Impact of cultural and religious beliefs on safeguarding practice and policy

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• Exploring how child abuse may be perceived by different diverse communities within the context of cultural and faith values – focusing on honour based abuse, FGM and spirit possession

• Considering wider issues of identity, cultural/religious values and impact of migration

• Identifying children at risk and understanding potential needs

• The challenge of devising meaningful interventions in order to safeguard children from diverse communities
Safeguarding and Equality

- Children Act 1989
- Children Act 2004
- Forced Marriage Prevention Act 2007
- Female Genital Mutilation Act 2003
- Trafficking: Sexual Offences Act 2003
- National Immigration and Asylum Act 2002
- Gangmasters Licensing Act, 2004
- The Children (Leaving Care) Act 2000
- The Children (Private Arrangements for Fostering) Regulations 2005 by Section 44 of the Children Act 2004
- Equality Act 2010
- Section 157 and 175 of the Education Act 2002.

Working Together to Safeguard Children- 2013
Safeguarding Children and Safer Recruitment

- Project Violet
- Community Partnership Project/ Specialist voluntary sector groups
- DFES research spirit possession
- Community engagement projects
- Project Palladin
- Projects Operation Pentameter
- CRB changes vetting and barring
Interface and Challenges – legislation, guidance, policies, austerity, pipeline policies and...

• Do your LSCB know your communities and specific safeguarding issues? How have these been identified?

• How does MSCB demonstrate leadership, partnership and organisational commitment and actions to promoting equality, challenging discrimination in the context of safeguarding?

• Do you measure community engagement and satisfaction? How?

• How do you know you have responsive services and customer care?

• How skilled and committed is the multiagency workforce?

What statistical and analytical information do you have and what more do you think you need in order to create a baseline for measuring safeguarding in the context of equality impact?
Equality Impact Audit - in the context of safeguarding children from diverse backgrounds

• What are the statistics and what do they tell us – who are communities, where are they located
• referrals, type of vulnerability, abuse, the effectiveness or ineffectiveness of help

• What are children and their parents telling us about their experience of contact with agencies – is there a pattern of continuum who do they trust/ mistrust and why and what do we do???

• Are we recording ethnicity/faith
• Are our services engaging with service users and their families reference points
• Do you need to ask other questions, if so , what?
Wider context and challenges

• Reference framework: childhood, abuse, parenting, education, domestic violence, mental ill health, physical ill health

• Access to and quality of interpreters
• Temporary accommodation: high numbers of mobile families
• Families – do not officially exist
  - large numbers of adults with mental health problem with additional complexities for BME communities.

Isolation and loneliness

• Not knowing social rules/system
• Language
• Health: physical and mental and impact on parenting – young carers, fear of seeking help
• Significant proportion are BME communities living in poverty

Implications and challenges for service delivery for schools but also across the agencies?
The Challenge - Discussion

How to merge the following into practice:

• Recognising discrimination

• Anti- discriminatory practice

• Culturally competent practice

• Working in partnership with parents

• Not losing sight of the child’s needs
Assessment Framework

• Race and culture need to be integrated into assessment process
• Diversity consideration its effect on a ‘child development and the interaction with parental responses and wider family and environmental factors’
• need to be sensitive and have an understanding of the family’s culture.
• The pitfalls of insensitive and excluding practice are:
  • Employing cultural assumptions and stereotypes Inattention to differences within cultural and racial groups
  • Not taking into account that received response be influenced by the person’s experience of discrimination
  • Not taking to social exclusion a disability.
  • Giving meaning to information without checking it out with the child and family.
BME – what does it mean?

- The term BME is a useful to describe a collectively those not of the dominant community BUT also produces difficulties when considering child protection.

- Some issues, beliefs, practices that may be applicable within one minority community may not be for another though some experiences may be shared.

- Without clear differentiations then there are dangers of not understanding particular cultural beliefs or differences in nuances.

- Nb. To also consider factors of similarities

- Very little in particular is known about the risks and vulnerabilities experienced by mixed parentage children
Defining the most vulnerable BME children is complex

Under-representation of children from Asian backgrounds having contact across all statutory services.

Black children (: African and African Caribbean children) are over represented in child in need and looked after children statistics but not in child protection.

Children from mixed ethnic background are over represented in all categories

Not clear is the underlying meaning of this disparity.

Children from some established and newly arrived BME communities are potentially vulnerable but the reason for vulnerability is not presently well understood and the reasons may be different for different groups of BME children (DCSF, 2009).
Key points literature and research: Social Care services and BME families

- Discontentment in services  (Audit Commission/SSI, 2003)
- BME children are disproportionately represented or receive a differential service as children in need of protection  Gibbons et al. 1995; Farmer & Owen, Bebbington and Miles, 1989; Barn, 1993; Barn et al., 1997; The Children Act Report 2000 DOH, 2000; The Children Act Now DOH, 2001)
- Adverse impact due communication barriers and from services not having engaged communities  Betancourt et al, 2002
- A failure to respond effectively to child protection
- Assessments are ineffective because they fail to grasp cultural/religious ways of life and the subtleties of differences in BME families  (e.g. Lau 1998; Maitra 1995;1996; Hodes 1995)
- The impact of institutional racism- practice not taking this into account
Beware: of a lopsided focus...
Audit Commission (2003), elevate the prevalence of a detrimental effect on wellbeing, and potentially diminish protective factors in some BME families
• Nb. to consider the impact of discrimination and structural inequalities and cultural sensitivity
BUT
• This focus has led to a lack of serious consideration given to how and why cultural factors interplay with other variables to create risk or protective strengths.
• Focus on cultural relativism and the stereotyping of BME families.
• The overwhelming debate has centred on physical chastisement.
DANIEL PELKA
‘invisible’ : why?
Daniel “looked for food everywhere” and that he “would eat whatever he could get his hands on”. Once he ate half of a large cake meant to be given to all the children as it was the teacher’s birthday, He also tried to eat beans being planted in soil and raw jelly taken from a sandpit and that he would always eat this.
Daniel had been asked by one of the teaching assistants about how two of the injuries were caused, but he was reported not to give any explanation but he just look down and would not say anything.
Let us consider why we failed

