

## **Response to GREVIO's Baseline Investigation Questionnaire & the UK Government's State Response <sup>1</sup>**

### **Background to the Resist Network's GREVIO Submission**

This submission has been co-produced by 9 frontline, independent, grassroots, civil sector organisations working directly with black, minoritised (BME) and migrant women, girls, and children, based largely in the North of England and Scotland.<sup>2</sup> Together they make up the Resist Network, a coalition that is co-ordinated by Project Resist, an autonomous organisation recently set up to empower marginalised black and minority women in the UK to realise their rights and freedoms in all aspects of their lives, civil, social, political, economic, and cultural. We strive to challenge all systems of power, privilege and censorship that stand in the way of women's access to equality, dignity, peace, and security.

Our organisations collectively hold decades of expertise in service delivery and development, strategic policy, and campaigning. Our work includes the provision of domestic abuse and sexual violence advocacy, training and therapeutic support, refuges, safe accommodation, survivor voice platforms from a rights-based position. Our specialist work has a particular focus on supporting *economically and socially excluded* BME and migrant women, girls, and children, including those without recourse to public funds. All of our organisations are working to end violence against women, girls, and children whose experiences lie at the intersections of partner, family, community, institutional and state abuse. We address local, regional, and national failures in respect of VAWG and highlight the gaps in support and protection for black, minoritised and migrant women and children.

We make this submission to GREVIO's (Group of Experts on Action Against Violence Against Women and Domestic Violence) Baseline Questionnaire call for evidence, specifically in response to the UK government's 'Baseline Report' which was submitted in June 2023.

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<sup>1</sup> Report submitted by the United Kingdom pursuant to Article 68, paragraph 1 of the Council of European Convention on preventing and combating violence against women and domestic violence. Received by GREVIO 30<sup>th</sup> June 2023.

<sup>2</sup> This report has been co-produced by: Angelou Centre, Apna Haq, Humraaz, Project Resist, Rochdale Women's Welfare Association (RWWA), Saheli, Sangini, Safety 4 Sisters and Ubuntu Women Shelter. These organisations directly support women and children in the North West, Yorkshire, North East and South Scottish regions. All organisations also work within a national remit due to their strategic advocacy/campaigning work and specialist refuges and safe accommodation services.

### Submission Context and Content

We seek to raise our concerns about the UK Government's Baseline Report and its inability to meet the minimum standards and duties of the Istanbul Convention's legal framework in relation to black, minoritised and migrant women and girls. We also hope to increase GREVIO's knowledge of the specific work and challenges faced by specialist organisations, especially in Northern and Scottish regions of the UK, and to raise awareness of the considerable gap that exists between law and policy on violence against women and the serious lack of implementation and institutional accountability that exacerbates women's experiences of VAWG. We make our submission in the knowledge that a sector wide national *Shadow Report* has been submitted to GREVIO (December 2023) which provides a comprehensive and detailed overview of the government's implementation of the Istanbul Convention so far, alongside references to recent policy and research from the VAWG sector.<sup>3</sup> To avoid any duplication of the *Shadow Report*, our submission will complement this by focussing on continuing state failures using examples and data from our organisations and from the victim-survivors we support. All quotes provided (in purple italics) are taken from a consultation that was held with members of the Resist Network in November 2023 and from case studies that we have gathered.

In this submission, we will respond to the sections of UK Government's Baseline Report most relevant to our organisations' work with BME and migrant women, girls and children. We have set out our response in accordance with the Baseline Questionnaire itemisation in paragraphs that correspond with, the structure of the GREVIO questionnaire. Should GREVIO require further details, elaboration, or evidence we will be happy to provide that information on request. Representatives from the Resist Network will be attending the roundtable discussions in Manchester, London and Glasgow in January and February 2024.

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<sup>3</sup> VAWG sector Shadow Report submitted to GREVIO December 23 can be found here:  
<https://www.endviolenceagainstwomen.org.uk/58-vawg-organisations-submit-shadow-report-to-grevio/>

## The Resist Network's Response to the UK Government's Baseline Report (June 2023) & GREVIO Questionnaire

### PART I: Introduction

*"It becomes dangerous, harmful, and more violent for survivors when women are refused support. The state's treatment of women, police treatment of women perpetuates violence instead of appropriate intervention, which impacts on women and children".<sup>4</sup>*

- A. At the state level, the UK government fails to have a co-ordinated approach to violence against BME and migrant women victim-survivors. Contradictory measures and laws are often enacted in different areas of policy and they are not fully assessed for their impact and equality outcomes. This results in any gains made on violence against women being undermined and creates insurmountable barriers for victim-survivors to exercise their rights. This then heightens victim-survivors' risks and vulnerabilities to violence in both the private and public spheres. Increasingly hostile anti-immigration laws and policies have impacted on BME and migrant women's right to protection and have institutionalised discrimination, deprivation, and marginalisation.

For example, recent domestic legislation has undermined the UK Government's (from herein 'state') ability to meet the General Principles of the Convention particularly in relation to women's human right to 'lead a life free from violence in both the public and the private sphere' and to do so 'without discrimination on any ground.' (Articles 3 and 4) This is partly due to the state's attempt to dismantle the welfare and legal infrastructure that guarantees '*fundamental human rights*' including access to rights. For example, the recently enacted Illegal Migration Act (2023), the Nationality and Borders Act (2022) as well as the recently proposed 'Safety in Rwanda' Bill (2023) will directly impact on the protections afforded to BME migrant (including EEA migrant) victim-survivors at both national *and* local levels. These laws exclude BME victim-survivors from certain state enshrined rights to safety and protection from violence and abuse. They also give local statutory services and generic domestic abuse services the legal right to leave women and children victim-survivors, destitute, homeless – and as many of the quotes cited demonstrate – at further risk of exploitation and violence. These measures are both deliberate and punitive. They will penalise trafficked victims from disclosing their exploitation and will prevent foreign national victims with convictions who are already overrepresented in the prison system, from accessing support even where their

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<sup>4</sup> All quotes in purple taken from network consultation in 28<sup>th</sup> November 2023.

offending is related to domestic abuse and coercive control. Ultimately, the aim of such laws and policies is to ramp up a hostile, deterrence culture towards migrants within all state agencies even those that have a duty to identify vulnerable victims and to protect and support them.

The government has also made continuous threats to pull out of the European Convention on Human Rights and to remove the Human Rights Act (1998). Proposals have been made by politicians to weaken or eradicate the Equality Act (2010) and the Public Sector Equality Duty that are vital for holding state institutions to account. These moves will fundamentally violate women's rights and in particular will have a disproportionate impact on BME and migrant women's rights and their access to protection and justice. It could also lead to the organisations that support them (such as those in our network) being de-commissioned and defunded.<sup>5</sup>

- The state's current legislative and strategic scope and definition of VAWG sets out an 'apartheid' approach to women's protection from violence and abuse. At present this two-tier system is outlined by the state's artificial separation of 'domestic abuse', the definition of which is posited within the Domestic Abuse Act, and other forms of 'VAWG' – which sits within the state's *Tackling VAWG Strategy* and does not have the same legislative bearing or powers of the Domestic Abuse Act. As a result, harmful practices and forms of sexual violence and domestic abuse that disproportionately affect BME, migrant and disabled women are not equitably addressed or funded. Two problems arise: first, there is a strong tendency to treat forms of abuse and violence against BME women as if they are in 'cultural silos' i.e. forced marriage, honour-based violence, female genital mutilation and so on – which are deemed to be aspects of 'harmful cultural practices'. This approach attributes the concept of harmful cultures to minorities only. Secondly, and leading from this, BME women's concerns tend to be located outside of human rights frameworks and strategies on violence against women. Intentionally or unintentionally, this has the effect of encouraging differential and culturally relativist community or religious based solutions to violence against BME women which reinforce patriarchal systems of control and undermine their fundamental human rights and freedoms.

