                                     | 36             | 3              |                   |                   | 1        |
| 'Honour'- based abuse can take the form of emotional and psychological abuse, restriction of freedom and education, isolation and imprisonment, physical violence, threats to kill, and even murder. | 35             | 2              |                   |                   | 3        |
| 'Honour'- based abuse can be carried out by more than one perpetrator, including family members, in-laws and other members of the victim's community.  | 33             | 4              |                   |                   | 3        |
| FGM is a form of child abuse and violence against women and girls.   | 34             | 1              |                   |                   | 5        |





Prior to the sessions, students indicated that the areas they were most aware of were forced marriage and domestic abuse, with FGM and 'honour'-based abuse being the areas least known about. When the responses to the statements above are compared to pre-session knowledge, when 31 of 42 students knew "a bit" or "nothing" about the whole of the session content, it can be seen that the majority of respondents understood more about the nature, features and extent of domestic abuse and harmful practices after the sessions. For instance, at the end of sessions, 39 of 40 students strongly agreed that domestic abuse can comprise psychological, emotional, financial and physical abuse; while 33 strongly agreed that 'coercive control is an act or pattern of assault, threats, humiliation and intimidation that is used to harm, punish, control or frighten victims'. Five were unsure of the nature of coercive control, indicating that more explanation is needed in future sessions to clarify this.

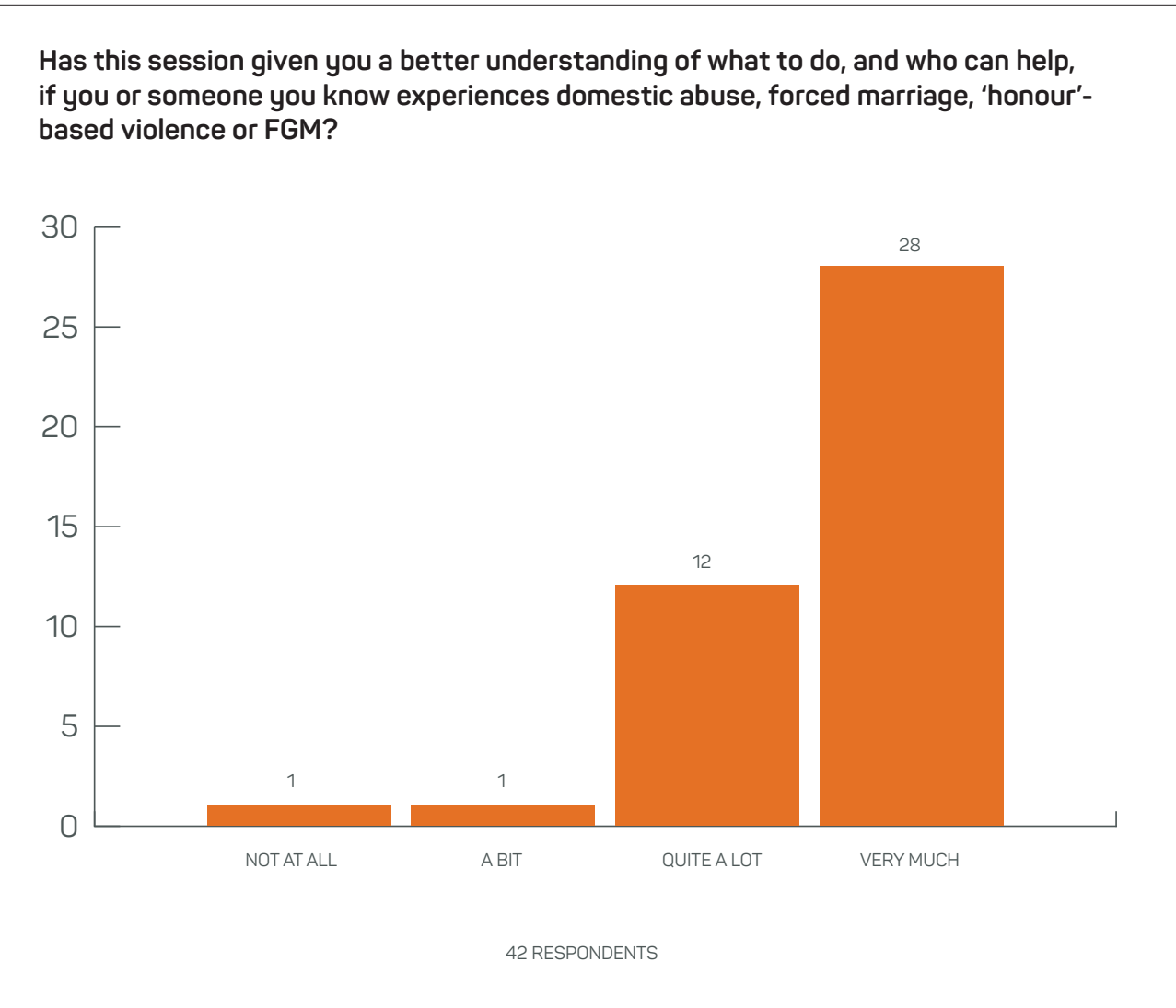
The findings show substantial end of session awareness that victims of forced marriage may experience physical, psychological, financial, sexual and emotional pressures from their families and communities. Furthermore, a high number of students (35 out of 40) strongly agreed that "honour'-based abuse can take the form of emotional and psychological abuse, restriction of freedom and education, isolation and imprisonment, physical violence, threats to kill, and even murder', and 33 strongly agreed that 'honour-based abuse can be carried out by multiple perpetrators. This reveals a significant increase in awareness of the nature of HBA from a baseline of 16 students who had heard of HBA at the beginning of the sessions. Although twenty six students had heard of FGM before the sessions, clear and tangible knowledge was increased by the content of the sessions; at the end of the sessions, 34 strongly agreed, and 1 agreed a little, that 'FGM is a form of child abuse and violence against women and girls'.

Qualitative feedback in the evaluation questionnaire shows that the majority of participants were extremely appreciative of the opportunity to learn about practices that constitute specific types of violence against women and girls. One 15 year old participant wrote: "This session really opened my eyes to what other girls my age go through". Whilst all the topics covered by the sessions were deemed important, 'honour'-based abuse and FGM were the issues most commented on, and appear to have had the greatest impact in raising girls' awareness both of their existence and of associated legal rights and protections. Students' individual comments include:

- Everything was important, but FGM was the most shocking.*
- All about HBA. I didn't really know anything about it. I'm glad I know now.*
- FGM and its dominance in society today. It educated me and widened my views and knowledge that I will educate as many people as I can.*
- How important it is to talk about these topics and to be educated as it can help many people in the future.*

The latter three comments indicate that the content of the sessions armed girls with knowledge and provided them with an opportunity to talk openly about forms of VAWG, with one intending to pass on what she had learned to others.

Awareness of rights (Outcome 4)



The majority of the 42 girls who answered the above question said the session had provided them with a better understanding of what to do, and who can help, if they or someone they knew experienced domestic abuse, FM, HBA or FGM.



Table 2 shows the results of 40 students’ end of session responses to statements relating to the use of the notion of ‘honour’ to validate forced marriage and FGM:

Table 2: How much do you agree with these statements?

| Statement  | Strongly agree | Agree a little | Disagree a little | Strongly Disagree | Not sure |
|--|----------------|----------------|-------------------|-------------------|----------|
| Families have the right as a matter of honour to tell girls and young women who they should marry. | 1              | 1              | 8                 | 30                |          |
| FGM is a rite of passage that upholds the family honour.   | 5              |                |                   | 22                | 13       |

The majority (30) strongly disagreed with the statement: *‘Families have the right as a matter of honour to tell girls and young women who they should marry’*, although 8 “disagreed a little”, with one “agreeing a little” and one indicating they “strongly agreed”. Younger respondents (aged 12 – 14) were more likely to tick “not sure” to the statement *‘FGM is a rite of passage that upholds the family honour’*; and it’s possible that some students did not understand the wording, as some ticked “strongly agree” to this statement while also strongly agreeing that FGM is child abuse and a form of VAWG.

Table 3 shows the results of 38 students’ responses to statements about legal rights and protections relating to domestic abuse and harmful practices.

Table 3: How much do you agree with these statements?

| Statement  | Strongly agree | Agree a little | Disagree a little | Strongly Disagree | Not sure |
|--|----------------|----------------|-------------------|-------------------|----------|
| Domestic abuse is a crime and it is never acceptable for a man to hit or abuse his wife or girlfriend.   | 37             |                |                   |                   | 1        |
| Coercive or controlling behaviour by a partner or family member is against the law.  | 31             | 1              |                   |                   | 6        |
| Forced marriage is where one or both parties is married without their consent and is illegal in the UK.  | 37             |                |                   |                   | 1        |
| In the UK, people who are at risk of forced marriage, or who have been forced into marriage, can apply for a Forced Marriage Protection Order. | 33             | 2              |                   |                   | 3        |
| So called ‘honour’- based violence and abuse is a fundamental abuse of human rights and a crime.   | 33             |                |                   |                   | 5        |
| Women and girls have a right to report so called ‘honour’-based abuse to the police.   | 37             |                |                   |                   | 1        |
| FGM is against the law in the UK   | 37             |                |                   |                   | 1        |
| It is illegal to take women and girls overseas for the purpose of FGM.   | 31             | 3              |                   |                   | 4        |

There were high levels of awareness of legal rights and protections after the sessions, with the majority of respondents agreeing with statements about domestic abuse and harmful practices being crimes.

When assessing end of session awareness of what constitutes abuse, five students were unsure of the nature of coercive control. Likewise, in Table 3 above, six girls were not sure if ‘coercive or controlling behaviour by a partner or family member is against the law’. This further indicates that the concept of coercive control is an area that needs more explanation in future sessions.

The laws relating to HBA and FGM are other areas that appear to need more clarification, as five girls were unsure about 'honour'- based abuse being a fundamental abuse of human rights and a crime, and four were not sure if it is illegal to take girls overseas for the purpose of FGM. It may be helpful to frame information about the concept of 'honour' within a discussion on consent, women's and girls' autonomy, and rights to bodily integrity and self-determination.<sup>148</sup>

Qualitative feedback showed the majority of girls gained awareness of their rights and how to assert their rights, with some saying knowing how to respond to different forms of abuse was the most important thing they had learned:

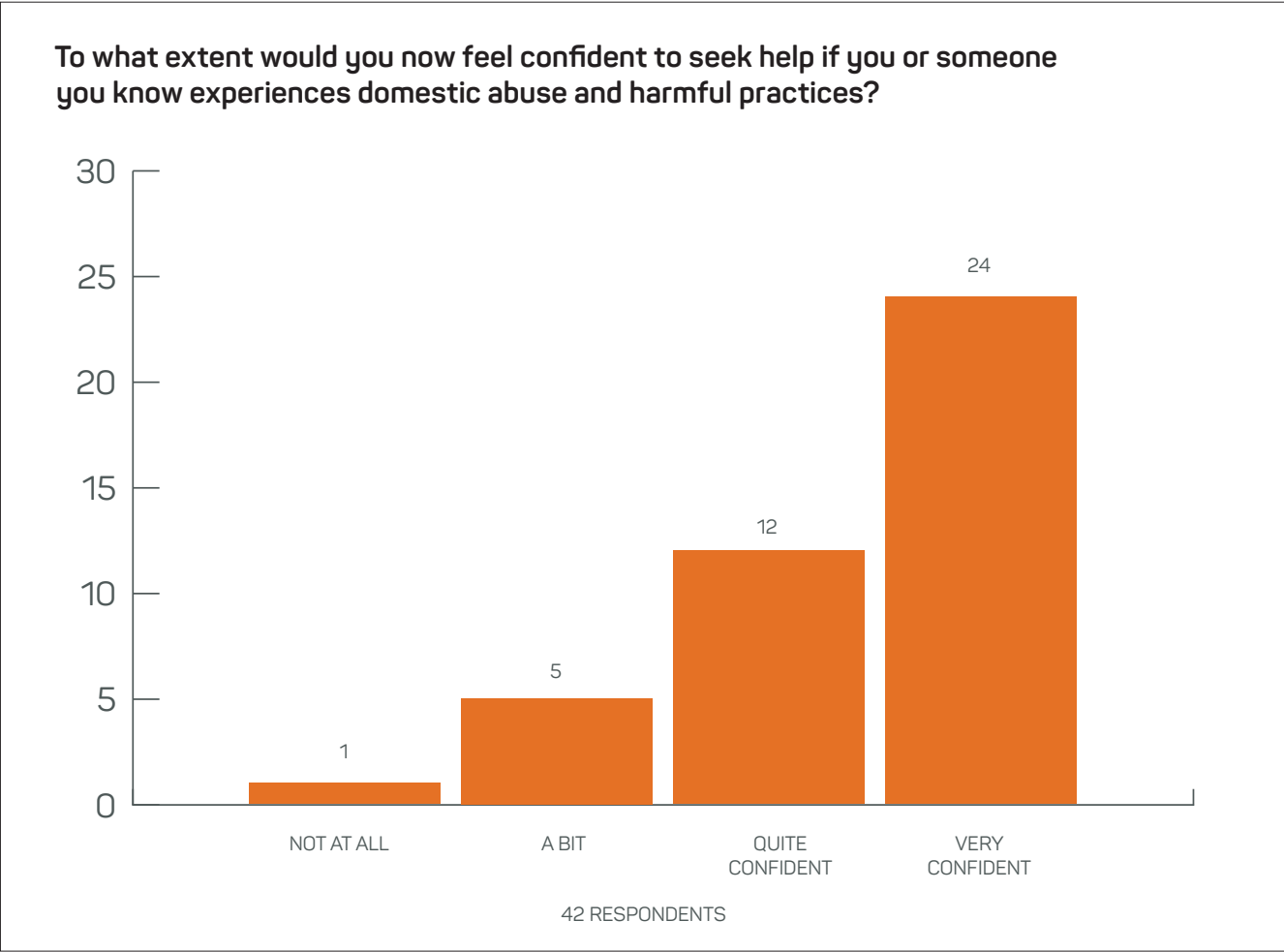
*How to deal if I found out someone was encouraging any of what we spoke about.*