Generally...cp failings

Specifically
Context of ethnicity, culture, language
More cp failings
• “I would steal pistachios and biscuits for him”.
When Mariusz was too much drinking, my brother had a cold bath and I asked Mariusz to stop it. "I got my brother from the bath and I pulled the plug out and I hugged him".
“\[\text{I listened to his heart but I couldn’t hear his heart. The day before he was good, he was helping me to do things and I kissed him and hugged him and I loved him. He was happy.}\]

Daniel was loved by his sibling. His seven year old sibling was only that, in essence, tried to protect him.
Where is FGM practiced?

Image source: http://www.who.int/reproductive-health/fgm/fig1.htm
FGM - historical back drop

- evidence of FC dates back to the 5-7th Century BC, but most data indicates religious ties
- Performed by midwives (daya), barbers, some doctors
- Most often performed without anesthesia; with razor, scissors, sharp stone, broken glass
- Female's legs bound together for 40 days to heal; not allowed to move, especially for first week or so
FGM

• Estimated 100 to 140 million girls and women worldwide are currently living with the consequences of FGM.
• Most common in the western, eastern, and north-eastern regions of Africa, in some countries in Asia and the Middle East, and among certain immigrant communities in North America and Europe.
• It is mostly carried out on young girls sometime between infancy and age 15 years.

*Egypt* -90% were aged between 5 and 14
*Ethiopia, Mali, Mauritania* -50% were under 5 yrs of age
*Yemen* - 76% of were not more than two weeks old.
Causes - beliefs

Cultural, social factors within families/communities:
- Social pressure to conform
- Woman's libido reduced - resist "illicit" sexual acts.
- Femininity and modesty: girls are “clean” and after removal of body parts that are considered "male" or "unclean".
- Copying the traditions of others
- Part of a revival movement.
- Cultural identity as a woman
- A coming of age, gifts, celebrations, public recognition
- Not undergoing FGM - social outcast
- Mother’s duty
- Preserve a girl’s virginity,
- Enhance a husband’s pleasure during the sex act.
- Religion requirement: make a girl spiritually pure.
FGM

- FGM includes all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons.
- carried out by traditional circumcisers, and medically trained personnel.

TOOLS

- special knives, scissors, razors, or pieces of glass. Sharp stones have been reported to be used cauterization (burning) is.
- Finger nails have been used to pluck out the clitoris of babies.
Classifications

- Clitoridectomy
- Excision
- Infibulation
- Other:
Type I

Partial or total removal of the clitoris and/or the prepuce (clitoridectomy).

- Type Ia, removal of the clitoral hood or prepuce only

- Type Ib, removal of the clitoris with the prepuce.
**Type II:** Partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (excision).

- Type IIa, removal of the labia minora only
- Type IIb, partial or total removal of the clitoris and the labia minora
- Type IIc, partial or total removal of the clitoris, the labia minora and the labia majora.
Type III:

- Narrowing of the vaginal orifice with creation of a covering seal by cutting and apposition the labia minora and/or the labia majora, with or without excision of the clitoris (infibulation).

- Type IIIa: removal and apposition of the labia minora;

- Type IIIb: removal and apposition of the labia majora.

- Reinfibulation: recreate an infibulation, performed to recreate a "virginal“ appearance, it is often necessary not only to close what has been opened but also to perform further cutting to create new raw edges for more extensive closure.
Type IV- Pricking, piercing, incising and scraping

- Skin pierced with a sharp object
- Strong indications that pricking change in terminology rather than a change in the actual practice of ‘Cutting’
- Stretching or elongation of the clitoris and/or labia minora,
- Cutting into the external genital organs *gishiri* cuts the vaginal wall and *angurya* cuts
- Surgery or scraping to remove the hymen
- Cauterization destruction of tissue by burning it with a hot iron
- Introduction of harmful substances
Normal female external genitalia and pulled labia minora (type IV)

Normal genitalia                                    Pulled labia minora
• Disturbing photos will follow.....
Conditions

- Usually performed by an elder woman under unsanitary conditions, with scissors, razor blade, or knives; no anesthetic.
- Incision is usually held closed by thorns and legs are tied closed for 3 weeks.
• Often performed in primitive conditions
Health consequences

- **Immediate complications** can include severe pain, shock, hemorrhage (bleeding), tetanus or sepsis (bacterial infection), urine retention, open sores in the genital region and injury to nearby genital tissue.