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<sup>5</sup> See: <https://www.theguardian.com/law/2022/mar/27/amnesty-hits-out-at-tory-plans-to-replace-human-rights-act-with-bill-of-rights> & <https://www.theguardian.com/politics/2023/feb/05/tory-mps-to-push-for-uk-exit-from-european-convention-of-human-rights>

## PART II: Integrated Policies and Data Collection

*“Women have no choices. They are not referred to domestic violence organisations when they have visa issues and are left on the streets. If we didn’t do a lot of work in the community women wouldn’t refer to us, most of our referrals are from the community because of this.”*

- A. Despite the state’s development of a VAWG strategy (*Tackling VAWG Strategy*) in 2021, it is failing to deliver ‘comprehensive and co-ordinated (VAWG) policies’ (Article 7) that make a difference to local and regional statutory and VAWG stakeholders.<sup>6</sup> The state has only delivered 30% of its 100 commitments as set out in the strategy document and it has not shared any formal plans to address this slippage. This leads to unequal and inconsistent local and regional responses and reduces the government’s ability to deliver services to BME and migrant women “at national and local levels” (p.1) Many areas struggle to meet the needs of BME women but migrant women in particular, are more likely to be excluded due to their lack of options for a safe exit from abuse. The few specialist organisations for BME and migrant women that exist have to extend their reach considerably to ensure that women have referral points to their services, as is evidenced by the quotes cited throughout our submission.

BME led by and for organisations are rooted in delivering intersectional, holistic, wrap around ‘VAWG’ services that range from advocacy to crisis recovery and practical support which includes support for sexual violence victim-survivors. This is due to the multiple economic, social and cultural barriers they face in addressing all forms of gender-based harm (including forced marriage, FGM and HBA) and the lack of appropriate support available to them from statutory and, generic VAWG services. As per the government’s Baseline Report, the current *Tackling VAWG Strategy* is where services who “fall under the support the ‘umbrella’ of VAWG” (p.1) are strategically placed. The state’s maintenance of two policies: one on VAWG and the other on domestic abuse (*Tackling Domestic Abuse Plan*) is not logical since VAWG is experienced as a continuum involving a range of forms of abuse that can be experienced simultaneously.<sup>7</sup> It also leaves many BME led organisations’ service users ‘outside’ of legislative protections as their experiences of varied forms of gender-based harm are not included or protected within the Domestic Abuse Strategy. This also has major implications on funding and strategic policy making.

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<sup>6</sup> UK Governments *Tackling VAWG Strategy* (2021): <https://www.gov.uk/government/publications/tackling-violence-against-women-and-girls-strategy>

<sup>7</sup> UK Government’s *Tackling Domestic Abuse Plan* (2022): <https://www.gov.uk/government/publications/tackling-domestic-abuse-plan>

*“No other agencies would support her...[we] use our own hardship funding- we don’t get funded for that, but we have to dig into our pockets, community pockets, and reserves to support her. We are not commissioned to do this- but who else will sort this out?”*

The government’s recent *Tackling VAWG Strategy Funding* commitment was just over £8 million. Only 250k of this funding was awarded to a BME led service (based in Preston), £1.5 million was ringfenced for BME organisations through local authority commissioning in 2 areas, Manchester and London. Over £6 million went to non-specialist generic or statutory services, including 500k for Mankind which is not a VAWG service and supports men. This means that BME led services are only being funded in 3 UK cities through the government’s only ‘specialist led by and for’ funding pot. No organisations north of Preston (there is 142 miles between Preston and the Scottish border) are in receipt of any Tackling VAWG Strategy funding. BME victim-survivors are therefore hugely disadvantaged in the north and have reduced or no access to appropriate services due to their location.<sup>8</sup>

- B.** We have concerns about the planned £230 million funding in the form of grants that will be made available through the *Tackling Domestic Abuse Plan* (See UK’s Baseline Report p.4). Our fear is that Home Office and wider government funding will remain inaccessible to many BME led VAWG services due to the stipulations, criteria and financial thresholds applied to these grants which excludes them from making bids. The bulk of government funding is often applied for and held by local authorities or large second tier organisations that are also meant to reach grassroots BME women’s VAWG service via local authority commissioning arrangements or other small local grants provisions. This disadvantages BME organisations who often find themselves having to bring legal challenges to local authorities for their failure to protect vulnerable women and children, (see quotes throughout this submission), in particular those from migrant backgrounds. This marks BME led violence against women and girls services out as being ‘divisive’ and ‘problematic’ and as a result they are unlikely to have their expertise included strategically in action plans or to be equitably funded. This situation results in a ‘patchwork of provision’ and postcode lottery for BME and migrant women, a reality that was recognised by the Domestic Abuse Commissioner of England and Wales. In our view it also amounts to what we consider to be the effective regional *defunding* of specialist BME and migrant services outside of London.<sup>9</sup>

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<sup>8</sup> See Tackling Victims Strategy awards here: <https://www.gov.uk/government/news/funding-boost-for-specialist-victim-support-services>.

<sup>9</sup> See the DAC’s evidence and data regarding the patchwork of provision for BME and other survivors here: <https://domesticabusecommissioner.uk/national-mapping-of-domestic-abuse-services/>

**Good Practice Example:** Northumbria PCC's funding ecology demonstrates their firm commitment to providing community-based service provision and includes ringfenced funding for specialist BME services. Their commissioning model is based on close relationships with diverse community-based services and projects.

- C. The Baseline Report states that the government "regularly engages with stakeholders on tackling VAWG" (p.5). However, stakeholder inclusion at these meetings focuses on second tier representation involving organisations and policy makers that are London centric. Second tier organisations will on occasion invite frontline services, but these tend to be based in areas south of Manchester. Small frontline grassroots organisations with incomes below 250k are rarely consulted. The lack of meaningful engagement with either northern regional or small grassroots organisations leads to socio-economic disparities and unequal provision for BME and migrant victim-survivors, as well as impoverished local decision and policy making and ineffective multi-agency guidelines.

*"We can see a lot of change in our communities because of our organisations, this is not due to council or government support, it's because by and for services in the community do a lot of prevention work."*

Regionally there are distinct socio-economic and social differences for victim-survivors and the BME VAWG organisations that support them which are not properly represented nationally, although they carry the burden of supporting victim-survivors of VAWG. For example, in the North of England and Scotland there appears to be a higher rate of destitution involving women with No Recourse to Public Funds (NRPF), and a greater number of refugees and asylum seekers who are 'dispersed' to these areas due to housing stock being cheaper. But this also results in higher levels of corporate initiatives that profit from the provision of sub-standard and tax-exempt accommodation and asylum/detention centres.<sup>10</sup>

The above issues exacerbate what is already a serious problem: the lack of accurate disaggregated data available in relation to sex, race, and socio-economic status (particularly in relation to migrant victim-survivors) and the rise in VAWG and other harmful practices (see paragraph E).

