

Are MARACs Effective for Harmful Practices Cases?

Executive Summary

COACTION HUB: MARCH 2024



Introduction

Coaction Hub is a partnership project between Asian Women's Resource Centre (AWRC) and Standing Together Against Domestic Abuse (STADA) which works to strengthen the Coordinated Community Response (CCR) (1) to improve responses to Black and minoritised (2) survivors of domestic abuse and harmful practices.

The project aims to create an equitable partnership between a by and for agency and a mainstream or 'White led' agency working in the ending violence against women and girls (VAWG) sector (3). Each agency brings a range of expertise which complements the other – AWRC as a frontline agency with more than 40 years of experience working with Global Majority victim/ survivors of domestic abuse and harmful practices and STADA as a second-tier agency which pioneered the CCR in the UK.

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This paper benefits from the Coaction Hub partnership which brings the complimentary expertise of both agencies experience and understanding of MARACs. AWRC represent their service users at MARAC across a number of London boroughs. Their way of working holistically with women means they bring a wealth of knowledge to these spaces, advocating for Black and minoritised women, including those who have no recourse to public funds. Since 2021 they have also been commissioned by the Royal Borough of Kingston upon Thames to provide expertise at a 'stand alone' MARAC which hears high risk harmful practices cases. The purpose of this role is to advise on cases, in the process upskilling other MARAC reps.

STADA have been co-ordinating MARACs since 1999 when they pioneered the first multi-agency group to implement safety measures for victim/ survivors of domestic abuse in Hammersmith and Fulham. Since 2020 STADA have been collating data on harmful practices cases at MARAC in 3 local authorities, Hammersmith and Fulham, Westminster and Kensington and Chelsea. This was carried out as part of the wider work of the Harmful Practices Operational Group (HPOG) which covers these boroughs, and findings have been addressed in papers by the University of Suffolk (4) and STADA (5).

WRITTEN BY Coaction Hub



Aims of this paper

This paper is aimed at all those who are involved in the development, commissioning and coordination of MARACs in England and Wales. It explores an under examined but vital area of MARACs and their effectiveness and aims to shed light on harmful practices cases, which are often 'invisible' in discourse around multi agency processes. The paper will examine current practice through research carried out with ending VAWG by and for organisations, as well as other stakeholders such as MARAC co-ordinators, VAWG leads, and VAWG practitioners. It will also highlight examples of good practice and provide recommendations to improve responses to these survivors. The paper is accompanied by a toolkit, which will support local areas to improve practice in managing these cases at their MARACs.

Methodology

This research was carried out within an intersectional feminist, anti-racist framework, reflecting the values of the Coaction Hub. This meant bringing an understanding of the structural racist inequalities which impact Black and minoritised survivors of VAWG and the specialist by and for agencies which support them. By and fors are foregrounded in this work, not just as experienced service providers to women, but in the wider socio-political context of their actively anti-racist work in a white supremacist power structure. We used a participatory approach in order to actively address power imbalances, both between white led and by and for agencies and between researcher and participant.

Overall in this research we heard from:

- 14 By and for agencies
- 6 VAWG agencies
- 3 DA workers based in local authorities
- 3 VAWG Leads based in local authorities
- 5 3rd sector workers with DA specialisms
- 1 Activist
- 50 MARAC co-ordinators

Harmful practices in the Context of VAWG

This report takes a feminist, anti-racist perspective on harmful practices. Although men and boys can be victim/ survivors (6), women and girls are disproportionately affected by these forms of abuse (7).