- **Long-term consequences can include:**
  - The clitoral nerve trapped in fibrous scar tissue of the scar resulting in extremely sharp pain intercourse, or even from the friction of underwear
  - Vulval abscesses
  - Chronic pelvic infection
  - Vaginal obstruction
  - Incontinence
  - Menstrual disorders
  - Recurrent bladder and urinary tract infections
  - Cysts
  - Infertility
  - Increased risk of childbirth complications and newborn deaths.
  - Psychological trauma
• Countries where the prevalence of FGM is high the most common age for the FGM procedure is between 6 and 8 years.

So...

Girls of the same age in the UK whose families originate from those countries are likely to also be at high risk.

Dorkenoo (et al 2007)
• Suggestion: 86,000 women and female children most of whom will be first-generation immigrants, refugees and asylum seekers living in Britain, are estimated to have undergone FGM. Foundation for Women’s Health, Research and Development

• Hypothesise: about 3,000 to 4,000 FGM acts may be performed annually on children from the UK and that an additional 7,000 children under the age of 16 are at risk each year (Powell (et al., 2002) )
The most authoritative statistical study
Used the 2001 Census of Population:
- Nos. of women born in and girls under the age of 15 originating any one of 29 practicing countries.
- And birth registration data
- The study’s analysis:
  - at least 66,000 women have suffered FGM living in England and Wales
  - suggest 8,000 girls aged 9 and above more highly likely to have had type three FGM
  - over 3000 girls more girls had a high probability of having type one or two FGM.
  - estimates: 16,000 girls aged 8 or younger are at serious risk of type three FGM and 5,000 are at high risk of type two or one FGM.
The difficulties in thinking about stats:

- does not account for second generation immigrants included nor the possible
- difference in prevalence of FGM in migrant communities in comparison with countries of origin.
- Gill and Dioum (2005) qualitative study found: great fear and a sense of needing to conceal because participants expressed feelings of being persecuted for their cultural value although there were differences expressed by some young women.

Morrison (et al 2003) study of 174 found changes in attitude amongst young Somalis aged 16-24. T 58% of those who had been living in Britain before the age of six (had not undergone FGM. Whereas, only 9% those who arrived in the UK after the age of 11 had not undergone FGM.
Study revealed a correlation between the changing beliefs, attitudes and living in the UK from a young age.

- 75% of male participants who had lived in the UK before the age of 11 stating they wanted a wife who had not undergone FGM. In comparison, 50% of those male participants who had arrived in the UK aged 11 or older wanted to marry a ‘circumcised’ woman.

- 18% of females and 43% of men stated their intention to have FGM performed on their daughters.

- The authors conclude that the level of acculturation related to supporting or disapproving of the practice. Similar findings in Jonsdotter’s study (2003) in Sweden. A larger study is required to test if these findings are definitive of an actual trend.
Removing religious support would greatly reduce the practice

“One who is not circumcised is not a Muslim, and even her parents are seen as not being in the religion, that is how we see it as Somalis”, (Married men, Wajir, 2005)

— “People before us like Prophet Adam (PBUH) and Eve have been doing it, so whether good or bad we will continue with it” (Married women, Wajir, 2005)

(Somalis in Kenya)
Messages from Islam

• Islam emphasizes the importance of taking expert advice e.g. from medical doctors (Quran: 16: 43)

• Cutting healthy organs and causing any physical harm is unlawful (Quran: 2: 195).

• Allah condemns those who change His creation (Quran: 4: 119)

• Women have a right to a healthy body and enjoyment of matrimonial sexual relations

• Islam lays emphasis on good upbringing (*tarbiya*) and moral teachings to ensure chastity

• Nobody should be punished for fear that they could potentially indulge in unlawful sex
Messages from Islam

- Nothing should be done to the body that would prevent purity for the purposes of worship (Infibulation makes genital hygiene impossible)

- Islam condemns harmful cultural practices e.g. female infanticide (Quran: 81: 8-9)

- One should not succumb to community pressure at the expense of disobeying Allah

- *Mubaah* (allowed) acts are prohibited if they result in harm
Messages from communities - ambiguities

- Type III is un-Islamic, but support of the so-called ‘sunnah circumcision’ exists
- There is no agreed definition of the ‘sunnah circumcision’
- It is dangerous to refer to the practice as *mubaa* (*: allowed acts are prohibited if they result in harm*)
- Proponents can use this as an Islamic justification for its continuation
- Scholars in specific areas - given jurisdiction rulings for (e.g. Gambia) and against (e.g. UK)
Risk factors

• Those who are affected by FGM may be British citizens born to parents from FGM practising communities or women resident in the UK who were born in countries that practice FGM. These may include immigrant, refugees, asylum seekers, overseas students or the wives of overseas students.

Specific factors that may heighten a child’s risk of being subjected to FGM include:

– • The socio-economic position of the family and the level of integration within UK society;
– • Older female members of the immediate family or extended family having undergone FGM;
– • The intention of a long holiday (usually during the school summer holiday) to the country of origin or where the practice is prevalent, or to another European country;
– • Prolonged absence from school;
Forced marriage January to May 2012

594 cases where the FMU has given advice or support related to a possible forced marriage.

– 14% of calls involved victims bellow 15 years old
– 31% involved victims aged 16-17,
– 35% involved victims aged 18-21,
– 12% involved victims aged 22-25,
– 5% involved victims aged 26-30,
– 2% involved victims aged 31-40,
– 1% involved victims aged 41-50
– 0% involved victims aged 51-60
– and 0% victims over 61 years.