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<sup>10</sup> See Commons debate and issues arising from 'exempt accommodation' here: <https://commonslibrary.parliament.uk/research-briefings/cbp-9362/>



- E. The state's lack of disaggregated data is compounded by an absence of robust and cohesive regional and local monitoring mechanisms. This results in skewed multi-agency understandings of all types of VAWG including coercive control and the lack of understanding of the prevalence and severity of VAWG on local populations, leaving the needs of BME and migrant victim-survivors, in particular, invisible to public policy makers. The Resist Network has considerable evidence (via referral data) to show that local statutory services rarely accurately record sex and ethnicity or forms of violence. This affects how risk and the needs of victim-survivors are assessed by statutory agencies and it also affects decisions on the commissioning of local services which in turn, is often based on inaccurate needs assessments.

*"There's such a slow response, lots of red tape, a lack of good assessments – it's all taking too long and women are not safe. They (state services) expect DV services especially BME services to carry out work that they should be doing."*

Over 60% of women who access the Resist Network services, which includes projects led by and for migrant women, have insecure immigration status. 50% of such services run independent safe accommodation projects that support BME migrant women and women without NRPF but none of these projects are funded by the state at local or national level. The Resist Network's collective services provide the majority of safe accommodation for women with NRPF in the North East and West of England and South West of Scotland. In some local authority regions such as Northumbria, Resist Network services provide the only safe accommodation for NRPF women. In the North East, due to austerity measures and policy decisions, there remains only 2 specialist led by and for BME refugees across a 100 mile radius.

*"She was put in a B&B, was not referred to services, she had no log number, she had to pay for the B&B. She was given no support despite having no English, she was very scared."*

As BME VAWG services are often not funded through the state's commissioning policies at a local level, they are excluded from contributing to the collection of data at a local level. This means that their data is also not included in any strategic needs assessments to ascertain the level of VAWG provision needed in local communities. There is also no national second tier led data collection system in operation for BME VAWG services.<sup>11</sup> Local Police and Crime

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<sup>11</sup> For example, Women's Aid Federation England has an 'On track' national electronic database system that organisations can buy-into, this informs much of data by Women's Aid captured and their policy making. However, the data system has an annual cost that is neither affordable nor appropriate for many BME grassroots organisations. In addition, over 50% of BME led by and for organisations **are not** Women's Aid members.



## **Resist Network: Response to GREVIO Questionnaire January 2024**

Commissioners through their local commissioning of IDVA/ISVA, outreach, safe accommodation, and children's services do collect data, but as many BME led service remain un-commissioned, their data is not included.

### PART III: Prevention

*“They don’t want to use funding for migrant women so they take the child and give them back to the abuser.”*

*“We challenge social services using the local law centre- we had a case when social services told a woman to sort it out with her husband or they would have to take the child away.”*

*“We complained to the council who picked it up- but this is clear racism and is putting women at risk. What would have happened if she had been turned away and went back to the abuser?”*

Our organisations and the survivors we support face extreme levels of abuse, discrimination and other punitive responses that include the manipulation of statutory agencies, criminal justice system and the family courts by perpetrators to further abuse and control women. In the light of this, the ability of social workers, the police and other statutory agencies to understand the dynamics of domestic abuse and its impact on victim-survivors and their children is critical and yet it is severely lacking.

The government has provided a somewhat obfuscatory response in its summary of its adherence to professional standards and the training of social workers (p.12). Whilst it refers to the development of ‘practice and skills’ in relation to domestic abuse ‘risks and decision making’ (p.12) on the ground, there does not appear to be any proper and continuous formal domestic abuse training in place and more importantly, any adequate implementation of such learning. For example, the DfE’s national statistics for 2023 reveals that of the 406k Children in Need enquiries completed by children’s social care, 160k involved domestic abuse.<sup>12</sup> However, region to region, particularly in the North East, Yorkshire and North West of England, too many victim-survivors and their children are failed by social services. The numbers of BME children placed in care remains disproportionately high and local authorities have to be continually legally challenged by Resist Network organisations to fulfil their Section 17 (Children Act) duties.<sup>13</sup> Our experience highlights a range of problems and inconsistencies of approach by social services across the UK. Some of the

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<sup>12</sup> [https://www.communitycare.co.uk/2023/10/30/child-protection-enquiry-total-hits-new-annual-high-but-proportion-finding-abuse-continues-to-shrink/#:~:text=The%20most%20common%20concerns%20identified,9%2C690\)%20on%202021%2D22.](https://www.communitycare.co.uk/2023/10/30/child-protection-enquiry-total-hits-new-annual-high-but-proportion-finding-abuse-continues-to-shrink/#:~:text=The%20most%20common%20concerns%20identified,9%2C690)%20on%202021%2D22.)

<sup>13</sup> <https://explore-education-statistics.service.gov.uk/find-statistics/children-looked-after-in-england-including-adoptions>

responses are unlawful or border on illegality and others betray deep seated hostility and racism. There is often indifference or a lack of understanding of abuse and coercive control and interrelated issues that impact on the most vulnerable women and children causing them to become destitute and at high risk of further violence. Taken together, these failures amount to a dereliction of the duty of care on the part of social services to vulnerable adults and children under Section 17 of the Children Act 1998.

*“They are not being trained particularly when it’s about migrant woman, they just want to know what her immigration status is.”*

Although domestic abuse training continues to be rolled out across all regional police forces in England and Scotland, the majority of contracts are given to national generic second tier organisations to deliver the training even though they do not have an understanding of local community needs or issues and are not specialist BME VAWG providers. Combined with the lack of data, local authorities hold about BME victim-survivors and the fact that some authorities lack *any* engagement with specialist agencies, this training is often not conducive or inclusive of the needs of/or risks to BME victim-survivors. We cite examples of the failure of the police to follow basic protocols in relation to violence against vulnerable BME and migrant women and girls in response to Part V of our submission demonstrating large gaps in training and knowledge.

**Good Practice:** Apna Haq, Humraaz, Angelou Centre, Project Resist, Sangini, Ubuntu Women Shelter, Safety4Sisters, Saheli and Rochdale Women’s Welfare Association (who are all members of the Resist Network) have developed specialist rights-based training packages and modules to address local gaps in knowledge of the specific barriers faced by BME and migrant victim-survivors for local statutory services. The training they provide includes the development of local multi agency protocols to improve local practice in areas such as sexual exploitation, sexual violence and other harmful practices, and abuse arising from women’s lack of immigration status.

## PART IV: Protection and Support

*“If there is an issue and law enforcement breaks down, the women can trust no one- immigration opens up an additional pathway to abuse and threats of violence. We are now there to provide protection because the women have none.”*

- A. The state’s protection and support of BME and migrant victim-survivors is often both inconsistent and discriminatory. There are failings, in relation to Article 18: General Obligations of the Convention, to take “the necessary legislative or other measures to protect all victims from any further acts of violence”. In its Baseline Report the government cites the Victims Code of Practice as evidence of its compliance with the Convention “to ensure effective and consistent local oversight of how victims are treated ...across the criminal justice system.” (p.22) In our view, this is not an adequate measure since the Victim’s Code is neither VAWG specific nor properly implemented due to the lack of resources needed to make victim-survivor engagement with the criminal justice system safe and meaningful. Nor is there any data available on the success or failure of its implementation (if indeed it is being consistently implemented).