*The ways you can report FGM, forced marriage and domestic violence.*

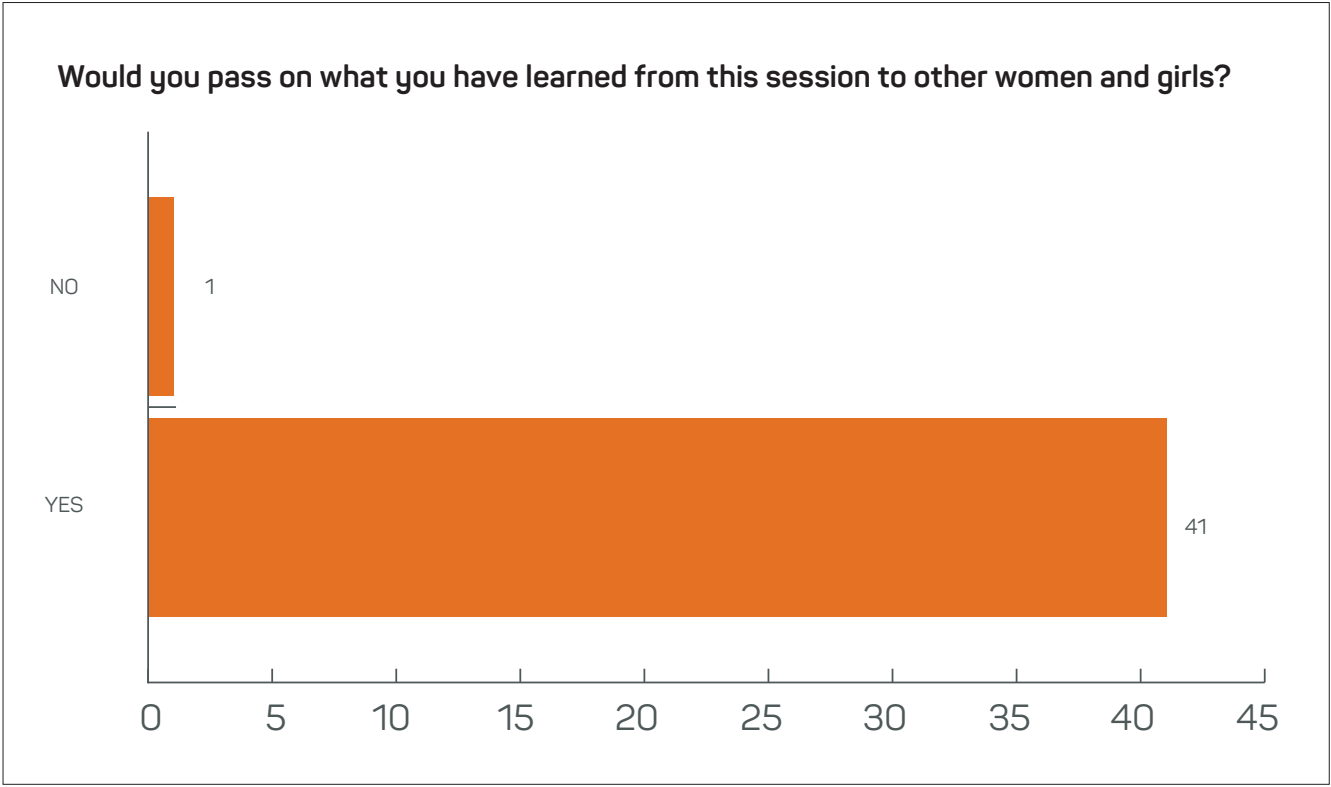
*Learning about FGM and how wrong it is and how it should be illegal everywhere.*

**Asserting rights (Outcome 5)**

As well as increasing awareness, challenging gendered norms and stereotypes and developing the understanding that violence is unacceptable, education interventions should also provide young people with the confidence and resources to resist power and control and to seek help and support.<sup>149</sup> Of 42 students who answered the question: 'to what extent would you now feel confident to seek help if you or someone you know experiences domestic abuse and harmful practices?', 24 said they were "very confident", 12 were "quite confident", with 5 being "a bit", and 1 "not at all".



This is a very good outcome for sessions delivering information that some girls may have found sensitive or uncomfortable. Students' confidence to ask for more information, disclose abuse and seek help should they need to, could be further increased with additional take away information about where and how to access support. It may also help to increase confidence if information about what happens when someone discloses abuse is covered within the session.



There was important evidence that the majority of participants were willing to pass on what they had learned to other women and girls. When combined with the answers to post-session statements relating to increased awareness, an understanding that abuse is unacceptable, knowledge of legal rights and protections, confidence to seek support, and feedback from girls on what they have learned, there is a strong indication that key messages about the nature, extent, and illegality of domestic abuse, forced marriage, 'honour'-based abuse and FGM have been understood by the majority of students, and will be disseminated among their peers.

There is further evidence from comments on evaluation forms that girls acquired knowledge and confidence to assert their rights. For example, three students stated that the most important thing they had learned was:

*Don't be scared to share your feelings because once you have told the police they can do something about it.*

*The specifics of FGM and what to do if someone I know is suffering from it.*

*How to help and educate others.*

# OBSERVED SCHOOL SESSION

The session demonstrated interactive and engaging delivery, and a number of positive outcomes. There was good rapport between the session deliverers (one from Savera, the other from Brook) and the group of students. The session began with appropriate ice breakers, the seriousness of the topic was explained, and that students could leave if they wanted to and support was available from staff. There were ample opportunities for students to discuss the issues raised and to ask questions.

The section on culture was handled sensitively and respectfully, while at the same time making clear that harmful practices as a cultural tradition or norm are never acceptable, and are illegal in the UK. The section on domestic abuse included a good example of different types of abuse, including sexual violence, and financial abuse taking place within the context of coercive control.

The delivery was broken up into a combination of information, activities, videos and discussion. The exercises worked particularly well, and gave students opportunities to think about different aspects of harmful practices and to reflect on how they might overlap (e.g. HBA and FM; FGM as HBA etc.), as well as exploring the issue of consent in relation to forced marriage. The videos were very useful in highlighting the reality of harmful practices, such as ‘honour’ murder, and what FGM entails.

The section on FGM generated the most questions and discussion; students were very concerned to learn more and to understand why and where FGM happens, and were very engaged in the topic, although this section also caused some confusion, due to some anatomical terms that were not understood by all.

As a result of evaluation feedback on this session, Savera made the following changes to subsequent sessions:

- A slide on ‘types of FGM’ has been changed to use simpler language.

More detail about FGM and UK law has been added.

- Postcards with information about domestic abuse and harmful practices including helpline numbers and information about where to access support, are given out and made available where they can be picked up to keep and to give to friends.

# COMMUNITY ENGAGEMENT

A key aim of Savera’s project was to increase outreach work with women in communities that are more likely to be affected by harmful practices. However, a steep rise in referrals to the support service over the duration of the project led to a greater proportion of the total funding being allocated to front-line support work with victims. With support workers’ time and resources largely taken up with the provision of one-to-one support, there was less time available for community engagement.

Although community engagement formed a smaller than envisaged aspect of Savera’s work, four events with women from marginalised communities took place. It is clear from interviews and ongoing discussions that Savera staff and directors are committed to reaching out to women and girls in a wide range of marginalised communities, in order to raise women’s awareness of their rights regarding domestic abuse and harmful practices, and signpost where they can find advice and support. In July 2019, Savera appointed a Community Outreach Worker, a main part of whose role was to engage with local communities to raise awareness of harmful practices.

The findings of the observation of two awareness raising sessions and follow-on focus groups with women from two different BME communities are presented in this section. The questions and answers in both focus groups were interpreted by one of the participants. Community engagement work mainly connects to Outcomes 3,4 and 5:

Outcome 3: BME women and girls have awareness of what constitutes domestic abuse and harmful practices, and where they can go for advice and support

Outcome 4: BME women and girls have awareness of their rights and how to assert their rights in relation to domestic abuse and harmful practices

Outcome 5: BME women and girls feel safe to assert their rights in relation to domestic abuse and harmful practices.



## Awareness raising sessions

Session 1 comprised mainly Chinese women and was delivered using a formal slide presentation style. The content addressed domestic abuse, forced marriage, 'honour'-based abuse and FGM; the impacts and consequences for victims; legislation against harmful practices and victims' rights, and where to seek advice, support and protection. The information was conveyed in a way that did not imply judgement or stereotypes, but which recognised and celebrated the richness of cultural diversity while working together to stand against harmful practices.

Session 2 was attended by South Asian women, and covered the same areas as Session 1, but used a different delivery style. The facilitator said this was because after delivering Session 1, she had reflected on what might be a more appropriate way of raising awareness when engaging with groups of women in different local communities. This session included concrete examples, a short quiz, and questions seeking the group's opinions about domestic abuse and harmful practices, all of which were related to the women's community norms and practices. The result was that the session was made relevant to women's everyday lives. There was a great deal of discussion between the women and the facilitator, and among the women themselves, which enabled a deeper exploration of the topics being discussed, more clarity, and greater insight. This session also placed more emphasis on FGM, HBA, FM and domestic abuse as forms of violence against women and girls, with accompanying statistics which illustrated the scale and ubiquity of gendered violence in the UK as a whole.

## Findings of observed sessions and focus groups

### Domestic abuse

In both focus groups, all apart from one woman had been unaware that domestic abuse included psychological abuse, sexual abuse, marital rape, coercive control and financial abuse, with the majority saying they had thought domestic abuse meant physical violence, and that it was only physical violence that was against the law. The specific information relating to various aspects of domestic abuse connected with women's experiences, and allowed them to reflect on what constitutes abuse, and understand their rights:

*This lady say learning about domestic abuse is quite important actually. Really important they know if they experience domestic abuse they know where to get help (FG 1).*

*She didn't know about control, it is just part of the life. We didn't know, but now we do. Like if your husband forces you in the night, that is rape. We were thinking if he is your husband you have to let him (FG 2).*

Women said they were now clear that controlling and coercive behaviour, financial abuse and unwanted sex was something they did not have to put up with, and that they were now sure about being able to seek help from Savera and from the police. Women in the second focus group agreed that if they knew of a woman who was being controlled by a spouse or family member(s), they would talk to her and let her know where she could go for help

**(Outcomes 3, 4 and 5).**

### Female genital mutilation

The issues and health problems relating to FGM, as a specific form of violence against girls, generated a lot of questions from women in both groups. During both sessions, some women said they had not heard of FGM, and were surprised to learn that it happens in the UK. These comments were repeated in the focus groups, with participants expressing shock and surprise about this practice **(Outcomes 3 and 4).**

### Forced marriage

Participants in both focus groups said they were aware of forced marriage, but the sessions had taught them that this was illegal (Outcomes 3 and 4):

*The law against forced marriage surprised me. But it should have been made illegal decades ago, it's always been happening (FG 2).*

There was a deeper exploration of the meaning of forced marriage in the second awareness raising session, and the interactive discussion led to more precision of meaning. For example, women were asked what they thought was the difference between a forced and an arranged marriage, which revealed that some women thought a marriage was an arranged one even when a girl or woman had no choice in the matter. The facilitator was then able to make clear that what may be understood as an arranged marriage is actually a forced marriage if it is not based on a free choice of partner or indeed the choice of whether or not to marry at all. The post-session focus group revealed that all women clearly understood the distinction between forced and arranged marriage, and that they would seek advice from Savera if they became aware of anyone being at risk **(Outcomes 3, 4 and 5).**

## 'Honour'-based abuse

None of the women in the first session, which mainly comprised Chinese women, had heard of 'honour'-based abuse. When asked in the focus group what they had learned about this issue, the group was surprised that abuse within a family or other intimate setting could be perpetrated by anyone other than a partner. Women who took part in the second awareness raising session were already aware of the concept of 'honour', and how this often involved wider family members and communities. During this session, the facilitator talked through case studies relating to 'honour'-based abuse, which engaged women's attention as they were relevant to their own community norms and practices. This part of the session generated a lot of comments and questions that were connected to women's lived experiences.