– 87% involved female victims and 13% involved male victims.
Countries of Origin: Forced Marriage Unit Statistics January to May 2012

Pakistan (46%),
Bangladesh (9.2%),
UK (8.7%),
India (7.2%),
Afghanistan (2.7%),
Turkey (1.5),
Sri Lanka (1.4%),
Iraq (1.2%),
Egypt (1.0%),
Nigeria (1.0%).

Other countries where we had cases included Morocco, Iran, Saudi Arabia, Yemen, Somalia, The Gambia, Kenya, Malawi, Algeria, Jordan, Kuwait, Malaysia, Mauritius, UAE, Zimbabwe.

Where the origin was unknown (9.4%).
• Evidence of forced marriage Africa and Eastern European Communities

• Reports that forced marriage is high in the Turkish and Kurdish communities where women are forced to marry cousins, members of their tribe and extended family in order to reinforce kinship networks business ties and tribal alliances.

• Brandon & Hafez (2008)
Motivations for forcing a young person into marriage

Parents may argue:

- **Protecting their child**: preventing or stopping a child being involved in culturally/religiously opposed and undesirable behaviour
- **Mental ill-health**, 
- assisting claims for residence and citizenship and 
- **death of a parent** (Hester 2008),
- **Upholding cultural/religious values**
- **Upholding family honour** (Hester, 2008; Gangoli, 2006; Samad, 2003)

- Family community pressure/expectations
- Strengthening family bonds and roots
- Guaranteeing family assets stays within the family
Qualitative research studies

• (Hester et al 2008; Asian Women’s Resource Centre, 2005; Samad et al (2003) ) have revealed that the roots, reasons and motivations cannot be attributed to any one factor

Instead:

Compilation of themes interact:
- cultural and religious values,
- socio-economic,
- immigration,
- gender,
- religious duty,
- perceptions about children behaviour
- what constitutes good parenting.

- Further complicated by- different tiers and influences depending on different communities, or part of communities and individual family all appears to have impact on perceptions and responses to forced marriages
Police Protection Order for up to 72 hours s46 Children Act 1989

- S17 (1) (e) Police & Criminal Evidence Act 1984 (PACE) to enter and search any premises in order to protect life or limb

Emergency Protection Order s44 Children Act 1989 up to 8 days to safeguard a child’s welfare

Care Orders s31 and Supervision Orders s38 Children Act 1989

- Inherent Jurisdiction to protect child as other orders not appropriate due to age. May be sought where there is a real risk of a child/young person being forced into marriage or after marriage has taken place. Child can’t leave the jurisdiction without court’s permission.

Wardship to High Court Family Division s100 Children Act 1989. Wardship has greater influence in foreign states

Tipstaff Orders in child abduction cases – “seek and locate” with a warrant ordering any person with knowledge of the child/young person to give information to Tipstaff

Forced Marriage Protection Orders from the Civil protection Act 2007

Non-Molestation Orders under s42 Family law Act 1996 which forbids a spouse, family member or someone living in same household from using violence or other behaviour amounting to harassment against the applicant.

Occupation Orders under the Family law Act 1996 to remove a spouse from a house

Injunction Against Harassment under the Protection from Harassment Act 1997 if a person knowingly pursues a course of conduct at least on 2 occasions against the person that amounts to Harassment. S12 of the Domestic Violence, Crime & Victims Act 2004 which came into force in 2009 allowing courts to impose Restraining Orders in specific circumstances.
Forced Marriage Protection Orders

• Forced Marriage Protection Order (FMPO):

to prevent or pre-empt forced marriages from occurring and to protect those who have already been forced into marriage.

• The order can include restrictions or requirements to protect a victim from a spouse, family member or anyone involved - and the order can relate to conduct either within or outside of England and Wales.

• In cases involving children, FMPOs can be used alongside wardship and other Orders (-Involvement can include aiding, abetting, counselling, procuring, encouraging, or assisting another person to force or attempt to force a person to marry).
Prevention building resilience

- **Community conversations**
- **Family work**- reframing and different ways of responding

- **Building resilience** in young women and girls who may otherwise be vulnerable to a forced marriage is one key strand that needs more in depth consideration when considering how to prevent forced marriages:
- young Asian women can find *methods* whereby they can manage to be part of their communities whilst also developing lives that reflect individual autonomy. (Anwar 1998; Bano 1999; Basit 1996; Bhopal 1999; Bradby 1999; and Ralson 1997)

-Evidence of a change in marriage patterns-developing strategies -education as a means of postponing marriage and avoiding shame and cultural expectations. Bradby’s (1999)

-Young Muslim women in Canada, Australia and New Zealand were also carrying out ways of forging identities that allowed them to maintain both cultural heritage and develop ways of *weaving into levels of independence associated with the host culture* (Ralson (1997))
Many detailed accounts of and impact of forced marriages.

However, there appears to be no research looking at:
- the specific dynamics,
- relationships,
- interactions,
- histories and
- familial culture of those families where forced marriage of a child or young person has occurred

And how they differentiate from other similar families – without forced marriage

(Sanghera 2007; Spiral of abuse: Forced-marriage victim speaks out 2008; Forced marriage: Give me shelter 2006, the Invisibles, 2008)
Honour crime is practiced in more than 54 countries including the UK.
In Britain it is almost exclusively confined to minority communities.
Ruksana Naz

- Ruksana Naz was seven months pregnant when she was held down by her mother and strangled by her brother for leaving her arranged marriage and becoming pregnant.
Heshu Yunes
Banaz Mahmoud Babakir Agha

- Banaz Mahmoud Babakir Agha, was found buried in a suitcase in a garden in Birmingham.

