Uncharted Territory

Violence against migrant, refugee and asylum-seeking women in Wales
This is the tip of a very big iceberg.

There are loads of people who can contribute to this discussion—put the message out there that this is going on. The more that come forward, the better things will be.

Female participant
About the Wales Migration Partnership

The Wales Migration Partnership (WMP) is funded by the Home Office and Welsh Government and is based at the Welsh Local Government Association. The Partnership is funded to enable strategic and political oversight on migration, and to provide an independent leadership, advisory and coordinating body on migration in Wales. The WMP includes and works with a wide range of organisations including Local Authorities (Elected Members, Adult and Children’s services, Housing, Education), Police, Legal Services Commission, Welsh Refugee Council, Private Sector Providers (Clearsprings), Displaced People in Action, Public Health Wales, British Red Cross, Cardiff University, Centre for Migration Policy Research Swansea University, Churches Together in Wales (Cytun), Equality and Human Rights Commission, NSPCC, BAWSO, Save the Children Fund, Job Centre Plus.

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Background to the study

Gender-based violence is a matter of serious concern in Wales, affecting people from all walks of life, and from all cultural, social and ethnic backgrounds. Women and girls from ethnic minorities have been identified as a group who confront multiple barriers to protection. Women and girls within asylum-seeking, refugee and migrant communities who experience gender-based violence face the intersection of several kinds of discrimination which may prolong their exposure to abuse and frustrate their attempts to seek help: as women, as minorities, as victims of abuse, and as non-UK citizens, many with insecure immigration status and therefore with no recourse to public funds (NRPF).

The Welsh Migration Partnership identified that gender-based violence was a serious issue for women and girls within asylum-seeking, refugee and migrant communities, which was complicated through barriers to accessing support and protection. WMP became aware of gender-based violence in the course of our work, including incidences of domestic violence in asylum seeker, refugee and migrant communities, complicated by serious barriers to accessing support. As chair of the Wales No Recourse to Public Funds network, and through work with Welsh Women’s Aid and BAWSO, the WMP found that women and girls with insecure immigration status face severe problems in accessing and receiving support, which are unlike those of women born in Britain and which require attention and policy development to enable this group to access services.

This research helps to fill an evidence gap in Wales, and identifies issues within some migrant communities in order to ensure that these particular and very complicated issues are not neglected within Welsh policy.

While Wales has made significant progress in developing best practice and providing solutions to violence against women, it now needs to meet the challenge of making sure that all women and girls in Wales benefit from these measures.

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1 See glossary for definitions of these terms.
2 BAWSO is a specialist BME service provider for victims of domestic and gender-based violence across Wales.
Executive summary

This research is directly relevant to both Home Office and Welsh Government strategic aims to end violence against women, and in particular speaks to the following actions in the Welsh Government’s Programme for Government and Strategic Equality Plan:

- Reduce the incidences of all forms of violence against women, domestic abuse, ‘honour’ based violence, hate crime, bullying and elder abuse.
- Ensure that cultural differences are taken into account in the provision of social care services and that cultural differences are taken into account in the provision of public services through specific equalities duties.
- Focus on putting the needs of service users/people with protected characteristics\(^3\), at the heart of delivery in key public services including health, housing and social services.

The executive summary of this report mirrors the structure of the full report for ease of cross-reference.

1. Starting points

1.1 Violence against refugee, asylum-seeking and migrant women

Given the global prevalence of gender-based violence (GBV - a term that includes domestic abuse, rape, intimate partner violence, trafficking, honour-based violence, female genital mutilation\(^4\) etc.), it is likely that a large proportion of asylum-seeking, refugee and migrant women in Wales have experiences of such violence. Gender-based violence may have occurred in their country of origin (alongside torture and ethnic persecution), as well as after their arrival into the UK. Research shows that asylum-seeking, migrant and refugee women face higher levels of violence than native-born women due to a variety of factors, such as age, language barriers, vulnerability, isolation, and poverty. Their vulnerability is exacerbated by their immigration status which may limit their entitlements to support and services.

1.2 Lack of Welsh research

The lack of Wales-centred research into the position represents a serious gap in our knowledge which is of particular concern within the context of

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\(^3\) See glossary for definition.
\(^4\) See glossary for definitions.
recent policy and legislative proposals (e.g. Welsh Government’s proposed legislation for ‘ending violence against women, domestic abuse and sexual violence in Wales’). This research draws upon a range of sources in order to ensure that these particular and very complicated issues are not neglected within Welsh policy and law.

1.3 Research methodology
This report was based on extensive desk-based research and field work with 55 male and female respondents from asylum-seeking, refugee and migrant communities who took part in focus groups carried out at various sites across Wales.

1.4 Forms of GBV
Forms of abuse discussed by our respondents: domestic violence (including physical violence, psychological abuse and controlling behaviour), intimate partner violence, sexual violence, ‘honour’-based violence, forced marriage, female genital mutilation and trafficking. Women were subjected to violence from in-laws and members of the extended family as well as by husbands.