While women in both focus groups displayed more understanding of 'honour'-based abuse after taking part in awareness raising sessions, Focus Group 2 showed that women had gained a far deeper insight. This was because the session content had been relayed in a way that was relevant to their lived experiences, and had offered them a safe environment to ask about and reflect on forms of behaviour that some had previously believed to be acceptable. Participants in this focus group said that the session had taught them that abuse carried out for the sake of 'honour' and as a means of enforcing strict codes of behaviour was wrong, illegal, and that they would seek help from appropriate agencies if they or someone they knew was experiencing this. All clearly understood that 'honour'-based abuse can be exerted through physical violence, emotional and sexual abuse, coercive control, isolation and imprisonment, forced marriage, and sometimes murder **(Outcomes 3, 4 and 5)**.

## Keeping safe

In both sessions, the facilitator explained about the One Chance Rule in the context of how individuals in communities should respond to someone who has disclosed that they are at risk of harmful practices. This included taking seriously what victims say; to never approach the family or members of the community; to never offer or attempt to mediate; and to inform the police to ensure the victim's safety. The women in the second session asked a lot of questions in relation to this, seeking to clarify how they should respond to a woman at risk, and how to respond if someone did not want the police informed. The facilitator stressed the need to call 999 in a dangerous situation, and that if any children were at risk of seeing or being at risk of HPs, the police and /or Savera must be informed. She explained how Savera works with the police to plan with the victim a way of safely leaving a dangerous situation, and how Savera supports clients throughout this process.

While the majority of women said they would seek help from Savera or the police if they were experiencing any of the forms of abuse that were covered in the sessions, the issue of language support was raised in both groups, with this being a particular concern for women from the Chinese community:

*I think they all think that because of the language barrier, they will be scared to tell them. So we think it's better to use Language Line, before they get the interpreter for them. If Language Line already there, they know what happens straight away. Maybe this process is more slower. Or have different people working there who speak different languages.*

In both sessions, the facilitator stressed that Savera's service is safe and confidential, that they use interpreters with women who do not speak English and ensure that the interpreter is safe, and that the client agrees before sharing any information through an interpreter.

## Speaking about domestic abuse and harmful practices

All focus group participants said that the events had made them aware and given them more understanding of domestic abuse and harmful practices such as forced marriage, 'honour'-based abuse and female genital mutilation. As a result of what they had learned, participants in both post-session focus groups felt more confident to name and talk about domestic abuse and harmful practices, with members of the second group being particularly emphatic that they would pass on the information to their daughters. This indicates that awareness will be passed on by word of mouth, which is an effective means of reaching marginalized and vulnerable women **(Outcomes 3, 4 and 5)**.

Women in both focus groups said they felt more confident about challenging views or information that excused or minimised domestic abuse or harmful practices:

*All said they would. They have confidence now to say something against it (FG 1).*

*We feel strong! (FG 2).*

Women in Focus Group 2 spoke of the need for more community-based activities to raise awareness and break the silence surrounding domestic abuse and harmful practices:

*More of these talks are needed in our community. Lots of women doesn't know about these things.*

*It's hard to trust people in the community, to speak about these things. We need more awareness. Let more people know. And maybe then they can speak out.*

While women felt women only groups were needed to provide a more comfortable environment for discussing issues relating to domestic abuse and harmful practices, there was consensus in the second focus group about the need to also engage with men, in order to educate them and to challenge violence and abuse.

## Recommending Savera

Women in both focus groups said they would recommend Savera to anyone experiencing domestic abuse, forced marriage, 'honour'-based violence or FGM. When asked if they themselves would feel confident about going to Savera should they need advice or support, all participants said they would **(Outcome 5)**:

### Making it easier for women and girls to come to Savera for help

There was general agreement that more leaflets about Savera were needed in GP surgeries and community centres. When they were asked if there was anything else they'd like to say, a woman in Focus Group 2 asked about volunteering with Savera. The facilitator replied that Savera is aiming to recruit community champions from different communities who speak a range of languages, who will be trained to work as interpreters and provide peer support. The interest in volunteering is clear evidence of **Outcome 5**: BME women and girls feel safe to assert their rights in relation to domestic abuse and harmful practices.

# CONCLUSIONS

This section summarises the key evaluation findings regarding the support service, schools-based awareness raising programme, and community engagement, in order to answer the evaluation questions:

- What impact has the project had on BME women and girls who have experienced domestic abuse and harmful practices?
- What impact has the project had in raising awareness of women and girls about domestic abuse and harmful practices, including those who are at risk?

## SUPPORT SERVICE

### Savera UK's support service has met all five evaluation outcomes

#### Holistic provision

When women and girls first arrive at Savera UK they are usually extremely frightened and traumatised. Most have escaped abusive and dangerous situations and are alone and destitute. It is often a pattern or a severe (but rarely one-off) incident of domestic or 'honour' abuse, and / or a threat of forced marriage, with sometimes the fear of being murdered by family members or a wider network of perpetrators, that has driven a woman to seek help. In response to multiple, complex, and long-term needs, Savera has developed an effective model of holistic, tailored, proactive and intensive provision for BME women and girls.

Throughout the course of the National Lottery funded project, the number of women and girls who were supported by the service rose from 18 to 226.<sup>150</sup> This demonstrates a significant demand for a service that specialises in supporting victims of what are often hidden crimes

A structure of support is created for each client, based on comprehensive risk and needs assessments. Savera's provision encompasses immediate and long-term safety planning, emotional support, practical support and advocacy, and links to specialist legal and immigration advice and representation. This is supplemented with empowerment work to raise awareness, and build or restore confidence, self-belief and skills needed for independent action and decision making.

Women identified being listened to, believed and understood, knowing that their support will continue for as long as needed, and being given hope for a future as components of the service that were vital for their security and mental wellbeing. Given that most of the women who Savera support do not have families and communities to turn to for help, Savera is vital as many women's only source of information, guidance and support. Savera drop-ins are essential for social integration, developing supportive friendships, and the acquirement of language and life skills.



Staff are skilled and competent when working with complex cases with multiple and fluctuating areas of risk and support needs. Savera is adept at identifying indicators and experiences of harmful practices that may be missed by mainstream organisations, which strengthens safeguarding responses. Support workers build trusting relationships so that women feel safe and comfortable when talking about what has happened to them. This helps to ensure all areas of need are covered, including issues that women may not have previously been able to name or speak about, allowing appropriate and comprehensive support to be put in place.

Savera helps women and girls who have been subjected to domestic abuse and harmful practices identify abuse and learn about their legal and human rights. This work involves raising women's awareness about community and cultural norms regarding gendered expectations and notions of shame and honour. In gaining awareness of their rights, women can envisage future possibilities and different lives. While there are sometimes barriers to women asserting their rights, most clients reported that Savera has given them confidence and necessary knowledge to pursue their rights to obtain protection from abuse and with regard to their children.

Savera's ongoing support and encouragement creates a strong base for women to take steps forward at a pace that is right for them, while providing a safety net should risks or support needs return. Savera acts as a long-term enabler by offering information and knowledge, and by helping women develop life-skills and make their own decisions, so as to obtain independence.

Savera has developed various ways for women's voices to be heard as users of the support service in order to find out what works well for them, and to identify gaps and areas of the service that could be developed. Listening to, and acting on, women's voices has enabled Savera to respond flexibly to service users voiced needs and provide more comprehensive provision.

## Staff capacity and funding

The high volume of referrals to Savera's support service demonstrates a growing need and demand for a service that meets the needs of BME women and girls experiencing, or at risk of, domestic abuse and harmful practices. Despite a rapidly increasing caseload, Savera treats all cases as 'live', as the risk of severe violence and murder is always present in the lives of the majority of their clients. Maintaining the current level of comprehensive support and meeting growing demand requires sustained funding and resources, particularly as the majority of cases involve complex, multiple needs.

## Culturally sensitive provision

Savera's culturally sensitive and informed provision is a crucial strength of the service. The organisation excels in delivering support to address the diverse and specific needs of BME women, including asylum seeking, refugee and migrant women. Staff are mindful of the barriers often faced by BME women when accessing mainstream services. Clients reported that they engage easily and fully with Savera because they feel understood, safe, and not judged, and have confidence that Savera understands the family, community and cultural contexts of violence and harmful practices.

Savera's drop-ins, English classes and confidence course that are offered as part of the support service have brought together women of different faiths and ethnicities, helping clients learn about different cultures, form friendships and integrate into wider society.

Savera uses carefully vetted interpreters when working with women and girls who need language support. The organisation is planning to recruit and train community champion volunteers who speak different languages as interpreters for their clients, which will help address the need for different languages as an internal part of the service.

## Women-only provision

Women-only services are safe, supportive, healing places, where women can more easily speak about gender oppression and violence, and learn about their rights as women and how to challenge attitudes and practices that underpin gender-based abuse. BME women-only services enable the specific and diverse needs of BME women to be met.

Women who use the support service said it was very important to them that Savera staff and events are women-only, for reasons of safety, cultural appropriateness, and feeling comfortable when disclosing and talking about abuse. Savera's support service has an all women staff team, and because of their clients' voiced needs for a women-only support service, directors are committed to maintaining this.

## Trauma-informed responses

Given that most of Savera's clients have experienced long-term abuse and control and that many are living with grief, loss, and the impacts of trauma, journeys towards 'recovery' and empowerment take time and are rarely straightforward. While most clients had benefitted immensely from Savera's support in terms of improved mental wellbeing and had taken significant steps to take control of their lives, some lacked confidence about their ability to move forward. This does not indicate a failure in reaching an ultimate goal of empowerment; evidence of these women's progress towards self-determination can be seen in intermediate steps and milestones. There is a strong body of evidence regarding the continuing support that is required to build relationships and trust when addressing the long-term impacts of abuse and trauma.<sup>151</sup> Some women were unable to move forward because of uncertainty and anxiety about their futures, particularly if they were waiting for decisions on their asylum or immigration applications.

Essential components of trauma-informed support were evident when women were discussing the support they had received from Savera, with most interviewees saying that emotional support was for them the most helpful aspect of the service. Women reported that being referred for counselling was helpful but waiting lists were long, and a number said that the emotional support they received from Savera was just as, and often more, helpful than external counselling.

## Partnerships and strengthening local responses

Savera's expertise in working with BME women at risk of harmful practices makes it an invaluable partner and resource for a range of local agencies. Both Merseyside Police Public Protection Unit and Liverpool Children's Safeguarding Unit reported that Savera is their 'go to' agency when they refer victims of harmful practices for ongoing support. Savera's provision of support prior to, during and after police involvement is vital in keeping women and girls safe, with Merseyside Police saying there are indications that victims of harmful practices are far less likely to return to abusive families when they are supported by Savera. The Children's Safeguarding Unit emphasised the importance of Savera's support in enabling girls and young women to move forward in their lives.

Senior and key professionals in voluntary sector and statutory services reported that Savera's advice and training on the nature, indicators and risks of harmful practices, the barriers that impede BME women being able to access support, and how to respond appropriately to victims has greatly improved partnership responses.