- Banaz approached the police several times to ask for help, but they failed to support her, thought her a drunk attention-seeker and even considered charging her with criminal damage for breaking the window.

- The most serious allegations from Banaz was on the New Year’s Eve, after her father had plied her with brandy and tried to kill her.
Six-year-old Alisha Begum burned to death in an honour-related arson attack

Alisha Begum,
What is thought to be ‘dishonourable’:

- Running away, coming home late
- Ideological differences between parents and children
- Refusing arranged marriage
- Relationships outside marriage
- Relationships outside the approved group
- “Inappropriate” make up, or dress
- Losing of virginity
- Pregnancy
- Homosexuality
- Reporting/fleeing domestic violence, forced marriage
- Girls who "allow themselves to be raped"
- Causing gossip
global data honour killings correlated

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<tr>
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<td>Wives or girlfriends</td>
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<td>Daughters (unmarried, divorced)</td>
<td>sex, rape, loose morals</td>
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<td>Sisters (unmarried, divorced)</td>
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<td>Defence of family honour</td>
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<tr>
<td>Brothers</td>
<td>Defence of family honour</td>
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<tr>
<td>Uncles (usually paternal)</td>
<td>Defence of family honour</td>
</tr>
<tr>
<td>Sons</td>
<td>Defence of family honour</td>
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Khan (2006)
Distinct Factors

• Multiple abusers.
• Internalized devaluation and victim-blaming.
• Gender roles tightly prescribed.
• Community response to violence: victim blaming, silencing, shaming, and rejection of battered women who speak up or seek help.
• Covert or overt support and the lack of sanctions against the perpetrator.
• Recent prosecutions show:
- crimes are well organised,
- planned by *more than one individual* and may have been instigated by others.
- *premeditated*
- *multiple offenders* being involved, which include family, extended family and community members in the UK and overseas.

Police: implications of the conspiratorial nature of such crimes consider whether it is necessary and justified to utilise the tools that are most effective against organised crime e.g. covert intelligence techniques.
• In a number of high profile honour based violence cases
• - at least three people were involved in the actual commission of the murder and were involved either in the preparation, its encouragement or its cover up.

• It is not unusual for the youngest member of the family to be the most heavily implicated.
• Those who commit honour based violence killings often choose the youngest member of the family to carry out the act in the expectation that they will receive the most lenient sentence.
Some high profile and some not so high profile cases - how many more...

- Victoria Climbie - 2000 pastor declared she was possessed, prayer and fasting without food and water

- In 2001 the torso of Adam found in the river Thames

- In 2004, three-month-old Samira Ullah was murdered by her father because he was convinced she was possessed by an evil spirit.

- In 2005 Child B aged 10 beaten, cut with a knife, whipped, chillies rubbed in her eyes, bound and placed in a bag - threatened with drowning

- In 2008 Khyra Ishaq was starved to death by her mother and mother’s partner who believed she was possessed.

- Dec 2010 – allegedly 15 year old boy beaten and drowned as he intervened to protect younger sibs accused of being witches

- Dec 2010- religious ritual believed to be behind death of 4yr girl who was found with her heart cut out and other organs strewn round home
Defining spirit possession

- The concept of spirit possession is given credence where there is belief in a supernatural sphere and in its influence on the physical world.

- In most major religious and cultural tradition worldwide there is the idea of spirit possession and the need for some form of exorcism.

- The rites of exorcism historically and globally included the use of prayers, commands, negotiations, gifts, fumigations (burning of dung), holy water, use of herbs/concoctions, to ‘violent’ responses
Supernatural powers

- Kindoki
- Demons
- Witchcraft
- Evil spirits/ghosts
- Jinn
- Magic
- Horoscopes
- Voodoo
- ‘Punishments’ - previous lives

Usually relates to a malicious, force: the deliberate intent by people in conjunction with spirits, or the spirits directly themselves, to inflict harm.
Case example
Parents believe two children are possessed by evil spirit.
Children allege they were physically assaulted
Children deny they have been possessed

Parents believe children are possessed but argue physical chastisement was meted out for naughty behaviour not for possession. Didn’t know it was against the law- won’t do it again. Want the children home delivered through prayer without any hand laid on the children.
- What does kindoki (or whatever they call it) mean?
- Tell me everything about kindoki.
- What do you feel about kindoki?
- How did you find out about kindoki?
- How did you feel inside when your dad said you and your brother (-or- your brothers) had kindoki?
- Tell me of all the people who think that you are a wizard?
- What would you think if someone said they didn’t believe you had kindoki?
Parents

- Do you believe in Kindoki? If yes why?
- How did the separation affect your relationship with the children?
- Do you think you have ever made any mistakes as a parent? (If yes- what?..?)
- What do you think is the most important thing you can give your children?
- Has anything happened to any of your children that you regret? (What...?)
- Tell me everything about kindoki
- Is there a difference between being possessed by an evil spirit and being a witch/wizard if so what?
- Have you ever known anyone to have kindoki other than your sons?
- What kind of things happen in the Congo if accused of being witches?
- How can kindoki be explained in the context of the Bible? Where in the scriptures?
- What methods are referred to in the Bible to rid someone of evil spirits/witchcraft?
- Do you believe that everything in the Bible is the word of God and must be followed literally?
Conversation with parents