2. Topics identified

2.1 Violence in the country of origin
Asylum-seeking and refugee women are highly likely to have experienced forms of gender-based violence prior to their arrival in the UK, of which the most common form is rape, which are often part of the basis for their claims for asylum. The asylum system has been frequently criticised in the literature for a lack of sensitivity towards, and understanding of, women’s claims for asylum within a system which has historically been geared towards male experiences. This is reflected in a high rate of successful appeals in women’s claims for asylum, meaning that the first decision to deny asylum was overruled. Lack of confidence and dissatisfaction with the asylum system in relation to gender-based violence were common themes raised by our participants.

2.2 GBV in the asylum interview
The asylum interview can be a traumatic experience for women who have experienced gender-based violence which is material to their claim, and some may not feel able to disclose information, particularly around sexual violence, due to cultural taboos, a lack of preparation and support and the nature of disclosure itself, which can be traumatising, particularly within some encounters which may be adversarial, and the requirement for detailed testimony at a very early stage of arrival in the UK. Some asylum-seeking women develop negative attitudes to the British state as a result of their initial asylum interviews. These can influence their attitudes
thereafter, leading to reluctance to approach state bodies if they experience violence while in the UK.

2.3 Access to legal support
Women seeking asylum require ‘front-loaded’ and expert legal advice and support for their claims, preferably from professionals experienced in the nature of gender-based violence. New restrictions upon legal aid will negatively impact upon asylum-seeking, refugee and migrant women by further narrowing the support available.

2.4 Dispersal
The dispersal of asylum seekers\(^5\) tends to break down social support networks, where they exist, leading to increased isolation and vulnerability. Dispersed women have been groomed for sexual and labour exploitation, which can also involve the co-option of their allocated accommodation by those exploiting them. Several women reported that men from their communities ‘preyed’ upon vulnerable, often young asylum seekers through offering assistance, but which ended up leading to deeply exploitative relationships.

2.5 Experiences of LGBT asylum seekers
Lesbian women and girls have particular difficulties in claiming asylum on the basis of their sexual orientation due to difficulties in providing evidence. Some LGBT asylum seekers are forced to share housing with people who hold the same homophobic prejudices that had led them to flee their country initially.

2.6 Human trafficking
Women told us that trafficking is poorly recognised by the police and there is very little available support for trafficked women. Women and girls who have been trafficked into the UK are often criminalised for acts carried out under the duress of traffickers, rather than treated as people in need of support.

2.7 Poverty and destitution
Evidence from the Children’s Society to a recent Parliamentary inquiry highlighted that some families live on less than £5 per person each day, and women told us they were living on £36 per week. Many asylum-seeking, refugee and migrant women told us they were living in poverty or destitution, which makes them vulnerable to various forms of violence and exploitation, from forced labour to prostitution.

\(^5\) See glossary for definition.
2.8 No Recourse to Public Funds
No Recourse to Public Funds (NRPF)\(^6\) legislation affects many women with insecure immigration statuses and can make finding support such as refuges very difficult, because income support or housing benefit is the usual method of funding these services. This can lead to women being given the unacceptable choice of tolerating abuse or becoming homeless.

2.9 The Home Office Destitution Domestic Violence Concession
The Home Office Destitution Domestic Violence Concession (DDV)\(^7\) was developed to address the problems of women and girls experiencing violence but unable to seek help due to NRPF. However, this process is very bureaucratic, and requires a high standard of proof and excludes several categories of vulnerable women and girls such as women in marriages which are not legally recognised in the UK, and women married to EU nationals. This complicated situation means that there is a great deal of confusion around women’s entitlements which impacts upon service provision.

2.10 The ten-year route
For women entering the country under spousal visas, an extension to the period of time it will take to regularise their status means that they may have to endure extended experiences of domestic violence and this also increases the likelihood of escalation to more severe forms of violence.

2.11 Lack of awareness
Our research indicated a general lack of awareness on both sides: participants were largely unaware of the available services which can provide assistance to those experiencing violence, and services lack understanding of the entitlements of asylum-seeking, refugee and migrant women and girls. Respondents identified a ‘culture of referral’, wherein women and girls seeking support are passed from service to service without receiving help, because some professionals do not understand their ‘cultural’ issues or the ramifications of their immigration statuses.

2.12 Fear of deportation
Many women and girls of migrant backgrounds, particularly irregular migrants and asylum seekers, fear engagement with services because they have concerns about being deported from the UK, which in the case of those seeking asylum is exacerbated by their fears of return to persecution and abuse in their country of origin. This is often used as a threat by their abusers in order to maintain control.

\(^6\) See glossary for definition.
\(^7\) See glossary for more details.
2.13 Language barriers
Language barriers often prevent women and girls who do not speak English or Welsh from accessing services. Respondents identified that the provision of language support is inadequate.

2.14 Children
Parents we spoke to expressed concern about raising children in violent households, but they also feared the reactions of social services if they did seek support. This made them reluctant to engage with services.