Harmful practices are part of the continuum of VAWG that have been dismissed as being linked to culture and religion, causing othering and leading to a failure to protect women and girls. Throughout this report we use harmful practices to mean a wide range of forms of abuse against women and girls, often occurring simultaneously or in conjunction with other forms of abuse such as domestic abuse, sexual abuse and modern slavery. Although 'honour' based abuse is used by some agencies, particularly government and statutory agencies, as a catch all term to include 'honour' based abuse (HBA), forced marriage (FM) and female genital mutilation (FGM) (8,9) we believe that this obscures a range of forms of abuse, including spiritual abuse, dowry abuse, castebased abuse, virginity testing and others. We use the term harmful practices as a much broader definition to include a wider range of abuse. The Coaction Hub defines harmful practices as:

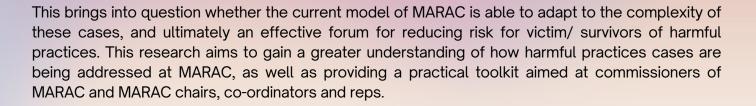
Forms of gender-based violence and domestic abuse where escalation of abuse and associated risks happen due to notions of power and control within intersectional contexts of oppression. In these cases, religion, culture, patriarchal codes of behaviour and perceived notions of honour are used by one or more perpetrators as an excuse for coercive control, threats and abuse.



The Importance of Focusing on Harmful Practices Cases at MARAC

Harmful practices are an under researched area of VAWG, and our knowledge of the prevalence within England and Wales is limited (10). Although all forms of VAWG are under reported, harmful practices are particularly 'hidden' (11), and they are omitted from datasets such as the Crime Survey for England and Wales (CSEW) (12). Whilst there are currently some datasets which provide prevalence information, including the NHS FGM dataset (13), Forced Marriage Unit statistics (14), Karma Nirvana National Helpline data (15) and Home Office statistics on HBA offences recorded by the police (16), we have no large scale data collection to form a more coherent picture of these types of abuse.

Previous research on harmful practices cases and MARAC found these cases make up approximately 5% of cases (17), but this figure is likely to be higher due to the under identification of these forms of abuse. These cases present as complex, often involving multiple perpetrators, multiple forms of VAWG and victim/ survivors often experience barriers such as immigration issues and English language barriers. In many instances there are knowledge gaps when these cases are heard at MARAC, including a lack of identification and risk assessment of all perpetrators. It is also unclear whether there is sufficient time and expertise at MARACs to fully action plan around these cases.



Key Findings

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Research findings cover 5 main areas, which encompass identifying concerns and gaps, as well as exploring alternative ways of working. A summary of findings can be found below.

Professionals Understanding of Harmful practices in MARAC Settings

Our research found that the majority of professionals involved with MARACs had insufficient knowledge around the complexity of these cases. This had a variety of consequences including inadequate risk assessing, the 'screening out' of harmful practices cases, and the focusing on domestic abuse risks whilst sidelining specific risks related to issues such as 'honour'. Statutory agencies were particularly singled out as requiring improved understanding of these forms of abuse. Structural issues were also highlighted, including the turnover and inconsistency of MARAC participants, and inadequacy of risk assessment tools. This raises concerning issues as to whether MARACs are able to effectively respond to victim/ survivors of harmful practices.

The Value of By and For Agencies to MARAC and how this Impacts Harmful Practices Cases

By and for agencies bring a vast amount of expertise to MARAC, not just in terms of inputting on specific cases but supporting and advising other professionals round the table to better respond to cases of harmful practices. Their involvement can lead to improved relationships with other organisations, leading to better outcomes for victim/ survivors. However, by and for agencies are often underutilised in the MARAC model, with inconsistency around funding to enable them to be core agencies at MARAC, to be in referral pathways, or even to be present. This illustrates a missed opportunity given the expertise these agencies can provide to MARACs.

Reconstructing the structure of MARAC for Harmful Practices Cases

The complex nature of harmful practices cases means that in many areas the structure of MARAC provides insufficient time and expertise for these cases to be adequately risk managed. Our research uncovered a number of areas where different approaches are being taken to these cases, such as hearing them at a stand alone meeting, or as part of a separate space for complex cases. The commissioning of by and for agencies to attend these meetings can not only provide advice on individual cases but upskill other reps.



Harmful practices as a Referral Criteria for MARAC

There is currently an inconsistency of MARAC referral criteria across areas, with some localities including forms of harmful practices. Given the under identification of harmful practices cases, this could result in more cases being identified, but this must not replace training on these forms of abuse. Consideration should also be given to the legal basis for these referrals, ensuring that this results in only high-risk cases being referred.