- What would be your thoughts if that pastor was to say your boys are not possessed or have kindoki?
- What if you (or your husband) had not had the vision how would you then explain the boys behaviour which at present you say is because they have kindoki?
- Why do you want your sons to come home if you believe that they are possessed and in your opinion they have so far refused to open their hearts to God?
- What if a vision informed you that your wife was possessed- would you believe it? What would you do? What if she denied the truth of your vision what would be your last response?
- What if a vision was to come to you that informed you that your younger sons were possessed- would you believe it? What would you do? What if they denied the truth of your vision what would be your last response?
- You have said that D has become a rebel since she came to England tell me about how she was rebellious?
- What is the cause of her rebellion?
Identifying Child Abuse Linked to Spirit Possession

• Why that child? Is it conscious scapegoating?

• Child abuse linked to a belief in spirit possession often perceived to stem from the child- child with a difference

• The underlying reasons for the abuse are often similar to in form and reason ‘usual’ maltreatment problems.

• Genuine concern expressed for the child- also checking out any ambivalence/suspicions in the context beliefs

• Child’s views

• What does it all mean in regard to risk and strengths
Questions

• Point of reference to gain understanding for the family of what is happening/happened, to understand risk and strengths

• What are the truths
  - Are religious beliefs being used to disguise abuse.
  - Are beliefs being used to explain behaviour, role relationships
  - What role do beliefs play in family’s response to allegation of spirit possession/witchcraft
  - Are the beliefs harmful now and in the future if so how

• Is it abuse that professionals have wrongly clothed as related to spirit possession?

Analysing the responses
Questions

• Need to have close look at: family stresses:
  - family structure,
  - dynamics,
  - roles,
  - relationships,
  - interactions

  disadvantages, deprivation, domestic violence, substance abuse and or mental health, physical health and these factors relationship, if any with the belief/practice
Conversation – key components

• In-depth exploration of life before coming here, family history roles relationships dynamics,

• Contact during separation

• Thoughts – what being united would be like, what it was actually like
Possessed by evil forces and Asian communities

• Adolescents - unacceptable behaviours.

• Explanation for an abuser’s behaviour.

• Remedies: prayers, potions, hypnosis, beatings.

• Growth industry of ‘healers’.

• Considered beyond the remit of professionals.

(Community Partnership Project, Gill, P 2005)
Possessed by evil spirits and African communities

- Misfortune, ill-health, child behaviour can be deemed signs of being possessed.
- Children must say they are possessed or “the demons within them are seen as very strong”.
- Someone who kills or seriously hurts their child must be possessed.
- A pastor or seer has power via God to detect spirits
- Not the business of statutory agencies but is religious - prayer, fasting without water for days, cutting of skin, beatings, forced to vomit...

(Community Partnership Project, Gill, P 2005)
How and why does a belief turn to abuse?

• Fear

• Just as Demons can enter the body so they can be forced out

• Not the child but the demon/ evil that is beaten/burnt- harmed

• Child’s ‘soul’ and human well being will only be served by ousting evil by whatever means otherwise one has failed the child.
Types of Abuse

Beating: – ‘beating the devil out’

• Burning: e.g. with an iron – ‘burning the devil out’
• Cutting/stabbing: – ‘creating a way out for the devil’
• Semi-strangulation: – ‘squeezing the life out of the devil’
• Fasting/starving: – ‘weakening the evil spirit’
• Isolation
• Severe neglect

• Other abuse: sleeping in the bath, cold baths, held under the water, tied/locked up, burned with chilli peppers, salt, ginger, smearing faeces
• Groomed for sexual exploitation, Rubbing chilli peppers and other substances on the child’s genitals
Analysis

- Boys and girls equally at risk.
- Majority of children were in the 8-11 age group (20 cases); next groups were 5-7 years and 12-14 years (9 cases each).
- Schools were the main agency for identifying and referring, next Health.
- Family origin: the majority from the D R of the Congo (13 cases), Nigeria and South East Asia (5 cases each).
- Religion- Christian, Muslim, many unknown
- Place of worship involvement in Church 16 cases, Mosque involvement in 3 case and 16 cases unknown.
- In 6 cases children lived with birth parents, in all other cases one or both parents was not a birth parent.
A child with a difference-

• disability
• illness
• sleep walking
• bed wetting
• nightmares
• displaying challenging behaviour.
Identifying Child Abuse or Neglect Linked to Spirit Possession

- Physical abuse marks. bruises or burns
- Child - noticeably confused, withdrawn, disorientated or isolated
- Child’s personal care deteriorating,
- Child’s parent or carer does not show concern for or a close bond with the child.
- School attendance- irregular or taken out of school all
- Child reporting that they are or have been accused of being ‘evil’, and / or that they are having the ‘devil beaten out of them’.
More Thinking ...what are you wondering about