*“Police arrested this very tiny woman as an ‘abuser’ and took her into custody. She is Indian and came into the UK on spousal visa, she’s been in an abusive situation for 12 years. Perpetrator said she was abusive to the family - the perpetrator and children. The police kept her in the station until 10pm- for 10 hrs and left her there terrified, she couldn’t speak because of distress. Police got her a custody solicitor who assessed that she was not the abuser and that she was the victim. The police then gave her numbers to ring for support, they didn’t give her any further support or help. They told her to go, didn’t refer her to a domestic abuse or women’s service, she had nowhere to go. She ended up walking around the streets for 3 days.”*

A number of high-profile cases of police perpetrated abuse and reviews on police misconduct have revealed an unprecedented level of racial discrimination, misogyny, corruption and a complete lack of public trust in the criminal justice system.<sup>14</sup> Too many victim-survivors who report abuse or who commit offences in the context of abuse, continue to be ignored and worse still, arrested, detained and imprisoned as perpetrators of abuse. Survivors and those who support them tell us that the police and the wider criminal justice system all too often, lacks even the basic understanding of coercive control and from this flow a series of further failures and adverse consequences. Far from offering protection, women are punished for trying to protect themselves from escalating and life -threatening violence. Others are criminalised when counter-

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<sup>14</sup> Amongst these reports are a number by the Centre for Women’s Justice, who will be launching a new report into the criminalisation of BME women in 2024: <https://www.centreforwomensjustice.org.uk/policy-research>.

allegations are made by perpetrators whose accounts are taken at face value, whilst yet others are arrested and prosecuted for committing offences in contexts of economic abuse and coercion.

For these reasons, the Resist Network front line services report that they have to deliver high levels of institutional advocacy over a long period to ensure that women and children are not further abused, exploited, or criminalised by the very system that is meant to provide protection and justice. However, not all women and children benefit from such advocacy support due to a lack of funding and resources:

- Our organisations provided complex intersectional advocacy case work support to over 70% of our service users both in safe accommodation services through outreach. In 2022-23 our organisations supported 1730 BME women and children, 30% of this casework involved direct challenges to statutory and generic agencies due to their discriminatory actions or failure to equitably support women and children such as Section 17 challenges and police complaints.

**B. 1&2:** In the Baseline Report, the government claims that the NHS's Domestic Abuse and Sexual Violence Programme will "Transform England's response to sexual and domestic violence" (p.26).

BME led by and for organisations rarely receive health related funding through the NHS, despite positive health outcomes being central to their work given that evidence shows that health inequalities are particularly high amongst BME and migrant women. This includes higher rates of suicides and self-harm linked to VAWG. (evidence is available upon request). Members of the Resist Network are often called upon to provide a range of 'social prescription' health support to BME and migrant women, and across the organisations we receive up to 15% (n=259) of our referrals from health (GP, maternity/community services, mental health programmes). Our organisations are regularly called upon to provide training, advice, guidance, and support – particularly to community-based GP practices. Our organisations have also been involved in non-paid consultations and have provided advice to the newly formed Integrated Care Boards in the North East and North West when they came into effect (as part of the Health and Social Care Act 2022). The Resist Network regard this partnership work to be critical, but unlike generic or non-specialist VAWG and Domestic Abuse organisations, the majority do not receive funding. BME

organisations in the North are not included as possible recipients in health-related funding.<sup>15</sup>

Our evidence shows that over 40% of the women supported by the Resist Network (n=692) experience various forms of sexual violence (in 4 of the organisations this rises to 60%). Over 50% of these victim-survivors were either refused or not given appropriate support from commissioned sexual violence services before they self-referred to Resist Network organisations (self-referrals to our services remain much higher than the national average at between 30-40%). Frontline BME led by and for 'VAWG' services were also excluded from the recent £18 Million Rape and Sexual Assault Services Fund (RSASF)(2023) commissioned by the Home Office. Despite credible applications from the BME VAWG sector, they were not even considered because they were not deemed to be stand-alone 'sexual violence' services. This highlights a siloed approach to VAWG and a profound absence of even a basic understanding of violence and abuse which is often experienced as a continuum of sexual, financial, and physical domestic abuse and coercive control. It also fails to take account of the fact that sexual violence is one of the least disclosed forms of abuse by BME and migrant women. Many only disclose sexual abuse as part of a wider disclosure of other forms of abuse such as domestic abuse and domestic servitude. This means that for this cohort of women, referrals to stand alone sexual abuse services are likely to remain low.

As mentioned, whilst BME violence against women and girls organisations are not commissioned via the health funding stream, they continue to receive referrals of BME and migrant victim-survivors of sexual abuse, especially if they have insecure immigration status, from the very same organisations that are commissioned to provide services for women who are sexually abused. (We have documented evidence of this). As a result of the government's funding decisions, BME led VAWG organisations like those in our network- have become an unfunded referral pathway for local and regional Rape Crisis Centre's, SARCS and the statutory sector.<sup>16</sup> It is a position that is both discriminatory and untenable.

The government states that "provisions in the Care Act 2014 and accompanying statutory guidance are clear as to how adults...should be safeguarded when they are at risk of or are experiencing abuse." (P.26). This is not the reality on the ground. The Care Act is not applied to women who face domestic abuse even though the majority have experienced abuse and remain at risk of

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<sup>15</sup> <https://irisi.org/our-projects/>

<sup>16</sup> List of awardees here: <https://www.gov.uk/government/publications/rape-and-sexual-abuse-support-fund-2023-to-2025-organisations-awarded-funding/organisations-awarded-funding-from-the-rape-and-sexual-abuse-support-fund-rasaf-august-2023-to-march-2025>

escalating abuse and neglect. Indeed, we would go so far as to say that VAWG is simply not recognised as an adult safeguarding issue within social services culture even though it is enshrined in the law. As outlined above, responses by social services are woefully inadequate and safeguarding inquiries are simply not carried out even if it involves a risk to children. This remains the case despite the Domestic Abuse Act 2021 defining children who experience or witness abuse as victims in their own right.

The Resist Network has numerous case studies to show that the Care Act is not used to provide support to BME and migrant victim-survivors of domestic abuse at local levels. Their access to support, as with other women, is determined by an ever restrictive 'threshold' that acts as a deterrence mainly because of severe funding and skill shortages across social services. The Care Act is rarely invoked in safeguarding assessments by social services. Instead, adult social care regularly refers high risk domestic abuse cases to members of the Resist Network or other organisations.

**Good Practice:** In the North East of England, the Angelou Centre's safe accommodation services (as part of their supporting migrant women pathways) works with their local Adult Social Care services. This is an initiative that was spearheaded by the Angelou Centre. Adult Social Care provide additional short-term accommodation for women for up to 2 weeks to enable their risk/safety to be addressed by the Angelou Centre and to ensure that women are able to receive independent legal advice regarding their immigration matters. 80% of migrant women supported through this partnership are supported with clear migration or other routes to support. All women are given support by the Angelou Centre or a partner domestic abuse organisation – even if they move out of the area. A high level of co-operation between services has led to the ongoing generation of knowledge and understanding about the needs of BME migrant women in the area.

*"There is discrimination and there is a financial logic behind their discrimination."*

- C. During the Covid-19 pandemic BME led VAWG organisations widely reported on the exclusion of BME and migrant women from the additional support available to vulnerable groups. They evidenced breaches of the equality law including a decline in local authorities' adherence to public sector equality duty to carry out impact assessments in respect of their decisions not to provide protection or housing and financial support to abused women. Anecdotally our network is reporting that this has not improved and that the cost-of-living crisis, ongoing austerity and local spending measures have exacerbated this issue. This is increasing pressures on our network organisations to self-fund initiatives that address the needs of victim-survivors in respect of the current socio-



economic crisis as well as those arising from their experiences of abuse and coercive control in relationships.