The Value of Collecting MARAC Data on Harmful Practices

Data on harmful practices is currently limited, both nationally and in local areas. Collecting and analysing MARAC data on harmful practices is an opportunity to gain insights into highrisk cases locally. This can be used to inform strategic decisions and commissioning and can also be collated into a national data set.

Conclusion

The Coaction Hub is particularly concerned with exploring whether the co-ordinated community response works effectively for Black and minoritised survivors of domestic abuse and harmful practices. Whilst this research is just one aspect of this work, it has been clear that it reflects wider concerns around how structural race-based inequality plays out within the VAWG sector, and beyond. Many aspects of the CCR, including MARAC, are not designed for Black and minoritised women, survivors of harmful practices, and the specialist by and for services who support them. This paper calls for a change in culture and attitude, both within MARAC and more widely in the sector. For the co-ordinated community response to be effective for all victims and survivors, a substantial amount of work needs to be done to address this.

Whilst there is a case for MARAC in general to be reviewed, there is a particular question over whether as a process it works for harmful practices cases. It's clear from our research that there is much that needs to be done to improve responses to harmful practices cases at MARAC, both in terms of risk management and appropriate responses to victim/ survivors and perpetrators. Previous research has highlighted that many agencies feel they are not equipped to respond to these cases, and our research illustrates that not all agencies involved with MARAC, including those chairing and co-ordinating, have a sufficient understanding of these forms of abuse to mitigate risk in the way MARAC was designed to do. Of particular concern is the practice of 'screening out' harmful practices cases, despite specialist agencies deeming these survivors as being at high risk. It is clear that there needs to be more focus on upskilling all those involved in MARACs to have a better understanding of these cases, and how their agencies, as well as the MARAC, should respond to victim/survivors and perpetrators.

The value of by and for agency involvement in MARACs is clear. These agencies are not only domestic abuse experts, but can provide specialist knowledge on harmful practices, as well as the nuanced experiences of Black and minoritised survivors and perpetrators. By and for agencies must be integral to MARACs if we are going to have a co-ordinated community response that works for all survivors.



Despite this, some MARACs continue to have no by and for agency presence, and in many areas these agencies do not have the capacity to become core agencies, or in some cases even represent the clients they work with. We would expect that an increased role in MARAC for by and for organisations would be appropriately resourced and would be mindful of the chronic under resourcing of these agencies. Funding for by and for agencies to have a greater role in MARACs also needs to be considered as part of the wider commissioning need to fairly fund these specialist agencies.

Our research also highlights a range of good practice, with by and for agencies singling out particular MARACs and agencies who they felt were more understanding of these cases or respected the expertise of specialist agencies. It was helpful to understand the measures some areas were taking to improve responses to these cases, for example through separate meetings or by valuing the expertise of specialist agencies. What was clear, however, was that these examples of good practice appear to be happening in silos, with other areas unaware that this good practice was occurring. This indicates a need for local MARACs to have better mechanisms to share good practice and learn from each other, possibly nationally as well as across local areas. The London MARAC Co-ordinator's Forum, co-ordinated by STADA could be a template for this type of forum.

We would urge all local areas to carry out a review of how their MARAC manages harmful practices cases, identifying areas for improvement. Ideally this should take place in conjunction with a broader strategy in the area to better understand the prevalence of these forms of abuse, as well as improve responses to these victim/ survivors and perpetrators more generally. This should include data collection and specialist training, delivered by by and for experts and covering a broad range of these forms of abuse. Commissioners should consider utilising virtual training where there is no appropriate service in the local area. Based on this review, and using evidence from the data, MARACs should consider whether other models, such as stand alone meetings would work for their locality. Whilst we are aware that local areas are stretched in terms of capacity, it is key that this work is viewed in the context of ensuring that the CCR works for all survivors of VAWG, as opposed to problematising victim/survivors of harmful practices.