Mum (ethnic origin Sierra Leone) Christian
Four children: aged- 8, 5, 3 and a 10 month old
Lone Parent.
Mum is a refugee and was looked after as an unaccompanied asylum seeking child aged 14
History of concerns repeated referrals in regard to series of domestic violence incidents, mum lacking emotional warmth and stimulation children all have varying levels of developmental delays
Assessments and interventions: two parenting programmes, family support, parent support advisor domestic violence counselling service.
No change re concerns. But each ‘help’ episode leads to DV relationships end, counselling not taken up and CAMHs goes for a couple of sessions and stops
• Observed: doesn’t attend to children even when prompted.
• Brings no food or nappies.
• When food is provided feeds children when repeatedly cajoled to do so. Presentation marked by blankness, no eye contact or physical warmth towards children.
• The children are positioned by them so that they are next to her; stares into space and, without any words, feed her children. Once finished leave without a word.
• The children show no sign of distress or curiosity from the moment their mothers first left them and showed no sign of acknowledgment her when they enter the room. At times her baby can be heard crying mother does not react.
• She shares that her 8 has no friends and cries a lot, the school is concerned about her.
• The narratives of others’ childhoods multiple traumas of war, witnessing violence, sexual abuse, physical abuse, receiving limited parenting and loss

• She reveals that she is the daughter of a second wife and thus was resented by her half brothers. She witnessed her father being murdered, following which her family were thrown into absolute poverty. Her brothers gang raped her when she was ten years old. She believes her disclosing the rape resulted in her mother’s death. She weeps because she has to hide her history because her community will locate witchcraft in her. Other parents comforted and wept with her and shared their similar experiences and fears. She was then anointed by the group as “Miss Purity”.

• Purity reflected: coped by not feeling and becoming a walking dead person. She then engages on the impact of her traumas on her children. She is able to reflect on her disengagement. She is asked to go and see her children, and to just look at them.
• Within days the children arrived full of energy rather than subdued, the older one began running to her mother when she entered the room and the baby wobbled with excitement on his mother’s entrance into the room. She began to bring food for the children and faced them when feeding and talked to them.

• Miss. Purity brought to the group that she felt a pulling to cut off but knew when it was happening so began to think about what was triggering it.
• By the end of the group sessions school reported her oldest daughter was no longer so distressed, beginning to settle and engage with learning and had made a friend.

• Miss. Purity dared herself to think she is more than an object of sexual abuse. That she can be a mother, she can be anything she wants. Miss Purity wants to work in finance. She is looking at NVQs as a first step to a future of hope.
Resistance because the interventions were not focused in the right places

It was the facilitation of emotional connection with past that became the pathway to freeing up: feeling, reflecting, thinking and beginning to meet the needs of her children in the present.

• Group process and interactions facilitated the practice of emotional warmth, different type of relationship interactions
• Integrated parental engagement strategy,
• Staff: training skills and confidence
• Engagement strategies resonate with reference points/ values of the parents
• Sharing- evidence, approaches, expertise of other schools and services
• Parental needs analysis
BME – what does it mean?

• The term BME is a useful to describe a collectively those not of the dominant community BUT also produces difficulties when considering child protection.

• Some issues, beliefs, practices that may be applicable within one minority community may not be for another though some experiences may be shared.

• Without clear differentiations then there are dangers of not understanding particular cultural beliefs or differences in nuances.

• Nb. To also consider factors of similarities

• Very little in particular is known about the risks and vulnerabilities experienced by mixed parentage children
Defining the most vulnerable BME children is complex

Under-representation of children from Asian backgrounds having contact across all statutory services.

Black children (African and African Caribbean children) are over represented in child in need and looked after children statistics but not in child protection.

Children from mixed ethnic background are over represented in all categories

Not clear is the underlying meaning of this disparity.

Children from some established and newly arrived BME communities are potentially vulnerable but the reason for vulnerability is not presently well understood and the reasons may be different for different groups of BME children (DCSF, 2009).
Key points literature and research: Social Care services and BME families

• Discontentment in services  (Audit Commission/SSI, 2003)
• BME children are disproportionately represented or receive a differential service as children in need of protection  Gibbons et al. 1995; Farmer & Owen, Bebbington and Miles, 1989; Barn, 1993; Barn et al., 1997; The Children Act Report 2000 DOH, 2000; The Children Act Now DOH, 2001)
• Adverse impact due communication barriers and from services not having engaged communities  Betancourt et al, 2002
• A failure to respond effectively to child protection
• Assessments are ineffective because they fail to grasp cultural/religious ways of life and the subtleties of differences in BME families  (e.g. Lau 1998; Maitra 1995; 1996; Hodes 1995)
• The impact of institutional racism- practice not taking this into account
Starting point

• Understand the cultural context of behaviour: what is and isn't acceptable within that community

• Need to avoid misinterpretation of maltreatment as a cultural/religious belief

• Need to distinguish religious belief from practice
Similarities

• All accept that concept of child abuse is wrong

• Practices deemed as benefiting the child

**Challenge to services:**

- How do ensure meaningful exploration and analysis of belief systems into assessments?

- Can we and if so how do we join parents' belief about wanting the benefits and facilitate alternative belief system about achieving the same goal?
Importance of considering diversity

• Integrating exploration of culture and religion into assessment process.

• Culturally referenced points for families to understand accept what changes need to be made in order for the family to better care for the child.