*“They are saying they can’t pay their bills and some of the women are unable to leave perpetrators because of the cost-of-living crisis. And when they do manage to leave, they have to go back because they cannot take care of themselves and their children on the money they get in benefits.”*

**Good Practice:** In response to the cost-of-living crisis Resist Network organisations are, of their own volition, providing BME and migrant women with culturally appropriate food and fresh vegetables that is often not available at other food charities. Several of our organisations also work with local authority foodbanks to improve support measures and referral pathways for victim-survivors of VAWG who may be accessing their foodbanks – this has included training, advice, and guidance.

The Baseline Report refers to the Government and Equalities Office and its, Advisory and Support Service. This is a centralised government office that has no known interaction with BME VAWG services of which we are aware. We are unsure as to why it has been included in the evidence provided by the government. It does not appear to have a regionally informed approach or strategy on VAWG.<sup>17</sup>

Nationally Local Partnership Boards often fail to include specialist BME led ‘by and for’ services due to the vagueness of the Part 4 Statutory Duties for Safe Accommodation guidelines. It outlines that “experienced specialist providers” (p.28) should attend meetings. However, in practice at a local level, this has resulted in the LPB’s usually inviting locally commissioned services to attend and participate in boards that have effectively replaced local domestic abuse boards. The exclusion of BME VAWG organisations greatly impacts on local policy making, commissioning arrangements, and the development of multi-agency guidelines again resulting in highly inaccurate assessments of local needs.

**Good Practice:** Newcastle Local Partnership Board (LPB) includes the local VAWG Strategy group on their board to ensure that community based BME VAWG grassroots organisations are represented. A Chair and representatives from the VAWG Strategy group attend meetings on a rolling basis to ensure that the LPB has a broad understanding of community need and provision. Nationally, the inclusion of BME led services on the Local Partnership Board itself is very rare, despite the Part 4 guidance.

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<sup>17</sup> <https://www.gov.uk/government/organisations/government-equalities-office/about>

*“Unless there are advocates there is no chance in hell women would get justice- and without our organisations women will be arrested or reported to immigration authorities or pushed back into the abuse.”*

The government has made a commitment to provide “ringfenced funding to increase” IDVA and ISVA provision nationally (p.29). Members of the Resist Network have strategically raised concerns about this. The IDVA and ISVA provisions are not an adequate model of support that works for BME victim-survivors who need long term advocacy and practical support on multiple fronts. As a result, it is not a model of service provision that the majority of the BME VAWG sector delivers. IDVA and ISVA’s were developed by generic second tier and statutory agencies to deliver a model of support that is risk based and short term rather than long term, wrap around and holistic. We do not believe that the current IDVA/ISVA model utilised by generic services would meet Article 22 of the Convention. These models of support do not meet the holistic needs of BME, migrant or marginalised and other vulnerable women who often have complex, overlapping and multiple needs that require considerable resources and time to address.

IDVA and ISVA’s are geared up to work within a high risk focused Multi-Agency Risk Assessment Conference (MARAC) context or model, which is not always appropriate nor safe for the women our services support. Although many of our organisations participate in MARAC and related arrangements positively, it is only one aspect of a much more comprehensive advocacy model that is needed; one that is holistic and intersectional in practice – working on multiple related issues.

On average full time IDVA’s and ISVA’s based in generic services have a rolling caseload of 40-50 women who they support (usually remotely) for up to 12 weeks only. Where there are criminal proceedings, they will provide support for a longer period of time, but this will mainly focus on court proceedings. This means that for long periods of time, victim-survivors’ have no contact with their IDVA’s and ISVA’s. This is due to IDVA/ISVA’s limited remit that prohibits them from undertaking what we consider to be the critical work that is needed to shore up the safety and protection of BME and migrant victim-survivors. This work includes addressing: destitution, homelessness, immigration, divorce, custody and child protection matters, the careful assessment of risk from extended family and community members, prevention and rehabilitation work that involves recovery and the provision of therapeutic and practical support. BME women’s advocacy work will often have an international dimension such as honour based violence, forced marriage and transnational marriage

abandonment which requires long term support and advice that straddles multiple jurisdictions.

In our view, the IDVA and ISVA model does not meet the needs of BME or indeed any victim-survivor of abuse adequately and requires urgent re-evaluation. Our preference is for a model that ensures that every victim-survivor has a mandatory right to an advocate to act on her behalf and facilitate access to her rights for as long as required. This also includes conducting challenges to state institutions to ensure transparency and accountability

The government's response to D1-D10 in their Baseline Report (p.29-30) also highlights the lack of disaggregated data or information that government departments such as DLUH have in respect of the commissioning or inclusion of specialist BME led by and for organisations, and the continued lack of monitoring and scrutiny at regional and local authority levels.

**Good Practice:** Due to successful evidence based strategic advocacy led by members of the Resist Network, Lancashire, Northumberland, and Manchester PCC's have commissioned BME led by and for VAWG organisations to deliver specialist BME IDVA and ISVA services in their areas. This means that the roles as well as the terms and conditions of the service differ considerably from generic local ISVA/IDVA's and that these organisations are able to deliver holistic and effective models of support. These roles have been designed to meet the intersectional advocacy needs of BME and migrant women, increase women's safety in the community and improve local and regional data collection. (We would be happy to share more information with GREVIO about this project should it be required.)

*In relation to PART V & VI of the GREVIO Baseline Questionnaire the VAWG Sector Shadow Report provides detailed information about the legal framing of the government's Baseline Report in relation to Articles 29-58. We have therefore highlighted additional information and instead focus on sharing case examples.*

## **PART V: Substantive Law**

The Resist Network does not accept that “all public agencies and relevant parties are applying a common definition when seeking to “tackle” domestic abuse (p.34). Day to day experience shows that in fact, there is little common understanding of abuse and coercive control across the statutory sector, despite the existence of guidance, laws and policies that have set out a clear statutory definition of domestic abuse. This failure has been routinely highlighted by local domestic homicide reviews (DHRs) involving statutory and voluntary agencies tasked with investigating the local deaths of victims killed by their abusive partners or family members. DHRs frequently demonstrate a series of recurring problematic patterns and themes in state responses that include a failure to recognise signs of domestic abuse, poor record keeping, no or inappropriate risk assessments, failure in communication and information sharing and insufficient training – especially around the dynamics of non-physical coercion and control. A major flaw in the working of homicide reviews is that there is a complete absence of a discourse of rights. The model is not based on the rights of the victim or her family but on correcting system failures. For those of us trying to support victim’s families or advocating for victims, we encounter a central tension between the purpose of learning lessons and delivering justice to the victims and their families. This tension is not resolved by the current DHR system. The avoidance of a rights-based approach to VAWG has a significant impact on the state’s response to domestic homicide since the same failures are repeated again and again and no lessons are learnt because there is no proper forum to hold state agencies to account for their failures.