While Savera has been proactive and competent in delivering training to a range of local agencies, there are gaps in local statutory and voluntary sector knowledge about harmful practices. Savera's expertise as a specialist service enables them to identify indicators of harmful practices, and to intervene when these have been overlooked by other organisations. This has both ensured the safety of victims and reinforced vital messages about risk and necessary safeguarding responses.

There is significant value in Savera's partnerships with other gender and trauma-informed services. The partnership agreements between Savera and specialist local women's organisations allow Savera to draw on its own specific areas of expertise whilst forging effective partnerships to ensure the best long-term solutions for each client.

## Empowerment

Savera's clients are women and girls who have been subjected to ongoing abuse and oppression and, because of the impacts of trauma, insecure immigration status, racism and barriers to mainstream support, were largely cut off from the social, economic and emotional resources needed to exercise self-determination. Supporting victims of harmful practices in their journeys towards empowerment is a long process with many stages along the way. Savera's model of tailored, holistic and ongoing support addresses the harms caused by long-term abuse, building women's capacity for independent decision making and self-determination.

Savera's structured support and awareness raising with women who use their service enables many of their clients to understand that violence against women is wrong, and that they have equal human rights and the same rights as men to self-determination. Framing such discussions within a gendered analysis widens the focus from a view that sees harmful practices as a problem specific to certain cultures to an understanding that such practices are part of a broader societal problem of violence against women and girls and gender inequality.

Savera further raises women's and girls' consciousness through events that mark and celebrate women's achievements and strengths in a wider context. Survivors of harmful practices have come away from these events with powerful messages about women's value and capabilities that resonate for themselves and their daughters. Savera has developed ways for survivors' voices to inform and take central place in their wider social change work. Co-production of public awareness projects has facilitated the empowerment of a small number of clients by increasing their confidence and skills, valuing their expertise and specialist knowledge as survivors, and enabling them to exercise agency to bring about social change.

Through their belief in their clients' strengths and abilities, Savera has brought about transformations in how women see themselves and what is possible for them, encouraging and enabling them to make informed choices and live lives based on their own decisions. Savera UK's Domestic Abuse and Harmful Practices Engagement and Support Project has achieved its goal "to empower BME women and girls at risk of domestic abuse and harmful practices to take control of their lives".

# SCHOOLS-BASED AWARENESS RAISING PROGRAMME

Savera UK's awareness raising programme for schools draws on their expertise as a frontline specialist BME VAWG support service to teach girls about the nature of domestic abuse and harmful practices, including 'invisible' forms of abuse, such as coercive control, psychological abuse, and restriction of freedoms, and how to seek support and assert their rights. The programme provides schools with expert knowledge and a clear referral pathway to use should students require support. The evaluation of group sessions found that the programme has considerably increased the awareness of girls across a range of ethnic backgrounds, indicating that the sessions helped to lessen the fear, silencing and stigma that frequently surround these issues in all communities. The programme has met **Outcome 1** in the context of a holistic educational approach for girls at risk of domestic abuse and harmful practices.

In the context of gender empowerment, Savera educates girls about their rights to be heard, respected, have autonomy over their own bodies and be free to make their own choices in their lives and relationships. In order to fully meet guidance that FGM, HBA, FM and domestic abuse should be understood as forms of gender-based violence and as part of the wider inequalities experienced by women and girls,<sup>152</sup> there needs to be a clearer message that women and girls of all ethnicities experience multiple forms of abuse based on their gender, and that HBA, FM, and FGM, as forms of violence and abuse that disproportionately affect BME women and girls, occur in the context of gender inequality and oppression, rather than as a problem confined to specific communities and cultures.<sup>153</sup> When delivering mixed sex sessions, it is important to be aware that awareness raising with boys and young men tends to be more effective when it seeks to change gender roles and expectations and promote gender equality, rather than simply acknowledging gendered norms.<sup>154</sup>

Evidence for **Outcome 2**, that Savera UK has sought and responded to the views of BME girls by enabling their feedback to influence service delivery, has been found in several aspects of their work with young people:

- The delivery methods for school-based awareness raising sessions were based mainly on the views of young people who took part in a consultation focus group. This ensured the format reflected the preferences of young people.
- Teaching sessions were re-shaped to include more information about 'honour'-based abuse in response to a student's request. This stimulated discussion and provided students with a further opportunity to explore and ask questions about beliefs and customs that often underpin harmful practices.
- Savera UK's Youth Programme has fully met the criteria for what is widely held to be a model of effective practice in co-production with young people. Savera's involvement of young women and girls as peer educators and youth volunteers has shaped and directed an innovative and important aspect of their prevention work.

**Outcome 3** has been met, as the majority of respondents understood considerably more about the nature, features and extent of domestic abuse and harmful practices after delivery of the smaller group sessions. There is a need for more explanation in future sessions about the nature of coercive control and the legal protection available for victims. Most girls were extremely appreciative of the opportunity to learn about harmful practices that constitute specific types of VAWG, and there is evidence that this knowledge will be disseminated among their peers.

With regard to **Outcomes 4 and 5**, the evaluation has found that the awareness raising programme provided the majority of students with awareness of their rights, and equipped them with confidence and knowledge to resist abuse and violence and seek safety and support for themselves and others should they experience it. 'Honour'-based abuse and FGM were the issues that appear to have had the greatest impact in raising awareness both of their existence and of associated legal rights and protections, although more clarification on the illegality of HBA and FGM may be needed. Overall, there is strong evidence of most girls understanding their rights and how to assert these as a result of the sessions, with some saying knowing how to respond to abuse was the most important thing they had learned.

## COMMUNITY ENGAGEMENT

Savera's community engagement and awareness raising is most effective when it is tailored to specific communities of women, whilst drawing links to the wider scale of gender-based violence. Interactive methods that draw on examples, case studies and community norms raise awareness about different forms of abuse in a way that is non-judgemental and relevant to women's lived experiences. This helps to fix knowledge about what constitutes domestic abuse and harmful practices, rights to protection, routes to safety and legal remedies that is tangible, relatable and trustworthy. This kind of practical knowledge is particularly suited to being passed on by word of mouth, which is a powerful tool for raising awareness among marginalized and vulnerable women. Community engagement has met **Outcomes 3,4 and 5**.

After considerations regarding confidentiality and safety have been fully addressed, Savera's aim to recruit and train women from local BME communities as community champions has the potential to:

- Increase the number of languages spoken within the organisation
- Provide bridges between Savera and local BME communities to help more women feel safe to seek support and assert their rights
- Foster peer support
- Enable the views and ideas of women in local communities to be fed back to Savera to influence service development
- Develop the confidence and skills of community champions
- Lead to the empowerment of women from marginalised communities.



# RECOMMENDATIONS

## SUPPORT SERVICE

### Holistic provision

- The National Lottery project has demonstrated the significant need for Savera's support service. Furthermore, given that the majority of Savera's clients are at life-long risk of severe violence and murder by multiple perpetrators, there is a vital need for ongoing, time-unlimited support for all clients who require this.
- Culturally sensitive and informed provision should remain a core aspect of the support service. BME women and girls face barriers to mainstream services and require specialist support for the types of violence and abuse that disproportionately affect them, e.g. 'honour'-based abuse and forced marriage.
- Continue, and develop, partnership agreements with other services, particularly those that can offer gender, culturally and trauma-informed therapies. This will enable Savera to offer a holistic service to clients while pooling knowledge and expertise among organisations with shared values and vision in order to achieve the best outcomes for each client.
- Explore ways of promoting peer support among clients who no longer require a high level of support and who have developed sufficient confidence to encourage mutual support, reduce social isolation, and increase autonomy, skills and strengths.
- Explore the possibility of recruiting volunteers to develop website content in different languages.

### Gender informed provision and intersectionality

- Protect women-only provision to meet the voiced needs of clients, and to ensure safe, healing and empowering environments to redress the harms and impacts of gender-based violence and gender inequality.<sup>155</sup>
- While it is vital that both female and male clients receive a comprehensive package of support according to their needs, a gendered analysis is necessary to understanding oppression because of being female, and the different contexts and experiences of harmful practices for women and men, in order to deliver the most appropriate responses.
- Training new staff and volunteers on the universality of gender specific harms and violence against women and girls as well as forms of violence and harmful practices that disproportionately affect BME women and girls would be useful in strengthening gender-informed responses.
- As BME women and girls' experiences of gender inequality intersect with 'race' discrimination,<sup>156</sup> it is essential that Savera continues to respond to intersecting forms of oppression experienced by many of their clients.

### Amplifying the voices of women and girls

- Expand engagement with clients in ways that increase their confidence and skills, and involve them as advisers and equal partners in shaping and developing services as well as with projects that aim to raise public awareness and influence change.
- In addition to regular focus groups, develop questionnaires to enable clients to feedback anonymously their ideas and views for how the service can best be designed to meet their needs.
- If peer support groups are developed look at how these can sometimes be run as peer led focus groups to feedback ideas for service development to Savera. Peer facilitators should be trained and supported in running focus groups.
- Consider forming and supporting a survivors' group to respond to local and national consultations on issues relating to violence against women and girls and the needs and experiences of BME women.

### Staff capacity and funding

- Sustainable funding is needed to ensure there are a sufficient number of staff to meet the growing demand for Savera's support service. This is particularly important given the chronic underfunding of BME violence against women and girls organisations.<sup>157</sup>
- Funders should be aware of the need for time-unlimited support and case allocation to an individual support worker to facilitate therapeutic relationships and enable trauma-informed support and ongoing advocacy.
- Consider investing in training in gender and trauma-informed practice for new staff, particularly those working in front-line support roles.<sup>158</sup>
- Create an organisational policy on manageable and appropriate caseloads.
- The Board should continue to regularly review caseloads, the nature and complexity of the work, including risk, protection and cultural needs, and staff wellbeing.
- If funding for a volunteer co-ordinator post is obtained, develop the volunteer programme with regard to volunteer training and support and supervision arrangements, to enable volunteers to take on peer-support or befriending roles and low-level case work.
- If the volunteer role is expanded to include community champions who may act as interpreters for clients, this would require attention to confidentiality and safety, the degree to which clients would feel safe and comfortable with community interpreters, and how clients would be offered a choice with such support.

## Partnership working

- Produce a good practice briefing for partner agencies, detailing the nature, indicators and risks of harmful practices, the barriers that impede BME women's access to support, how professionals should respond to victims, and Savera's referral pathway. The briefing should clarify that women and girls of all ethnicities experience multiple forms of abuse based on their gender, and that 'honour'-based abuse and forced marriage are forms of violence and abuse that disproportionately affect BME women and girls which, like FGM, occur in the context of universal gender inequality and oppression, rather than as a problem confined to specific communities or cultures. Information in the briefing should be supported by references.
- Build on the programme of professional development training for frontline professionals on the nature, indicators and risks of harmful practices, and the additional barriers to support faced by BME women. Such training could be promoted as being grounded in the specialisms and expertise developed by Savera through working holistically with BME women and girls at high risk and with complex needs, with evidence of Savera's proven success in empowering women. The training could be supplemented with the good practice briefing.
- Strengthen links with further and higher education counselling services, to raise awareness of Savera and issues relating to harmful practices.
- Relationship building may be promoted through:
  - Regular meetings between agencies.
  - Giving short presentations about Savera at a partner agencies' team meetings (this might be undertaken by Savera directors).
  - Protecting staff time to attend multi-agency meetings and networking events.
  - Exploring the potential of training swaps between agencies.

## SCHOOLS-BASED AWARENESS RAISING PROGRAMME

- Savera and Brook's schools-based programme should continue in both small group session and assembly formats, to ensure that education about domestic abuse and harmful practices, the meaning of consent, women and girls' rights to bodily autonomy and self-determination, and legal rights and protections reaches more girls and young women.
- Because the majority of focus group participants said they would prefer sessions on domestic abuse and harmful practices to be single sex, and as the female only school-based sessions provided safe and supportive spaces to discuss these issues, consideration should be given as to whether single sex groups would be more conducive to empowering and amplifying the voices of girls and young women in future engagement and education activities.