Recommendations

It's clear from our findings that MARACs have a long way to go to ensure that they are effective for harmful practices cases. The following recommendations are aimed at all those involved in the development of MARACs including co-ordinators, VAWG leads, steering groups and commissioners. We would suggest that this are discussed in MARAC steering groups in order to explore how local MARACs improve their responses to these cases.

- Recommendation 1: All MARAC co-ordinators, chairs and reps should receive training on harmful practices
- Recommendation 2: All MARAC Co-ordinators, Chairs and Reps to receive training and development in anti-racism



- Recommendation 3: All new reps to be given reps guide (see toolkit)
- Recommendation 4: MARAC co-ordinators and chairs to refer to Aide Memoire (see toolkit)
- Recommendation 5: MARACs to review their membership and consider any gaps
- Recommendation 6: Commissioners to fund by and fors to be able to have capacity to attend and meaningfully engage with MARAC
- Recommendation 7: Commissioners to fund by and fors to work with high risk domestic abuse and harmful practices cases
- Recommendation 8: MARACs to include by and for agencies in referral pathways
- Recommendation 9: MARACs to consider whether adequate time and expertise is available for harmful practices cases, taking into account the complexity of these cases
- Recommendation 10: MARAC's to consider alternative models of hearing harmful
 practices cases, including 'stand alone' meetings and expanding the chair role to include professionals from organisations such as by and for agencies
- Recommendation 11: Local areas to consider how they upskill professionals on harmful practices, including how to assess risk
- Recommendation 12: In areas where harmful practices are not used as a referral criteria, MARACs to highlight the use of professional judgement for these cases
- Recommendation 13: In areas where harmful practices are used as a referral criteria,
 MARAC co-ordinators, chairs and steering groups to ensure that this does not result in referrals which breach GDPR
- Recommendation 14: MARACs to collect harmful practices data as part of their MARAC data collection
- Recommendation 15: VAWG Leads/ VAWG Boards to use harmful practices MARAC data to inform local policy and approach to harmful practices cases
- Recommendation 16: MARAC data to be part of wider data collection which foregrounds data from specialist by and for agencies as well as other statutory and non statutory organisations. Appropriate renumeration to be given to by and for agencies involved in this work

Sources

- 1. See glossary for explanation of the Co-ordinated Community Response (CCR)
- 2. The term Black and minoritised is used throughout this paper as a term to refer to all communities who are minoritised within the UK through structural racism and oppression. Although in some other contexts the Coaction Hub uses other terminology, primarily Global Majority, Black and minoritised encompasses individuals and agencies who have been involved in this research and other Coaction Hub projects who would not be considered part of the Global Majority, such as Jewish and Irish Traveller women. However, we understand that using broad terms is problematic and where possible we endeavour to use specific terms to be clear who we are referring to.
- 3. See glossary for descriptions of the terms 'by and for' and 'White led'
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- 12. **Ibid**
- 13. NHS Female Genital Mutilation Datasets. Available at: https://digital.nhs.uk/data-andinformation/clinical-audits-and-registries/female-genital-mutilation-datasets
- 14. Gov.uk Forced Marriage Unit Statistics. Available at: <u>https://www.gov.uk/topic/law-justice-system/forced-marriage</u>
- 15. Karma Nirvana. Available at: https://karmanirvana.org.uk/data/national-helpline/
- 16. Home Office (2020). Available at: https://www.gov.uk/government/statistics/statistics-on-socalled-honour-based-abuse-offences-england-and-wales-2019-to-2020/statistics-on-so-calledhonour-based-abuse-offences-recorded-by-the-police
- 17. Richards, F and Dube Lacroix. M (2023) Harmful Practices Cases at Westminster, Hammersmith and Fulham and Kensington and Chelsea MARACs: What Does the Data Tell Us? Available at: https://static1.squarespace.com/static/5ee0be2588f1e349401c832c/t/643eb4935a45e521a5 d2617b/1681831060581/Harmful+Practices+Cases+in+MARACs+%282023%29.pdf

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