- B.** There continues to be a lack of scrutiny or accountability around the implementation of multi-agency guidelines in relation to Forced Marriage (FM), Female Genital Mutilation (FGM) and Stalking Protection Orders. As the data table of p.36 in the Baseline Report shows, the number of orders in relation to FM and FGM are extremely low and do not reflect the high numbers of women who are accessing support from the Resist Network’s organisations in relation to these issues. Our organisations face multiple barriers when supporting women to obtain such orders, and local authorities are reluctant to proceed with FM orders for young women under 18, despite their legal duty of care towards children. The police are unable or reluctant to assess women who experience FM and FGM as crimes. Women who are seeking asylum and whose children are at risk of FGM are often being denied protection orders in the civil courts as judges believe that this will conflict with or influence the women’s asylum and immigration applications.

*"I've been in court and there are CAFCASS barristers acting as barristers for the perpetrator and showing a bias in court that is not dealt with by the judge, in fact it is supported and encouraged, with the barrister supporting the perpetrator/dad with his evidence and points."*

*"Coming to the UK into an abusive marriage or relationship, she has no knowledge, and you have officers who don't understand, don't try to understand and don't use interpreters. We've had several issues with the police so far, criminalising and arresting women, its increasing."*

Specific forms of harmful practices are not recorded at local authority levels so there is no reliable data on forced marriage, honour-based violence and FGM. The Ministry of Justice (MOJ) categorises victim-survivors as either a sexual violence/abuse victim **or** a domestic violence/abuse victim which means that BME and migrant victim-survivors experiences of intersecting forms of sexual, domestic violence and harmful practices are not captured properly.

Members of the Resist Network have contributed to numerous reviews on family proceedings and to the more recent submission to the UN VAWG Rapporteur's consultation on Child Custody and Parental Alienation. We **attach** a report that was submitted in October 2023. Highlighted in these reviews and submissions, are a series of wider failures in the family justice system ranging from a severe lack of understanding about the nature of abuse to disregard or seriously downplaying the abuse. Such a continuing pervasive culture of disbelief and indifference to victim-survivors of abuse and an embedded presumption in the Family Courts, where parental contact (in cases of domestic abuse) is now routinely incorporated in concepts such as parental alienation.

Due to the failure of the state to address the mismanagement of domestic abuse cases in Family Court proceedings, we have seen an increase in the number of victim-survivors who are losing custody of their children. This and other discriminatory processes enable perpetrators to manipulate the courts, statutory services, and justice system to their advantage. The Family Courts are now being used as a means to further abuse and control women in full public view resulting in Practice Direction J12 which is either not being properly implemented or not implemented at all. These matters are exacerbated by the lack of access to legal aid for advice and representation. The single most challenging barrier faced by abused women is the decimation of specialist BME frontline services and the growing entrenchment of discrimination via a 'hostile environment' immigration strategy that leaves many vulnerable women, but BME and migrant women in particular, locked outside of systems of family justice. Almost all of the victim-survivors supported by our network who go through the Family Courts relay a sense of profound mistrust in the ability of the

family justice system to protect them and their children from harm. These experiences compound their sense of humiliation, loss of hope and the powerlessness associated with the domestic abuse. The experience leaves many re-traumatised by the system.

J. In addition, the lack of effective access to legal aid in family proceedings has also led to state encouragement of alternative sources of support and arbitration. This has legitimised the use of unaccountable 'community leaders', religious organisations, and religious courts to arbitrate on family matters with devastating results. Many religious and community leaderships and organisations refer to the 'personal laws' of their communities to demand that issues to do with the family in particular (seen as 'private or personal' matters), should be the subject of religious and culturally relative processes.

This means that vulnerable and disadvantaged women from BME communities, find themselves faced with two options: either to negotiate complex legal matters with little or no assistance and to represent themselves in cases that involve hugely unequal relations of power *or* to refer themselves to religious institutions which involves an even greater imbalance of power relations.

Many female BME victim-survivors recount extremely negative experiences of their engagement with religious arbitration forums and extensive research on the operation of religious 'courts' and 'tribunals' confirms the range of problems that women encounter when utilising them to resolve family disputes. These problems range from incompetence and maladministration to flagrant human rights abuses. The problems encountered include: the operation of conservative and patriarchal notions about gender roles which are inherently incompatible with equalities and human rights law and principles; arbitrary and discriminatory processes, pressure to reconcile with abusive partners, pressure to waive rights to children, maintenance, property, and inheritance; lack of any legal representation and advice and lack of accountability or transparency with regards to decisions made.

Whilst we acknowledge that these 'courts' have no legal standing and their 'rulings' are not legally binding, the reality is that they are purporting to make 'legal' decisions over the lives of vulnerable women and children that have major (and sometimes life threatening) consequences. Although women may not be legally bound by the decisions – social and community pressures to comply with these decisions are enormous. The same pressures that drive women to such forums also explain why they are unlikely to complain about the violations of their rights in such forums. Their experiences also show how the coercion and control that they experience extends beyond the private sphere and spills over into the community and public spheres. The operation of many

religious arbitration forums and their decision-making processes and practices are designed to regulate women whilst giving the impression that women attend them 'voluntarily' and are exercising choice and agency when they do so. Our experience of working with BME women from all backgrounds shows that the most vulnerable and marginalised women do not want their family disputes to be governed by religious arbitration forums and tribunals; *they want the same access to justice and protection that is available to women in the wider community.*



## PART VI: Investigation, Prosecution and Procedural Law and Protective Measures

*“There is an abuse of power- police officers give a woman a number to ring rather than assess risk, find support pathways, follow protocols and their training - then this is beyond incompetence and is deliberate neglect.”*

*“From both personal and professional experience, it’s all discriminatory, if it’s migrant women they don’t care. From my experience as a Black woman most of them (police) are racist - institutional racism informs most problems – and it’s the patriarchal systems when men are in charge that means it all falls apart.”*

*“The police had sent this woman to a taxi rank rather than to a domestic abuse service, to drop her with a taxi goes against all protocols, they didn’t even bother to assess her or to contact us or another service. Luckily the taxi driver gave her a free and safe lift to our service- but the police officer could have left her with someone to be further abused. There is no accountability.”*

*“There’s another pattern with police where the first thing they ask, rather than putting in place protective measures, support or referring to a service- is about visas or if they have friends and families to stay with.”*

- A. BME and migrant women are overrepresented at every stage of the criminal justice system and are twice as likely as white women to be arrested.<sup>18</sup> The available evidence shows that many have experienced high levels of abuse and yet they are likely to face harsher treatment across the criminal justice system. As highlighted by the above quotes, a range of problems are encountered by BME and migrant when engaging with the criminal justice system; from feeling intimidated to not being believed; from feeling under pressure to admit to offences they have not committed to being subject to racism and racist remarks.

Pervasive stereotypes about race and sex play a huge role in the way in which they are treated. For example, African-Caribbean women are often deemed to be ‘strong’ ‘independent’ ‘self-reliant’ so when they report abuse, they are simply not believed. If they try to defend themselves, they are more often than not labelled as the primary aggressor. Asian women find themselves ignored and ‘under-policed’ because they do not speak English as a first language and are new to the country, or don’t have a knowledge of their rights (usually due to abuse) and come from diverse socio-cultural backgrounds. They are often

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<sup>18</sup> See referenced Centre for Women’s Justice reports.

assumed to come from communities that have their own internal mechanisms for resolving marital and family matters.

Lack of English has in fact become a key driver of detention for many minority women. Those who do not speak English or speak English as a second language often find themselves detained for long periods by the police for no other reason than the fact that no interpretation facility is available. The police are often unwilling or unable to find interpreters and so they are locked away in police cells until interpreters are found. This means that they are often in police cells for 24 hours or more (see above case study). By this time, considerable damage has been done. They are re-traumatised and desperate to get out especially if they have been separated from their children when arrested.