- In mixed-sex awareness raising work, be mindful of gender power dynamics, which may silence girls. Within mixed-sex sessions there should be opportunities for smaller girl-only or boy-only groups and pairings. Where mixed-sex sessions are delivered, it is good practice to run concurrent female-only sessions.<sup>159</sup>
- Consider providing male-only spaces for boys and young men to discuss their own experiences of harmful practices, and explore pressures to conform to traditional ideas of masculinity.<sup>160</sup> Awareness raising with boys and young men about violence and abuse tends to be more effective when it seeks to challenge gender roles and expectations and promote gender equality, rather than simply acknowledging gendered norms.<sup>161</sup>
- There is a need to include more explanation about the nature of coercive control and the legal protection available for victims.
- The laws relating to HBA and FGM need more clarification; it may be helpful to frame this information within a discussion on consent, women's and girls' autonomy, and rights to bodily integrity and self-determination.<sup>162</sup>
- The sessions should include a more precise explanation about the links between gender inequality and violence. This would provide the context for a clear message that women and girls of all ethnicities experience multiple forms of abuse, control and victimisation based on their gender, and that HBA, FM, and FGM, as forms of violence and abuse that disproportionately affect BME women and girls, occur in the context of gender inequality and oppression, rather than as a problem confined to specific communities and cultures.<sup>163</sup> This could be accompanied by a slide showing the UN Commission on the Status of Women definition of VAWG which creates a framework for this key message.
- More information about where and how to disclose abuse, and what they can expect to happen after a disclosure, may increase young people's confidence to ask for help and support.
- Consider producing a Savera UK information leaflet for parents about the session content and the importance of raising awareness of young people. This could be produced in partnership with Brook, with details of both organisations, informing parents how they can ask questions and obtain further information.
- The Savera Youth Programme may potentially be developed to provide opportunities for co-production and peer education as part of the school-based awareness raising programme.

# COMMUNITY ENGAGEMENT

- Continue running small women-only sessions in local communities to raise awareness of domestic abuse and harmful practices. These provide safer, more comfortable environments for women to talk about issues that are likely to be taboo, distressing, and connected to notions of shame and 'honour'. Women, particularly those who are marginalised and vulnerable, may be silenced in the presence of men - which would counteract the aim of giving women a voice to explore and ask questions about different forms of abuse.
- Community engagement with men should aim to challenge gender roles and expectations and promote gender equality. This would need to be a separate, fully resourced project that would not detract from Savera's core activities with women.
- Continue to tailor community engagement and awareness raising to specific communities, while also ensuring that women are provided with a wider view of domestic abuse and different harmful practices, and are able to learn that abuse is prevalent within all cultures as gendered forms of abuse linked to wider inequalities experienced by women and girls.
- Support and train community champions to develop peer-support groups, with the aim of empowering women to build confidence and skills, and to 'reinvest' what they have learned from Savera for their own and others' benefit.

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## ABBREVIATIONS



# ABBREVIATIONS

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**BME** Black and Minority Ethnic

**FGM** Female genital mutilation

**FM** Forced marriage

**HBA** ‘Honour’-based abuse

**HBV** ‘Honour’-based violence

**HP** Harmful practice

**MARAC** Multi-Agency Risk Assessment Conference

**PTSD** Post-Traumatic Stress Disorder

**SW** Support Worker

**VAWG** Violence against Women and Girls



## APPENDICES

# APPENDIX 1:

## First interview guide for clients of the support service

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*Thank you so much for agreeing to be interviewed. This interview is for an evaluation of Savera's support service.*

*The questions will be to find out about how Savera has helped you, and what you have learned about issues relating to domestic abuse and harmful practices. You don't have to talk about what has happened to you. I realise that these topics may be upsetting for you to talk about and if you feel in any way upset you can stop the interview at any time. Also, if you don't want to answer a particular question, that's fine. The interview will take about an hour and a half. There are no right or wrong answers to the questions, I'm just interested in your views and experience of the service. If you don't understand a question, please ask me to explain more fully.*

*I would prefer to record the interview as it makes it much easier to be able to accurately refer to what you say.*

*If I quote or refer to anything you have said in what I report I will use the other name you have chosen. This means there is no way anyone will know who took part and you will not be personally identified at all in this evaluation.*

*I just need to check that you are happy and comfortable with what I have just explained, and that you consent to being interviewed.*

1. Can you tell me how you found out about Savera?
2. How long have you been coming to Savera?
3. Can you tell me a little bit about how Savera has helped you?
4. How do you feel about the way the sessions were carried out?
5. Do you feel that the Savera service has responded to your specific cultural needs? (How?)
6. If not, how could the service be improved in this way?



- 7. How has Savera helped you with your emotional needs and confidence?
  - Relocation and social isolation
  - Disconnection from family and community
  - Meeting other women through Savera activities
- 8. Would you say you feel safer after coming to Savera?
  - Has the risk lessened?
  - Harm been prevented?
  - Any other actions to achieve safety and security?
- 9. Do you prefer Savera to be a women-only service?
- 10. How do you feel about Savera referring you to other services?
- 11. Would you say that all your needs have been met?  
(If yes: how? If no: what more could Savera do to help you? Aftercare?)
- 12. What are your next steps / how do you plan to move forward now?  
(Continue with support? / social interaction / befriending other women / education / other.)

Just thinking about what you have learned from Savera:

- 13. Has Savera helped you to understand a little bit more about domestic abuse?
- 14. Has Savera helped you to understand a little bit more about HBA/ FM?
- 15. Thank you. Can you tell me if you see domestic abuse / HPs as wrong and a crime?
- 16. Do you think other women from your community would try to find help when they experience domestic abuse or HPs?
- 17. Would you recommend Savera to anyone experiencing DA/ HBV / FM?
- 18. Would you pass on what you have learned from Savera to other women/girls in your community?  
[what? how?]
- 19. Do you have any ideas about how Savera can improve things to make it easier for women to come to them for help?
- 20. If not already covered: what was the most helpful thing that Savera has done for you?

# APPENDIX 2:

## Client questionnaire





Questions about #Speaking Out / Breaking the Silence projects

- These questions are part of an evaluation of Savera’s support service. We want to find out how the service has helped women and girls. We are interested in your experience of taking part in Savera’s project work.
- We do not need your name. You will not be identified in any way.
- You don’t have to answer any questions that you don’t want to.
- The answers you give will be used in reports for Savera’s funders and other organisations who are interested in Savera’s work.
- You can write as little or as much as you wish in the boxes.
- If you choose not to take part that’s OK!

#Speaking Out / Breaking the Silence projects





- 1. Which of the above projects did you take part in?
- 2. Can you tell me a bit about how you were involved?

3. Did you feel that your contribution was listened to and treated with respect by everyone else in the project team? (Please tick one box)

|  |  |   |   |
|--|--|---|---|
| Yes – a lot<br> | Yes – quite a bit<br> | A little bit<br> | No, not really<br> |
|--|--|---|---|





Please say a bit more about this here:

4. Did Savera use your knowledge as a survivor of harmful practices to add to or change their work on the project(s) you took part in?

|   |   |  |  |
|---|---|--|--|
| Yes – a lot<br> | Yes – quite a bit<br> | A little bit<br> | No, not really<br> |
|---|---|--|--|





Please say a bit more about this here:

5. Has being involved made you feel more confident?

|  |  |   |   |
|--|--|---|---|
| Yes – a lot<br> | Yes – quite a bit<br> | A little bit<br> | No, not really<br> |
|--|--|---|---|

Please say a bit more about this here:

6. Have you gained more skills as a result of taking part?

|  |  |   |   |
|--|--|---|---|
| Yes – a lot<br> | Yes – quite a bit<br> | A little bit<br> | No, not really<br> |
|--|--|---|---|

Please say a bit more about this here:

7. What else was important to you about taking part?

Thank you for your help!

# APPENDIX 3:

## Interview guide, service management

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### Support service

1. Were / how were you involved in setting up the support service?
2. What kind of support does the support service offer to women and girls who are at risk of DA /HPs?
3. What are the specific features of the service that are not found in other local DA services?
4. How far do you think that the one-to-one service has enabled users to talk about their experience and to name what happened?
5. How effective is your service in improving the confidence and self-esteem of your service users?
6. Can you tell me about the ways in which the service meets different cultural needs?
7. Can you tell me about fluctuating risks for SUs and how cases are reopened or kept open-ended?
8. How do you think the service can help in reducing the prevalence of / repeated incidences of domestic abuse / HP?
9. Do you liaise with other domestic abuse agencies if additional DA support is identified that Savera currently does not provide? (e.g. MARAC for high risk cases)
10. Can you explain how Savera helps women access services such as housing, counselling, immigration advice? Are there any barriers that make this difficult, and can these be overcome?
11. Are there particular ways in which the service helps women to become aware of their rights with regard to domestic abuse / HPs?
12. Do you have any examples of your service users asserting their rights / taking steps to ensure they and their children can live in safety?
13. Are there any identifiable gaps in the service right now? How would you like to see the service develop?

### Volunteers and peer support

14. Peer support & volunteers
  - What are their roles in one-to-one support service and awareness raising?
  - What kind of training programme is provided for volunteers?
  - How are volunteers and peer mentors supported and supervised?
  - Any other considerations?

### Partnership working

15. Which organisations do you work with & how? How do you see this partnership work expanding?
16. How do you communicate the needs of service users to other service providers and decision makers?
17. Do all partners work to the same model with regard to risk assessment / identifying service need?
18. Does your work with different agencies make a difference to how other service providers meet the needs of women who have experienced domestic abuse / HPs?

### Community awareness raising

19. Can you tell me a little bit about the school based awareness raising work?
20. Can you tell me about how Savera currently works with women in local communities?
21. How successful do you think these activities have been?
22. How do you see this work expanding?
23. Have you received any referrals to the Savera service as a result of AR activities in schools or local communities?
24. How do you think Savera's school and community based AR work can help in reducing the prevalence of / repeated incidences of domestic abuse / HP?



# APPENDIX 4:

## Interview guide, Savera support workers

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1. How do women access Savera UK's support service?
2. What kind of support does the service offer to women and girls who are at risk of DA /HPs?
3. How far do you think that the service has enabled users to talk about their experience and to name what happened to them? What is particularly effective in this respect?
4. How effective is your service in improving the confidence and self-esteem of your service users?
5. Can you tell me about the ways in which the service meets different cultural needs?
6. How do you think the service can help in reducing the prevalence of / repeated incidences of domestic abuse / HP?
7. Can you tell me a bit about fluctuating risks for SUs and if cases are reopened or kept open-ended?
8. Do you liaise with other domestic abuse agencies if additional DA support is identified that Savera currently does not provide?
9. How do you help women access wider services such as housing, counselling, immigration advice? How has the service helped users access other services? Are there any barriers that make this difficult, and can these be overcome?
10. Are there any particular ways in which the service helps women to become aware of their rights with regard to domestic abuse / HPs?
11. Do you have any examples of your service users asserting their rights / taking steps to ensure they and their children can live in safety?
12. Are there any identifiable gaps in the service right now? How would you like to see the service develop?
13. Do you help women access training and employment?
14. How do you communicate the needs of service users to other service providers and decision makers?
15. Does this make a difference to how other service providers meet the needs of women who have experienced domestic abuse / HPs?

# APPENDIX 5:

## Group interview guide, Savera UK directors

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1. How far do you feel the National Lottery project has achieved its desired outcomes?
2. Any notable successes?
3. Sustainability / funding - There is significant demand for the support service with many clients requiring longer term support. Have you secured funding that will ensure there is sufficient capacity to meet continuing need?
4. How do you envisage being able to keep staff workload to manageable levels?
5. Staff turnover
  - Has this been a problem?
  - What are the causes? Pressure/ workload/ short-term contracts?
  - Has any expertise been lost?
  - Any issues recruiting?
  - Women only staff – how important is this?
6. How will the development of the service reflect feedback from service users and any emerging needs of BME women and girls?
  - One-to-one service
  - Awareness work / focus groups in local communities
  - Volunteer programme
  - Befriending / buddying
  - Service users at Board Level
  - Service user support group
7. Volunteers
  - What are their envisioned or possible roles in one-to-one and awareness raising?
8. How [else] would you like the service to develop?
  - Counselling service
  - Training other agencies
  - Community AR
  - More staff if funding is available?
  - Other areas

# APPENDIX 6:

## Questions to evaluate schools-based awareness sessions

Pre-session questions

1. Have you heard of ...

|                                  |                           |                          |
|----------------------------------|---------------------------|--------------------------|
| Domestic abuse                   | <input type="radio"/> yes | <input type="radio"/> no |
| 'Honour'-based violence?         | <input type="radio"/> yes | <input type="radio"/> no |
| Forced marriage?                 | <input type="radio"/> yes | <input type="radio"/> no |
| Female Genital Mutilation (FGM)? | <input type="radio"/> yes | <input type="radio"/> no |

End of session questions

2. Has coming to this session given you more understanding of what is domestic abuse and harmful practices such as forced marriage, 'honour'- based abuse and FGM?  
(1 = not at all; 2 = a bit; 3 = quite a lot; 4 = very much).