• Culturally framed explanation and intervention in regard to how those changes can be achieved.
Giving some thought to:

- Parenting styles and perceptions of what is child abuse, child development

- The challenges in applying theories and false positive, false negative analysis, effectively undertaking ecological assessment in cases involving diverse belief systems

- Support/ interventions that include faith /culture as strengthening factors
  • Community conversations
  • Family work- working with parents reframing and different ways of responding

- Building capacity and capability to working effectively with families from diverse communities: from early to late help
Example:
Physical chastisement and faith

• "Do not withhold discipline from your children; if you beat them with a rod, they will not die. If you beat them with the rod, you will save their lives." Proverbs 23.14-15

• "The rod and reproof give wisdom." Proverbs 29:15

• "Discipline your children and they will give you rest; they will give delight to your heart." Proverbs 29:17
Example:

**Physical chastisement and faith**

- If all other ways fail physical discipline permitted. The head, face, chest, and stomach are never to be touched nor should a child be caused to become unconscious.

- One who does not show respect to the wishes of their parents is will be punished – Sikh scriptures
Facilitating a re-focus on beliefs

Christian Quote

“ But whosoever shall offend one of these little ones which believe in me, it were better for him that a millstone were hanged about his neck, and that he were drowned in the depth of the sea."

• Matthew 18 (verse 1-6)
Islamic quote

• Prophet Muhammad said, “Whoever does not show affection to the young and respect to the old is not of us”.
Facilitating a re-focus on beliefs

- Christianity – good parenting:
  - To be gentle and loving with their children  Ephesians 6:4; Colossians 3:21
  - To be physically accessible to their children Deuteronomy 6:6-7
  - To interact with their children- essential  to teach about relationships and understanding the world (Ephesians 6:4)
  - To teach their children the Scriptures  (Psalm 78:5-6, Deuteronomy 4:10, Ephesians 6:4)
  - To cultivate children’s aptitude for learning and nurture their talents (Proverbs22:6)
  - Disciplining ( this may well open discussion of other forms of discipline than physical chastisement) , setting consistent boundaries and giving consistent guidance based on the Scriptures, (Ephesians 6:4, Hebrews 12:5-11, Proverbs 13:24)
  - To nurture and love children by creating an emotionally healthy environment giving verbal encouragement affection and love.  (Titus 2:4, 2 Timothy 1:7, Ephesians 4:29-32, 5:1-2, Galatians 5:22, 1 Peter 3:8-9)
Facilitating a re-focus on beliefs

Hinduism messages: good parenting

• Children are gifts from gods and products of their previous lives and must be loved and looked after properly.

• Parents and children share the same destiny, so the father has a great sense of duty and responsibility to his children.

• Children have to be brought up in an atmosphere of truth.

• Parents must met their children’s physical, economical emotional and spiritual needs
Facilitating a re-focus on beliefs

*Islamic messages: good parenting*

- The family is an essential social unit that must always be supported.
- Children are entrusted to parents - do not belong to parents. Parents’ should not break this trust.
- The parent and child relationship is one of the most important relationships formed and within such a relationship, Islam, provides rights and responsibilities.
- Children have a right to be cared for, nurtured and educated. Parents have the responsibility of meeting these needs.
- Children have a right to be raised to follow the teachings of their faith - which provides them with moral and spiritual development. Parents have a duty to ensure this occurs.
- A father has the responsibility of guiding, caring and protecting his family.
Facilitating a re-focus on beliefs

*Sikhism: good parenting*

- Family is an important basic structure.
- Parents should meet the economic and educational needs of their family.
- Parents should provide social, cultural, political and spiritual learning for children.
- Parents should physically and psychologically nurture their children.
- Parents should teach children about Seva, service to society/humanity.
- Parents should ensure that family life consists of love, optimism, laughter, pride, pity, joy, gratitude, respect, purity, service and sacrifice.
- Children should be taught to love and respect the parents, grandparents and society at large.
Child abuse And Migrant Communities

Interplay of the macro and micro:

- Alien value systems of wider community. Fear or actual disintegration of cultural values
- Racism.
- Migration.
- Health.
- Alcohol and drugs.
- Faith
  - History
  - Identity

COMBINED WITH

- Faulty coping mechanisms and distortions of values/acting out traditions, customs, religious value systems where most would not.
Judgements

Pitfalls

• Cultural relativism
• Stereotyping- pathology
• Lopsided emphasis on multiple disadvantages and structural inequalities

• Making judgements risks and strengths without a baseline understanding of cultural/religious values
Applying the guidance

• Are professionals in a detailed way - making sense of differing family patterns and lifestyles and to child rearing patterns and weaving that into assessments?

• Are professionals considering if and how religious beliefs and cultural traditions values, attitudes and behaviour impact on parenting re strengths and risks?

• Are professionals exploring, identifying and analysing if and when family cultures differ from their community culture and the meaning of this?

• Are professionals guarding against myths and stereotypes

How do we translate guidance into effective practice?
Levels of divergence and meaning-belief or action
Understanding the texture of risk and strengths

• The interplay and weight of multiple facets:
  • correlation between beliefs, environmental, situational family dynamics, impact of migration, attachment relationships, community and parental history, parental mental ill health, domestic violence, parental and or child with a disability

and how these impact on family climates and potential for abuse.

• What are the cultural influences on the psychological and social response to and processing of abuse

• Why a cultural belief may lead to abuse in one family but not another of the same community?
Example of some of the multiple determinants

- Cultural exploration of concern/strengths
- Parent's history
- Community history
- Community Beliefs
- Psycho-social response and processing of abuse
- Family dynamics and roles
- Child's development
- Parents'
- Beliefs
- Parents' history
- Community history
- Developmental histories
- Impact of migration
- Relationships
- Environmental factors
- Social context
- Adult relationships, environment