Across the board many women subject to abuse are being arrested in greater numbers due to the counter-allegations being made by perpetrators. Despite extensive guidance on how to deal with counter-allegations – including the need to consider the wider contexts of abuse, the dynamics of coercive control and to investigate the history of the relationship between both parties more fully, women are frequently arrested on the say so of perpetrators.

*“It’s really difficult - if workers can’t get through to the police what chance have women got? We are constantly challenged by the police that it’s not HBA”*

- B. The National College of Policing has introduced the Domestic Abuse Risk Assessment (DARA) as an assessment tool for police forces across the UK (currently being piloted.) However, it raises a number of serious concerns mainly because there is already a vast knowledge gap about VAWG and Domestic Abuse in respect of BME and migrant women. The police currently use the DASH risk assessment tool which includes questions about forced marriage, sexual violence and HBA. However, the new DARA model for risk assessment will remove these additional forms of VAWG from risk assessment. The police have stated that they will rely on police officers ‘critical thinking’ and will use ‘additional risk assessment tools’ to assess harmful practices and sexual violence. This means that whether or not BME and migrant women are properly risk assessed will depend on police awareness of different forms of harm and their ability to use their discretion properly which at present remains very poor and discriminatory. Several of the Resist Network organisations who are involved in Domestic Homicide Review panels and research are very concerned about the failure for statutory or generic agencies to identify HBA. This has been demonstrated by the homicides of BME women where HBA appears to be at least a contributing factor in their death.<sup>19</sup>

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<sup>19</sup> Such as the murder of Jessica Patel: <https://www.bbc.co.uk/news/uk-england-tees-53389877>.

Police responses to HBA and other forms of gender-related abuse can be characterised as inadequate, indifferent, and inconsistent. The recent findings from an inquest into the homicide/honour killings of Raneem Oudeh and her mother, Khaola Saleem (2022) have highlighted a catalogue of failures in the police response to their reports of abuse, stalking and threats to kill made by Raneem's husband.<sup>20</sup> At all levels of policing there was a failure to assess risks to them properly and to use their powers to take positive action. Key indicators of HBA were missed and a wider punitive and victim blaming culture prevalent within the police force and social services acted as a deterrence to the victims' engagement with the police and greatly contributed to their distrust in state authorities. The level of police failure in this case was considerable but it is indicative of wider, systemic problem with policing of violence against women and girls across the UK that appear to have worsened.

In the inquest into the murder of Raneem Oudeh and her mother (see above) it was demonstrated that DARA as an assessment tool was available to the police and yet they failed to use it with the result that the risks to the victims were minimised. In 2019, West Midlands Police force was a pilot force for the implementation of DARA which is seen as an alternative to the DASH assessment tool incorporating recognition of coercive controlling behaviour. Yet it made no difference in how the police responded to the victim's reports of abuse and coercive control and threats to kill which also featured HBA.

The Resist Network is also very concerned about the lack of consultation with BME organisations about the reshaping of the police risk assessment tool and the introduction of DARA as an assessment tool. The police commissioned research and worked with national second tier organisations on the introduction of this tool, but the BME VAWG sector was not widely consulted. We would argue that the changes to risk assessments will mostly impact BME and migrant women.

A radical shift is needed to address what is a structural failure of implementation. More attention needs to be paid to strengthening police accountability using local and national mechanisms with a particular focus on a range of disciplinary measures.

- C. The Baseline Report suggests that breaches of civil orders are very low according to the government's recorded data (p.51). We strongly contest this. The lack of monitoring or documentation of this matter does not lend itself to the conclusion that this is not a commonplace problem and does not put victim-

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<sup>20</sup> <https://news.sky.com/story/police-failings-materially-contributed-to-murders-of-raneem-oudeh-and-her-mother-khaola-saleem-12750232>

survivor's lives at risk. Daily experience shows that breaches of civil orders are routinely ignored by the police – as revealed by countless findings from domestic homicides reviews. From our experience (and across the VAWG sector anecdotally) breaches are commonplace and are often not dealt with by the police.

- J. *"We now do work that we didn't have to do years ago - our advocates do a lot of the work, they deal with statements, interpreters, evidence, communication between legal team and lawyers, women's safety in court- it's a long process."*

*"The lawyer representing her also disclosed her address to the perpetrator and she didn't inform the woman and then the perpetrator came looking for her."*

Legal aid is vital to secure justice and to uphold the principles of equality before the law and the rule of law itself. Yet Resist Network organisations face increasing difficulties in obtaining to access justice for some of the most vulnerable BME women in society.

As a result of sweeping cuts, many areas of civil law have been removed entirely from the scope of legal aid. Legal aid for private family law cases can only be accessed if victims-survivors can evidence domestic abuse. But the criteria set out by the Legal Aid Agency to demonstrate domestic abuse is restrictive and unrealistic. Many victim-survivors face stringent financial criteria as well as rising court fees resulting in exclusion from the civil justice system. In addition, there are fewer specialist legal aid solicitors and many law centres have been forced to close due to lack of funding. All of this means that vulnerable women often find themselves having to navigate and represent themselves in what are often unfamiliar, complex, and confusing family proceedings, thereby compounding the trauma they experience. Many victim-survivors give up on taking legal action or they are turning to family or community members/religious forums, unscrupulous lawyers or high interest loan companies to obtain funds to pay for legal advice. Other women remain 'trapped' in violent or abusive relationships because they cannot engage in the legal system due to fear, lack of support and/or inability to afford legal fees.

## PART VII: Migration and Asylum

*“Because of the fear of immigration abuse and threats they’ve had about their insecure status, women are staying with abusers and hiding beneath the radar.”*

*“Police are unable to assess, and racism comes into play as police see immigration status only.”*

*“When police attended the call out, they didn’t know or understand what financial abuse was as he said he was paying the bills and was claiming that she wasn’t working, rather than assessing and recognising financial control and immigration abuse.”*

- A. The UK government’s reservation of article 59 is discriminatory. It dehumanises women that are fleeing violence and abuse and feeds into the extreme hostile environment and anti-immigration culture that has been created for migrants. This reservation generates additional risks and denies protection to victims of abuse, especially to women who have no safe or ‘legal’ routes of settlement available to them and deemed to have arrived in the UK ‘illegally’. The current government position on migrants and asylum seekers explicitly violates the UK’s international obligations under the UN Refugee Convention, which acknowledges that refugees are likely to enter a country of asylum irregularly. It says: “The Contracting States shall not impose penalties, on account of their illegal entry or presence” (Article 31, section 1 of the Refugee Convention). The state’s position also fails to align with many other areas of the Istanbul Convention (as outlined above) that require states to implement the Convention without discrimination on any ground, including migrant status (Article 51).

Over 60% of the women our organisations support each year (N=1038), at referral point have insecure/uncertain immigration status and/or NRPF. This number has risen year on year by 5-7% over the past 5 years. The pandemic and cost-of- living crisis have also accelerated this increase in the past 3 years. For example, the annual number of victim-survivors being supported across Resist Network organisations has risen by 11 % (n=190). This represents an increase in need as well as a jump in the severity and prevalence of high-risk forms of abuse and violence. At the same time, there is a parallel development that involves the mainstreaming of funding following the Domestic Abuse Act and the loss of income to many BME led organisations in the North of England who support the majority of migrant survivors in the UK. As noted above, BME led VAWG organisations have historically rarely been commissioned by local authorities or the government; most have been reliant on charitable and donation-based income and their commitment to undertake work on a voluntary basis. The full burden of supporting and protecting migrant women falls on these organisations. Six organisations in the Resist Network have reported that

over 100 BME migrant women accessing their services in 2022-23, assessed to be at high risk of harm and violence, were turned away by statutory and generic services (including accommodation and generic commissioned domestic abuse services) due to their insecure immigration and NRPF status.