1 2 3 4

3. How much of what was talked about in this session did you already know?  
(1 = not at all; 2 = a bit; 3 = quite a lot; 4 = very much).

1 2 3 4

4. To what extent do you feel confident to name and talk about domestic abuse and harmful practices as a result of this session?  
(1 = not at all; 2 = a bit; 3 = quite a lot; 4 = very much).

1 2 3 4

5. Has this session given you a better understanding of what to do, and who can help, if you or someone you know experiences domestic abuse or harmful practices such as forced marriage, 'honour' based violence or FGM?  
(1 = not at all; 2 = a bit; 3 = quite a lot; 4 = very much).

1 2 3 4

6. To what extent would you now feel confident to seek help if you or someone you know experiences domestic abuse and harmful practices?  
(1 = not at all; 2 = a bit; 3 = quite a lot; 4 = very much).

1 2 3 4

7. Would you pass on what you have learned from this session to other women and girls?

☐ yes ☐ no

Can you say why you answered yes or no to the above question? (Group discussion)

# APPENDIX 7:

## Focus group guide for community sessions

Thank you all for coming to this focus group today.

I am doing the focus group for Savera, which is a local organisation that gives advice and support to women who are experiencing domestic abuse and HPs.

Savera are currently running a project to raise awareness of domestic abuse and HPs in different communities. This focus group will help us to find out how successful this work is over the next two years.

We will be asking a number of questions about this topic. We know that these are difficult issues to talk about and we want you feel as comfortable and safe here as possible. To do this, we have come up with a short list of 'rules' to help the whole group. You may have some ideas to add to this.

- Women can choose to be called by a name other than their own.
- We will not use last names
- Everything said in the room stays here and should in no circumstances be talked about outside the group.
- Speak one at a time, please do not interrupt while another person is speaking
- Please show respect for others, and other's experiences
- If you need to talk about personal experiences, please speak to a Savera member of staff or your support worker at the end of the focus group
- If you need to leave the group, please feel OK to do so.

Has everybody read the information sheet and signed the consent form?

1. Has this event given you more understanding of domestic abuse and harmful practices such as forced marriage, 'honour'-based violence and female genital mutilation (FGM)?
2. Do you feel more confident to name and talk about domestic abuse and harmful practices as a result of today's event?
3. Was there any information that you didn't know, or that surprised you?
  - Different kinds / prevalence of abuse
  - FM, HBV, FGM, coercive control is a crime
  - Rights to report to the police
  - Multiple perpetrators
  - Anything else?
4. Do you understand a bit more about how the idea of honour can be used to pressure or threaten women and girls to behave in a certain way?
5. Has this event given you a better understanding of what to do, and who can help, if you or anyone you know experiences domestic abuse or harmful practices such as forced marriage, 'honour'- based violence or FGM?
6. Would you pass on what you have learned at this event to other women and girls?
7. Do you think you would now be able to challenge any views or information that may try to justify or minimise domestic abuse or harmful practices such as forced marriage, 'honour' based violence or FGM?
8. Would you recommend Savera to anyone experiencing domestic abuse, forced marriage, 'honour'- based violence or FGM?
9. Do you have any ideas about how we can improve things to make it easier for women & girls to come to Savera for help?



# APPENDIX 8:

## Interview guide for partner organisations

---

1. Can you give me an overview of your role, including your contact with women who you have referred to (or from) Savera?
2. Do you feel more confident to name and talk about domestic abuse and harmful practices as a result of today's event?
3. Was there any information that you didn't know, or that surprised you?
  - Different kinds / prevalence of abuse
  - FM, HBV, FGM, coercive control is a crime
  - Rights to report to the police
  - Multiple perpetrators
  - Anything else?
4. Do you understand a bit more about how the idea of honour can be used to pressure or threaten women and girls to behave in a certain way?
5. Has this event given you a better understanding of what to do, and who can help, if you or anyone you know experiences domestic abuse or harmful practices such as forced marriage, 'honour'- based violence or FGM?
6. Would you pass on what you have learned at this event to other women and girls?
7. Do you think you would now be able to challenge any views or information that may try to justify or minimise domestic abuse or harmful practices such as forced marriage, 'honour' based violence or FGM?
8. Would you recommend Savera to anyone experiencing domestic abuse, forced marriage, 'honour'- based violence or FGM?
9. Do you have any ideas about how we can improve things to make it easier for women & girls to come to Savera for help?
10. [If so] What was the training? How was it beneficial?
11. What lessons can be learned from the way Savera operates for your organisation? E.g:
  - Understanding FM/HBA/ FGM
  - Risk and HPs
  - Identifying risks and how to intervene in cases where there is HBA/ FM/ FGM
  - Multiple perpetrators
12. How effective is your partnership with Savera, and are there any ways this could be improved?

# APPENDIX 9:

## School-based awareness raising sessions delivered as part of the project

|           | Session type      | Numbers                                    | Ethnicity   |
|-----------|-------------------|--|---|
| School 1  | Small group       | 9 girls                                    | 5 students from BME backgrounds                         |
| School 2  | Small group       | 13 girls                                   | 2 students from BME backgrounds                         |
| School 3  | 2 assemblies      | 112 Year 10 girls;<br>111 Year 11 girls    | 8 students from BME backgrounds                         |
| School 4  | Small group       | 9 girls                                    | 2 students from BME backgrounds                         |
| School 4  | 2 assemblies      | 152 Year 9 girls;<br>126 Year 10 girls     | Approximately 35% of students from BME backgrounds      |
| School 5  | Small group       | 15 girls                                   | 4 students from BME backgrounds                         |
| School 6  | Assembly          | 130 Year 8 girls                           | Approximately 20 – 25% of students from BME backgrounds |
| School 7  | 5 assemblies      | 4 groups of 20 girls;<br>1 group 200 girls | 13 students from BME backgrounds                        |
| School 8  | Assembly          | 70 girls, 97 boys                          | 3 students from BME backgrounds                         |
| School 9  | Assembly          | 169 girls, 148 boys                        | Approximately 50% of students from BME backgrounds      |
| School 10 | 5 assemblies      | 710 girls, 727 boys                        | 20 students from BME backgrounds                        |
| School 11 | No data available |  |   |
| School 12 | No data available |  |   |

# APPENDIX 10:

## Community-based events with women from marginalised communities delivered as part of the project

|         |                   |                 |                 |   |
|---------|-------------------|-----------------|-----------------|---|
| Event 1 | 13 women present. | Chinese         | Mixed age group | The event was translated into Chinese Cantonese |
| Event 2 | 9 women present.  | South Asian     | Mixed age group | The event was translated                        |
| Event 3 | 8 women present   | Mixed ethnicity | Mixed age group |   |
| Event 4 | 20 women present  | Mixed ethnicity | Mixed age group |   |





## FOOTNOTES



# FOOTNOTES

<sup>1</sup>In the context of Savera UK’s work, harmful practices most often take the form of forced marriage (FM), ‘honour’-based abuse (HBA) and female genital mutilation (FGM).<sup>\*</sup> [\(Pg 6\)](#)

<sup>2</sup>To reflect how it is usually known by clients and partner organisations, Savera UK will also be referred to as ‘Savera’ throughout this report. [\(Pg 7\)](#)

<sup>3</sup>Hall, S.-M. et al. (2017) *Intersecting Inequalities: The impact of austerity on Black and Minority women in the UK* Women’s Budget Group / RECLAIM / Coventry Women’s Voices; Wakefield, H. (2019) *Triple Whammy: The impact of local government cuts on women*. Women’s Budget Group. [\(Pg 9\)](#)

<sup>4</sup>Stark, E. (2013) ‘Coercive Control’ in Lombard, N. and McMillan, L. (eds) *Violence Against Women: Current Theory and Practice in Domestic Abuse, Sexual Violence and Exploitation*. Jessica Kingsley. [\(Pg 10\)](#)

<sup>5</sup>To reflect how it is usually known by clients and partner organisations, Savera UK will also be referred to as ‘Savera’ throughout this report. [\(Pg 12\)](#)

<sup>6</sup>Drawn up with reference to Action Aid UK (2012) *A Theory of Change for Tackling Violence Against Women and Girls*. [\(Pg 14\)](#)

<sup>7</sup>AHA Foundation (2016) *An Interview With Nazir Afzal, UK’s Chief Executive of the Association of Police and Crime Commissioners, on Criminalisation of Forced Marriage*; HM Government (2016) Ending Violence Against Women and Girls Strategy 2016 – 2020; Larasi, M. and Jones, D. (2017) *Tallowah: a briefing paper on black and ‘minority ethnic’ women and girls organising to end violence against us*. Imkaan; McNeish, D. and Scott, S. (2014) *Women and Girls at Risk: Evidence Across the Lifecourse*. DMSS Research.

<sup>8</sup>UN Women (2013) *Elimination and prevention of all forms of violence against women and girls. Commission on the Status of Women: Agreed Conclusions* p.2.

<sup>9</sup>Home Office (2016) *National Statement of Expectations for Violence Against Women and Girls services*. [\(Pg 16\)](#)

<sup>10</sup>Anitha, S. (2011) ‘Legislating Gender Inequalities: The Nature and Patterns of Domestic Violence Experienced by South Asian Women With Insecure Immigration Status in the United Kingdom’, *Violence Against Women* 17(10), 1260–1285; Crenshaw, K. (2003) ‘Traffic at the Crossroads: Multiple Oppressions’ in Morgan, R. (ed.) *Sisterhood is Forever: The Women’s Anthology for a New Millenium*.

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<sup>14</sup>Gill, Aisha K. (2013) ‘Intersecting Inequalities. Implications for Addressing Violence Against Black and Minority Ethnic Women in the United Kingdom’ in Lombard, N. and McMillan, L. (eds) *Violence Against Women: Current Theory and Practice in Domestic Abuse, Sexual Violence and Exploitation*. Jessica Kingsley.

<sup>15</sup>UN (2009) Good Practices in Legislation on ‘Harmful Practices’ against Women, Expert group meeting organized by United Nations Division for the Advancement of Women, United Nations Economic Commission for Africa, New York; UN, Division for the Advancement of Women, Department of Economic and Social Affairs, cited in Roy, S., Ng, P. and Larasi, I. (2011) *The Missing Link: a joined up approach to addressing harmful practices in London*. Imkaan, p. 48

<sup>16</sup>Begikhani, K., Gill, A., Hague, G., Ibraheem, K. (2010) *Honour-based Violence and Honour-based Killings in Iraqi Kurdistan and in the Kurdish Diaspora in the UK*. University of Bristol, Roehampton University and Kurdish Women’s Rights Watch; Gill, Aisha K., Strange, C., and Roberts, K. (eds) (2014) *‘Honour’ Killing and Violence*. Palgrave Macmillan.

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<sup>19</sup>Järvinen, J., Keil, A. and Miller, I. (2006) op. cit.

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<sup>22</sup>Allen, M. (2013) *Social Work and Intimate Partner Violence*. Routledge.

<sup>23</sup>Järvinen, J., Keil, A. and Miller, I. (2006) op. cit.; Kelly, L., Sharp, N. and Klein, R. (2014) *Finding the Costs of Freedom: How women and children rebuild their lives after domestic violence*. CWASU.

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<sup>25</sup>Gill, Aisha K. (2013) ‘Intersecting Inequalities. Implications for Addressing Violence Against Black and Minority Ethnic Women in the United Kingdom’ in Lombard, N. and McMillan, L. (eds) *Violence Against Women: Current Theory and Practice in Domestic Abuse, Sexual Violence and Exploitation*; Payton, J. (2014) “‘Honor”, Collectivity, and Agnation: Emerging Risk Factors in ‘Honor’-Based Violence’, *Journal of Interpersonal Violence*, 29(16), 2863–2883.

<sup>26</sup>Iranian and Kurdish Women’s Rights Organisation (IKWRO) Nearly 3000 cases of ‘honour’ violence every year in the UK; Gill, Aisha K. (2013) op. cit.

<sup>27</sup>Hester, M. et al. (2015) *Victim/survivor voices – a participatory research project Report for Her Majesty’s Inspectorate of Constabulary Honour-based violence inspection*. University of Bristol.

<sup>28</sup>Anitha, S. (2011) Legislating Gender Inequalities: The Nature and Patterns of Domestic Violence Experienced by South Asian Women With Insecure Immigration Status in the Unite Kingdom. *Violence Against Women*, 17(10) 1260–1285; Payton, J. (2014) op. cit.

<sup>29</sup>AHA Foundation (2016) *An Interview With Nazir Afzal, UK’s Chief Executive of the Association of Police and Crime Commissioners, on Criminalisation of Forced Marriage*; Hester, M. et al. (2015) op. cit.; Idriss, M. M. (2017) ‘Not domestic violence or cultural tradition: is honour-based violence distinct from domestic violence?’, *Journal of Social Welfare and Family Law*, 39(1), 3–21.

<sup>30</sup>Hester, M. et al. (2015) op. cit.; Pugh, R. ‘Call to arms in battle to protect women against honour-based abuse’, *The Guardian*, 14/7/15.

<sup>31</sup>Ertürk, Y. (2009) ‘Towards a post-patriarchal gender order: Confronting the universality and the particularity of violence against women’, *Sociologisk Forskning*, 46(4), 58–67. p.61.; Gill, Aisha K. (2013). op. cit.

<sup>32</sup>Gill, Aisha K., Strange, C. and Roberts, K., (2014) op. cit.

<sup>33</sup>HMIC (2015) *The depths of dishonour: Hidden voices and shameful crimes: An inspection of the police response to honour-based violence, forced marriage and female genital mutilation*.

<sup>34</sup>Crown Prosecution Service, *Violence Against Women and Girls Report 2017-18*.

<sup>35</sup>Snowden, K. ‘Honour Based Violence Reports To Police Reveal Only Minority Of Alleged Crimes Result In Charge’ *Huffington Post*, 12/11/16.

<sup>36</sup>Dyer, E. (2015) *Britain’s Forgotten Women: Speaking to Survivors of ‘Honour’-Based Abuse*. The Henry Jackson Society. [\(Pg 18\)](#)

<sup>37</sup>Gill, Aisha K. (2013) op. cit.

<sup>38</sup>Muslim Women’s Network information leaflet (2016) *Forced Marriage and Honour Based Violence is Against the Law*.

<sup>39</sup>Gill, Aisha K. (2013) op. cit.

<sup>40</sup>Larasi, M., Roy, S., Imkaan and Tweeddale, R. (2014) *‘This is not my destiny.’ Reflecting on responses to forced marriage in England and Wales*. Rights of Women / IMKAAN; MWN: *Forced Marriage and Honour Based Violence is Against the Law*.

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<sup>42</sup>Anitha, S. and Gill, A. (2009) Coercion, consent and the forced marriage debate in the UK. *Feminist Legal Studies*, 17(2), 165–184; Larasi, M., Roy, S., Imkaan and Tweeddale, R. (2014) op. cit.; Roy, S., Ng, P. and Larasi, I. (2011) op. cit.

<sup>43</sup>Anitha, S. (2011) op. cit.; Hester, M. et al. (2015) op. cit.

<sup>44</sup>Anitha, S. (2011) op. cit.

<sup>45</sup>Roy, S., Ng, P. and Larasi, I. (2011) op. cit.; Larasi, M., Roy, S., Imkaan and Tweeddale, R. (2014) op. cit.; MWN (2016) *Forced Marriage and Honour Based Violence is Against the Law*.

<sup>46</sup>Larasi, M., Roy, S., Imkaan and Tweeddale, R. (2014) op. cit.

<sup>47</sup>*Rights of Women* (2014) *Forced marriage and the law*.

<sup>48</sup>Home Office and Foreign and Commonwealth Office (2019) *Forced Marriage Unit Statistics 2018*.

<sup>49</sup>Travis, A. (2016) ‘Official data on forced marriages in UK may hide true scale of abuse’ *The Guardian*, 8/3/16 [\(Pg 19\)](#)

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<sup>53</sup>Home Office (2016) *Violence Against Women and Girls Communications Insight Pack*, p. 20.; House of Commons Home Affairs Committee. *Female genital mutilation: abuse unchecked*. Ninth Report of Session 2016–17, NSPCC Female Genital Mutilation; Forward Key issues: Female Genital Mutilation; Daughters of Eve What is Female Genital Mutilation (FGM)?

<sup>54</sup>Hussein, E. (2010) *Women’s Experiences, Perceptions and Attitudes of Female Genital Mutilation: The Bristol Peer Study. Forward*; WHO, Health Risks of Female Genital Mutilation.

<sup>55</sup>Home Office (2016) *Violence Against Women and Girls Communications Insight Pack*.

<sup>56</sup>HM Government (2016) Ending Violence Against Women and Girls Strategy 2016 – 2020. [\(Pg 20\)](#)

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<sup>60</sup>Refugee Council (2012) *The experiences of refugee women in the UK*. Briefing; Canning, V. (2014) op. cit.; Girma, M. and Lousley, G. (2017) *The Way Ahead: An asylum system without detention*. Women for Refugee Women; All-Party Parliamentary Group on Prostitution and the Global Sex Trade (2018) *Behind Closed Doors: Organised sexual exploitation in England and Wales*.

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<sup>65</sup>Corry, D. (2018). *Hearing Women’s Voices. Why women 2018*. Women’s Resource Centre; Hirst, A. and Rinne, S. (2012) *The Impact of changes in commissioning and funding on women-only services*. Equality and Human Rights Commission. Research Report 86; Kelly, L., Sharp, N. and Klein, R. (2014) op. cit.; McNeish, D. and Scott, S. (2014) op. cit.

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<sup>68</sup>Larasi, M. and Jones, D. (2017) op. cit.

<sup>69</sup>Imkaan (2015) *State of the Sector: Contextualising the current experiences of BME ending violence against women and girls organisations* p.8. [\(Pg 22\)](#)

<sup>70</sup>Swedish International Development Cooperation Agency (SIDA) (2013) *Power Analysis: A Practical Guide*.

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<sup>73</sup>Brooks, A. (2007) ‘Feminist Standpoint Epistemology: Building Knowledge and Empowerment Through Women’s Lived Experience’ in Hesse-Biber, S. and Leavy, L.P. (eds) *Feminist Research Practice*. Sage.; Harding, S. (2004) *The Feminist Standpoint Theory Reader*. London: Routledge; Reid, C (2004) ‘Advancing Women’s Social Justice Agendas: A Feminist Action Research Framework’, *International Journal of Qualitative Methods*, 3(3), 1–22.

<sup>74</sup>Ellsberg, M.C. and Heise, L. (2005) *Researching Violence Against Women: A Practical Guide for Researchers and Activists*. World Health Organisation / PATH; Downes, J., Kelly, L. and Westmarland, N. (2014) ‘Ethics into Violence and Abuse Research – a Positive Empowerment Approach’, *Sociological Research Online*, 19(1), 29–41.

<sup>75</sup>Building trust, active listening, reciprocity and consideration of the impact of the interview are essential elements of conducting ethical and sensitive research with women who have experienced gender-based abuse. See for instance: Abrahams, H. (2017) ‘Listen to me: a reflection on practice in qualitative interviewing’, *Journal of Gender-Based Violence*, 1(2), 253–259. [\(Pg 24\)](#)

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<sup>80</sup>For example: Gill, Aisha K. (2013) op. cit.; Hill Collins, P. (2004) ‘Learning from the Outsider Within: The Sociological Significance of Black Feminist Thought’ in Harding, S. The Feminist Standpoint Theory Reader. Routledge. [\(Pg 27\)](#)

<sup>81</sup>Cascardi, M, O’Leary, K.D. and Schlee, K.A. (1999) Co-occurrence and correlates of posttraumatic stress disorder and major depression in physically abused women, *Journal of Family Violence*, 14, 227–47; Holly, J. (2013) *Complicated matters: a toolkit addressing domestic and sexual violence, substance use and mental ill-health*. AVA. [\(Pg 32\)](#)

<sup>82</sup>Women’s Budget Group / Women’s Resource Centre (2018) *Life-Changing and Life-Saving: Funding for the women’s sector*. [\(Pg 34\)](#)

<sup>83</sup>The Multi-Agency Risk Assessment Conference (MARAC) is a regular meeting where local agencies share information about high risk domestic abuse victims, as part of a co-ordinated approach to safety planning, risk reduction and risk management.

<sup>84</sup>Home Office country of origin information (COI) and policy guidance to Home Office decision makers in relation to protection and human rights claims include information on women fearing gender-based violence. [\(Pg 36\)](#)

<sup>85</sup>AVA and Agenda (2019) *Breaking Down the Barriers: Findings of the National Commission on Domestic and Sexual Violence and Multiple Disadvantage*.

<sup>86</sup>Ibid. p. 5.

<sup>87</sup>Ascent, Imkaan and Rights of Women (2016) *Strengthening responses to forced marriage and female genital mutilation– Good Practice Briefing*.

<sup>88</sup>Anitha, S. and Gill, A. (2009) ‘Coercion, consent and the forced marriage debate in the UK’, *Feminist Legal Studies*, 17(2), 165–184; Larasi, M., Roy, S., Imkaan and Tweeddale, R. (2014) op. cit.; Roy, S., Ng, P. and Larasi, I. (2011) op. cit.

<sup>89</sup>Ascent, Imkaan and Rights of Women (2016) op. cit. p.5. [\(Pg 38\)](#)

<sup>90</sup>Women’s Aid (2019) *The Domestic Abuse Report 2019: The Annual Audit*. Women’s Aid. [\(Pg 39\)](#)

<sup>91</sup>Cupitt, S. and Ellis, J. (2003) *Your project and its outcomes*. Charities Evaluation Service. [\(Pg 41\)](#)

<sup>92</sup>Number of female clients from December 2016 to November 2019. [\(Pg 42\)](#)

<sup>93</sup>The Liverpool MARAC uses the Merseyside Risk Indicator Toolkit (MeRIT) to identify high risk cases of domestic abuse. The MeRIT trigger questions relate to both victim and perpetrator to assess levels of risk (McCoy, E. et al. (2016) *Evaluation of the Liverpool Multi-Agency Risk Assessment Conference* (MARAC). Centre for Public Health, Liverpool John Moores University).

<sup>94</sup>*Liverpool Multi Agency Risk Assessment Conference (MARAC) Combined Protocol 2016-2017*. Liverpool City Safe. [\(Pg 43\)](#)

FOOTNOTES

<sup>95</sup>Savera played a lead role in developing the Merseyside Forced Marriage and Honour Based Violence Protocol, which provides guidance for professionals and community groups on how to assess risk and appropriately respond to victims. [\(Pg 44\)](#)

<sup>96</sup>Women's Resource Centre (2011) Hidden Value: *Demonstrating the extraordinary impact of women's voluntary and community organisations*. p.10. [\(Pg 46\)](#)

<sup>97</sup>For example: Canning, V. (2014) op. cit; Corry, D. (2018) *Hearing Women's Voices. Why women 2018*. Women's Resource Centre; McNeish, D. and Scott, S. (2014) op. cit.; Women's Budget Group / Women's Resource Centre (2018) op. cit. [\(Pg 48\)](#)

<sup>98</sup>Evans, I. and Lindsay, J. (2008) 'Incorporation rather than recovery: Living with the legacy of domestic violence', *Women's Studies International Forum*, 31(5), 355–362, p.361. [\(Pg 50\)](#)

<sup>99</sup>Pain, R. (2012) op. cit; McNeish, D. and Scott, S. (2014) op. cit.; Bear, L., Durcan, G. and Southgate, J. (2019) op. cit.

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<sup>101</sup>Holly, J. (2013) op. cit.

<sup>102</sup>McNeish, D. and Scott, S. (2014) op. cit.

<sup>103</sup>Chantler, K. (2012) 'Gender, asylum seekers and mental distress: Challenges for mental health social work', *British Journal of Social Work*, 42(2), 318–334.

<sup>104</sup>Holly, J. (2013) op. cit.

<sup>105</sup>Holly, J. (2013) op. cit. [\(Pg 51\)](#)

<sup>106</sup>Holly, J. (2017) Mapping the Maze: *Services for women experiencing multiple disadvantage in England and Wales*. Agenda & AVA.