Again, we regard any decrease in funding to support BME migrant victim-survivors (who continue to be referred to our organisations by commissioned domestic abuse and statutory services) to be an effective *defunding* of our work.

**Good Practice:** Northumbria and Manchester PCC's have been guided by and worked in collaboration with their local specialist led BME VAWG Services (who are part of the Resist Network) to develop cohesive and joined up multi-agency pathways for migrant women with NRPF.

- B.** The Resist Network supports migrant victim-survivors who also have no independent legal representation. This results in further heightening their risk since their insecure status is weaponised by perpetrators who retain their essential documents – thus contributing to their lack of access to legal advice. Most migrant women with insecure status continue to face serious harm unless given adequate recourse to legal advice and representation in the UK.

The recent report by the Domestic Abuse Commissioner's entitled, *Safety Before Status* contains data that is informed by evidence from organisations that are part of the Resist Network). It cites a type of violence such as immigration abuse that is linked specifically to migrant women's lack of immigration status.<sup>21</sup> is a widespread form of harm that is generated by the state's policies on migration and is not properly recorded by statutory agencies.

The government's funding of the £1.3 million 'Supporting Migrant Victims' pilot project ( Southall Black Sisters were commissioned to deliver this scheme), neither provides a protective safety net for migrant women (due to the limited scope of the grant – it does not reach all migrant women and only supports them for a period of 3 months maximum), nor accurately captures the numbers of migrant women that BME led VAWG organisations are supporting. We remain very concerned that state policy in relation to migrant victim-survivors are increasingly being determined by anti-immigration policies rather than the needs of BME and migrant women. The outcomes of the pilot project do not add much more to the copious evidence that already exists in respect of the needs of abused migrant women. Our fear is that this one-off, non-legally binding project has been initiated to deflect criticism of its discriminatory

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<sup>21</sup> The Safety Before Status report is here: <https://domesticabusecommissioner.uk/wp-content/uploads/2021/10/Safety-Before-Status-Report-2021.pdf>. Definition of Immigration Abuse p. 22

responses to migrant women. The state shows no intention of using or implementing adequate long-term safety measures for protection for migrant victims-survivors. As such the current situation does not meet the levels of specialist protection and support mandated in Chapter IV of the Convention.

Abused migrant women who don't have settled immigration status also face additional hurdles when trying to report abuse to the police due to the operation of harsh immigration measures that involve the widespread policy and practice of data sharing between the police and immigration enforcement. These women are viewed as offenders of immigration rules rather than as victims of abuse and as a result many are deterred from reporting abuse to the police because they fear that they will be detained and deported.

Despite calls to stop data sharing between Immigration Enforcement and statutory bodies such as the police, the practice continues. In December 2020, the findings of a police super-complaint investigation into the practice, led by three police watchdogs including the HMICFRS were published.<sup>22</sup> It concluded that these arrangements are significantly harming not only victims of crime but also the public interest, as crimes of abuse and violence are not reported and therefore remain unpunished. The report also confirmed that in domestic abuse cases, data-sharing with Immigration Enforcement *does not* constitute safeguarding. The police rejected this outcome and instead developed a protocol (Migrant Victims Protocol) on sharing which was boycotted by the majority of VAWG sector organisations on the basis that it does not remove victim-survivor's fear of detention and removal or increase their trust in the police or statutory agencies.

We continue to see far too many cases in which the police show more interest in victim-survivor's immigration status than in their protection. In a recent news post, the Domestic Abuse Commissioner, Nicole Jacobs, has set out data for April 2020 to March 2023 which shows that 537 referrals were made to the Home Office for immigration investigation in relation to victims and survivors reporting domestic abuse.<sup>23</sup> The continuing prioritisation of immigration enforcement over the safety and well-being of victims of abuse is especially problematic and contradictory given that the police have recognised that the lack of immigration status is a key risk factor of domestic abuse and coercive control. Abusers know that women cannot go to the police which is why they routinely threaten to report their victims to the police as a way of exploiting and abusing them and keeping control over every aspect of their lives.

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<sup>22</sup> [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/104112/4/HO\\_Review\\_Police\\_and\\_HO\\_data\\_sharing\\_migrant\\_victims.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/104112/4/HO_Review_Police_and_HO_data_sharing_migrant_victims.pdf)

<sup>23</sup> <https://domesticabusecommissioner.uk/police-report-victims-of-domestic-abuse-to-immigration-enforcement-empowering-abusers/>



### Good Practice:

Following the transnational marriage abandonment case of AM, R (On the Application Of) v Secretary of State for the Home Department [2022] EWHC 2591 (Admin) (14 October 2022), a working group was set up involving experts from the VAWG sector, immigration law practitioners and the Home Office to develop immigration rules and guidance to provide women who were previously subject to domestic abuse by their British national spouses and then abandonment in countries of origin, routes of re-entry to the UK to exercise their rights under family and immigration law. On 31 January 2024, new immigration rules come into force that allow victims of domestic abuse who are abandoned overseas to apply to re-enter the UK after domestic abuse related relationship breakdown. This has been the product of a rare and genuine collaboration resulting in immigration changes to the immigration rules and development of guidance in this area that will protect women rather than deter or discriminate against them. VAWG and legal experts have also been invited to train caseworkers in the Home Office so that they have sound awareness of the issue of transnational abandonment and the barriers faced by women seeking to return to the UK in order to make decisions that accord with the new rules and guidance.

*“Women are being interrogated and women who have been trafficked and don’t know anything should not be interrogated it doesn’t help her to remember. She needs to be in an environment in which she can recover.”*

- C. The UK Government’s significant expansion of detention powers does not comply with Article 5 ECHR or the Refugee Convention. In the North of England and Scotland private corporate organisations are being given millions of pounds to house women in prison like circumstances. This is leading to already vulnerable and often destitute women and children being further abused, traumatised, and exploited. For example, single women and children in the North East are being moved out of community-based dispersal properties and placed in detention centres such as Hassockfield in Durham.<sup>24</sup> According to the Northern NRPF Network, over 85% of migrant women survivors accessing support from them have entered the UK through irregular routes (passing through ‘safe’ third countries as a result of fleeing war and persecution) often without access to travel documents or the option of regular travel.<sup>25</sup> They would

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<sup>24</sup> Recent media about Hassockfield: <https://www.thenorthernecho.co.uk/news/23851809.immigration-removal-centre-near-conssett-house-men/>.

<sup>25</sup> Data taken from the NRPF network’s April 2023 submission to Joint Committee on Human Rights Call for Legislative Scrutiny: Illegal Migration Bill.

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therefore be subject to removal from the UK without any assessment of their claim for asylum or protection having been made. The UK is therefore not compliant with the UK's obligations under the UN Refugee Convention and directly breaches it.

### End of Response

This report has been collaboratively co-produced by:



### Submission Contact

Should GREVIO require any further information or evidence please contact:  
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