<sup>107</sup>Women's Resource Centre (2010) *Introduction to measuring outcomes*. [\(Pg 52\)](#)

<sup>108</sup>Women's Resource Centre (2011) *Hidden Value: Demonstrating the extraordinary impact of women's voluntary and community organisations*.

<sup>109</sup>Kelly, L., Sharp, N. and Klein, R. (2014) op. cit.

<sup>110</sup>Ibid. [\(Pg 56\)](#)

<sup>111</sup>Section 4(2) of the Immigration and Asylum Act 1999 allows for the provision of support to refused asylum-seekers. The Home Office gives support to refused asylum-seekers who are destitute and meet a narrow set of criteria. The support consists of accommodation and £35.39 a week via a payment card. (Asylum Support Appeals Project. 2018 *Section 4 Support*, Factsheet 2; Gov UK, *Asylum: What you'll get*). [\(Pg 58\)](#)

<sup>112</sup>Women's Resource Centre (2011) Hidden Value: *Demonstrating the extraordinary impact of women's voluntary and community organisations*. p.11. [\(Pg 59\)](#)

<sup>113</sup>Safe Lives (2017) *Your Choice: 'honour'-based violence, forced marriage and domestic abuse*. Spotlight Report # 4. p.63. domestic

<sup>114</sup>Imkaan (2015) op. cit..

<sup>115</sup>Imkaan (2014) *Ten Top Things for Commissioners of VAWG Services to Consider* (Briefing). [\(Pg 60\)](#)

<sup>116</sup>Women's Resource Centre (2011) *Hidden Value: Demonstrating the extraordinary impact of women's voluntary and community organisations*. [\(Pg 62\)](#)

<sup>117</sup>Kelly, L., Sharp, N. and Klein, R. (2014) op. cit. [\(Pg 63\)](#)

<sup>118</sup>McCarry, M. et al. (2018) 'The Potential for Co-production in Developing Violence Against Women Services in Wales', *Social Policy and Society*, 17 (2), 193-208; Hague, G. and Mullender, A. (2006) Who Listens? The Voices of Domestic Violence Survivors in Service Provision in the United Kingdom. *Violence Against Women*, 12(6), 568-587.

<sup>119</sup>Kennedy, H. Foreword in Gupta, R. (ed.) (2003) *From Homemakers to Jailbreakers*. Southall Black Sisters.

<sup>120</sup>Fisher, P., Balfour, B. and Moss, S. (2018) 'Advocating Co-Productive Engagement with Marginalised People: A specific perspective on and by survivors of childhood sexual abuse', *British Journal of Social Work*, 48, 2096–2113; McCarry, M. et al. (2018) op. cit.

<sup>121</sup>Foster-Turner, J. (2009) 'Focus Groups' in Neale, J. (ed.) *Research Methods for Health and Social Care*. Palgrave Macmillan. [\(Pg 64\)](#)

<sup>122</sup>Boyle, D. and Harris, M. (2009) *The Challenge of Co-Production*. Discussion paper by The Lab & Co-Production, nef (the new economics foundation) and NESTA, London; Social Care Institute for Excellence (SCIE) (2015) *Co-production in social care: What it is and how to do it*. SCIE Guide 51.

<sup>123</sup>Beresford, P. (2002) 'User Involvement in Research and Evaluation: Liberation or Regulation?', *Social Policy and Society*, 1(2), 95-105; Fisher, P., Balfour, B. and Moss, S. (2018) op. cit; McCarry, M. et al. (2018).

<sup>124</sup>SCIE (2015) op.cit. [\(Pg 68\)](#)

<sup>125</sup>Fisher, P., Balfour, B. and Moss, S. (2018) op. cit. [\(Pg 70\)](#)

<sup>126</sup>Kelly, L. (1988) *Surviving Sexual Violence*. Polity Press. p. 139. [\(Pg 71\)](#)

<sup>127</sup>Kelly, L. (1988) *Surviving Sexual Violence*; Boyle, K. (2018) 'What's in a name? *Theorising the inter-relationships of gender and violence*', *Feminist Theory*, 20(1), 19-36. [\(Pg 72\)](#)

<sup>128</sup>Siddiqui, H. and Patel, M. (2010) *Safe and Sane: A Model of Intervention on Domestic Violence and Mental Health, Suicide and Self-harm Amongst Black and Minority Ethnic Women*. Southall Black Sisters; World Association of Girl Guides and Girl Scouts (2013) *Voices Against Violence: A non-formal education programme for children and youth to help stop violence against girls and young women*. UN Women / WAGGGS. [\(Pg 75\)](#)

<sup>129</sup>Women's human rights include the right to live free from violence, slavery, and discrimination; reproductive rights and healthcare; to be educated; to own property; to vote; to work and to earn a fair and equal wage (Global Fund for Women).

<sup>130</sup>Kelly, L. (2005) *'Inside Outsiders: Mainstreaming violence against women into human rights discourse and practice'*, *International Feminist Journal of Politics*, 7(4), 471-495. See also Ertürk, Y. (2009) op. cit.; Manjoo, R. (2016) *'Violence against women as a barrier to the realisation of human rights and the effective exercise of citizenship'*, *Feminist Review*, 112, 11-26; and Merry, S.E. (2006) *Human Rights and Gender Violence: Translating International Law into Local Justice*. University of Chicago Press. [\(Pg 76\)](#)

<sup>131</sup>Rights of Women (2017) *Domestic violence and immigration law: the "domestic violence rule"*. [\(Pg 78\)](#)

<sup>132</sup>Dyer, E. (2015) *Britain's Forgotten Women: Speaking to Survivors of 'Honour'-Based Abuse*. The Henry Jackson Society. [\(Pg 83\)](#)

<sup>133</sup>Women's Resource Centre (2010) Introduction to measuring outcomes; Batliwala, S. (2011) *Strengthening Monitoring and Evaluation for Women's Rights: Twelve Insights for Donors*. Association for Women's Rights in Development (AWID). [\(Pg 85\)](#)

<sup>134</sup>Solnit, R. (2016) "Hope is an embrace of the unknown": Rebecca Solnit on living in dark times', *The Guardian*, 15/7/16.

<sup>135</sup>End Violence Against Women Coalition. (2015) *Survivors' Rights: The UK's new legal responsibilities to provide specialist support for women and girls who have experienced violence*.

<sup>136</sup>Ertürk, Y. (2009) 'Towards a post-patriarchal gender order: Confronting the universality and the particularity of violence against women', *Sociologisk Forskning*, 46(4), 58-67; Ascent, Imkaan and Rights of Women (2016) *Strengthening responses to forced marriage and female genital mutilation– Good Practice Briefing*. [\(Pg 87\)](#)

<sup>137</sup>Stark, E. (2013) 'Coercive Control' in Lombard, N. and McMillan, L. (eds) *Violence Against Women: Current Theory and Practice in Domestic Abuse, Sexual Violence and Exploitation*.

<sup>138</sup>Kelly, L., Sharp, N. and Klein, R. (2014) *Finding the Costs of Freedom: How women and children rebuild their lives after domestic violence*. CWASU. [\(Pg 89\)](#)

<sup>139</sup>End Violence Against Women Coalition (2014) *Violence Against Women and Girls Factsheet to support schools in England to prevent violence and abuse of girls*. EVAW; McCarry, M. and Lombard, N. (2016) 'Same old story? children and young people's continued normalisation of men's violence against women', *Feminist Review*, 112, 128-143.

<sup>140</sup>Safe Lives (2017) *Your Choice: 'Honour'-based violence, forced marriage and domestic abuse*. Spotlight Report # 4. d

<sup>141</sup>Ascent, Imkaan and Rights of Women (2016) *Strengthening responses to forced marriage and female genital mutilation– Good Practice Briefing*; Safe Lives (2017) op. cit.; World Association of Girl Guides and Girl Scouts (2013) *Voices Against Violence: A non-formal education programme for children and youth to help stop violence against girls and young women*. UN Women/ WAGGGS. [\(Pg 90\)](#)

<sup>142</sup>Ascent, Imkaan and Rights of Women (2016) op. cit.; World Association of Girl Guides and Girl Scouts (2013) op. cit.

<sup>143</sup>Ertürk, Y. (2009) op. cit.; Begikhani, K., Gill, A., Hague, G. and Ibraheem, K. (2010) *Honour-based Violence and Honour-based Killings in Iraqi Kurdistan and in the Kurdish Diaspora in the UK*. University of Bristol, Roehampton University and Kurdish Women's Rights Watch; Ascent, Imkaan and Rights of Women (2016) op. cit.

<sup>144</sup>UN Women (2013) *Elimination and prevention of all forms of violence against women and girls. Commission on the Status of Women*. Agreed Conclusions p.2. [\(Pg 93\)](#)

<sup>145</sup>Savera UK (2018) *The Youth Led Conference was a Success*. Conference Report.

<sup>146</sup>Stanley N. et al. (2015) *'Preventing domestic abuse for children and young people: A review of school-based interventions'*, *Children and Youth Services Review*, 59, 120–131.

<sup>147</sup>Stanley N. et al. (2015) op. cit. p. 129. [\(Pg 95\)](#)

<sup>148</sup>Ascent, Imkaan and Rights of Women (2016) op. cit.; Safe Lives (2017) op. cit.; World Association of Girl Guides and Girl Scouts (2013) op. cit.

<sup>149</sup>McCarry, M. and Lombard, N. (2016) op. cit.; World Association of Girl Guides and Girl Scouts (2013) op. cit. [\(Pg 106\)](#)

<sup>150</sup>Number of female clients from December 2016 to November 2019. 93% of clients were women and girls. [\(Pg 115\)](#)

<sup>151</sup>For instance, Evans, I. and Lindsay, J. (2008) op. cit; Pain, R. (2012) op. cit.; Holly, J. (2013) op. cit.; McNeish, D. and Scott, S. (2014) op. cit.; AVA and Agenda (2019) op. cit. [\(Pg 118\)](#)

<sup>152</sup>Ascent, Imkaan and Rights of Women (2016) op. cit.; Safe Lives (2017) op. cit.; World Association of Girl Guides and Girl Scouts (2013) op. cit.

<sup>153</sup>Ertürk, Y. (2009) op. cit.; Ascent, Imkaan and Rights of Women (2016) op. cit.

<sup>154</sup>Department for International Development (DFID) (2012) A Practical Guide on Community Programming on Violence against Women and Girls. Chase Guidance Note 2. [\(Pg 120\)](#)

<sup>155</sup>Aykaç, C. (2016) op. cit.; Corry, D (2018) op. cit.; Hirst, A. and Rinne, S. (2012) op. cit.

<sup>156</sup>Larasi, M. and Jones, D. (2017) op. cit. [\(Pg 122\)](#)

<sup>157</sup>Hall, S-M. et al. (2017) *Intersecting Inequalities: The impact of austerity on Black and Minority women in the UK*, Women's Budget Group/ Runnymede Trust/ RECLAIM / Coventry Women's Voices; Veitch, J. (2018) *Shadow Report submitted to the UN CEDAW Committee by the Women's Resource Centre (England) for the examination of the United Kingdom of Great Britain and Northern Ireland*, 2019. WRC, Wakefield, H. (2019) *Triple Whammy: The impact of local government cuts on women*. WBG.

<sup>158</sup>Bear, L., Durcan, G. and Southgate, J. (2019) *A Sense of Safety: trauma-informed approaches for women*. Agenda and Centre for Mental Health. [\(Pg 123\)](#)

<sup>159</sup>DFID (2012) op. cit.; World Association of Girl Guides and Girl Scouts (2013) op. cit.

<sup>160</sup>World Association of Girl Guides and Girl Scouts (2013) op. cit.

<sup>161</sup>DFID (2012) op. cit.

<sup>162</sup>World Association of Girl Guides and Girl Scouts (2013) op. cit.

<sup>163</sup>Ertürk, Y. (2009) 'Towards a post-patriarchal gender order: Confronting the universality and the particularity of violence against women', *Sociologisk Forskning*, 46(4) 58-67. [\(Pg 125\)](#)





Forced

Marriage

"Honour"

Killing

SILENCE

SILENCE

breast ironing

FGM

NO ONE SHOULD BE SUFFERING FROM DOMESTIC ABUSE  
NO ONE SHOULD BE FORCED INTO MARRIAGE  
NO ONE SHOULD BE FORCED UNDERGO FEMALE GENITAL MUTILATION (FGM)  
HONOUR-BASED ABUSE IS WRONG

SAFETY  
The