2.15 Relationships and gender
Men we spoke to tended to note the strains placed upon relationships due to the difficulties of leaving their home country and settling in the UK, which they felt led to frustrations which could result in violence. Women and girls tended to identify gender-based violence as an aspect of social and cultural inequalities within their communities. They felt that traditional structures of power within the family could be disrupted through the experience of settling in the UK, which led men to resort to violence to shore up their dominant roles.

2.16 Community pressures
Women we spoke to identified family and community pressures to remain in violent relationships, including an expectation that they bore violence with stoicism. This tended to discourage the reporting of abuse: many women feared talking about abuse to anyone in their community. Women and girls who took action to end abusive relationships often faced criticism and exclusion from the community.

2.17 Specialist services
Specialist services were identified by our respondents as the best placed to deliver support to women facing violence within these communities. However, the geography and demographics of Wales means that some women are isolated from services, and NGOs face considerable strain due to high demand and insecure funding.
As an introduction to the Full Report, we offer three case studies to illustrate the experiences of our respondents. These case studies are taken from various sources.  

Daina & Roze

Daina and Roze were invited to the UK for a visit with the promise of domestic or bar-work from their home country of Lithuania, and flew to the UK together. Once in the UK, they found themselves trapped and afraid, and unable to communicate their situation. They were threatened with violence and told that they had to work as prostitutes to repay their ‘debts’.

Roze was raped by her trafficker, but was able to escape through contacting her boyfriend and mother in Lithuania. British police were able to locate her whereabouts from her description of the view from the window of the room in which she was imprisoned.

Daina was able to communicate with some Polish clients in Russian, and they agreed to help her escape. They contacted police, who raided the brothel premises and freed Daina in one of the first successful prosecutions for trafficking in the UK.

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Adiba

Adiba came to the UK from Pakistan in August 2007 on a spousal visa to join her husband. In October 2008 she fled her husband and her in-laws after being subjected to repeated violent assaults and being admitted to hospital with serious injuries. She sought shelter at a local refuge but was refused support because she had no recourse to public funds and the refuge could not claim housing benefit for the costs of supporting her.

She slept on her friend’s sofa and was advised by the local law centre to apply for indefinite leave to remain (ILR) under the Domestic Violence Rule.

Subsequently, her friend’s husband threw her out of the house and she came to the attention of social services, who said that she wasn’t entitled to support under the National Assistance Act 1948 because she did not need ‘looking after’.

She is currently sleeping at a night shelter that cannot support her in the long term and she is experiencing difficulty collecting the necessary evidence for her Domestic Violence Rule application.

Ghada

Ghada fled Iraq due to her work as a women’s rights activist. She said that ‘everything depends on the first Home Office screening interview’ and that she wasn’t offered any psychological support following her interview; she said ‘you could come for a political reason, you could have been raped, traumatised, tortured but I didn’t see any specially trained person to talk to you.’ During her second interview, she was given a male interpreter who she felt misrepresented her case and was responsible for her initial refusal of asylum. She subsequently appealed. The court-appointed interpreter did not show up for her final court appearance, so Ghada decided to proceed without an interpreter, as she did not want to face more months or years of insecurity and social exclusion as an asylum-seeker.

On finally gaining refugee status, Ghada had just 28 days to leave the asylum hostel and find accommodation. Having no money for a deposit, she felt extremely vulnerable; she said that ‘I could have ended up on drugs, in prostitution because men offered me a place to stay, but with strings.’
2. Starting points

Immigration status can make a difference to a woman’s experiences of violence, and her ability to seek and access support in many complex ways. This report is largely concerned with the experiences of women in Wales we interviewed who come under the categories of ‘refugee’, ‘asylum seeker’ and ‘migrant’ women (including some undocumented migrant women). Some of these have recently arrived in the UK, but many have been living here for a number of years: some were born here to immigrant/‘BME’ families.9 They represent a very diverse group, representing a wide range of ethnicities, nationalities, languages, cultures and religions. They also may have very different reasons for originally migrating to Wales — some for economic reasons, or to seek an education; others are joining spouses and family members who live here, and others sought protection under Refugee Convention grounds. Where relevant, distinctions between these categories will be made. However, there are inherent difficulties in identifying and separating issues particular to these different categories as many of the issues around violence and abuse identified in this report may be relevant to women across them all.

Ethnic diversity in Wales is increasing every year, as statistics from the Wales Migration Portal demonstrate. As of March 2011, 5.5% of people in Wales were born outside the UK (2.2% of these came from other EU countries and 3.3% from outside the EU). The most diverse Local Authorities are in South Wales where 13.3% of Cardiff and 8.5% of Newport residents were born outside the UK. In 2001 the comparable figures for Cardiff and Newport were 7.6% and 4.4%, respectively. This translates into approximately 74,000 people living in Wales who were born outside the UK. It is not possible to know how many irregular migrants are present in Wales or the UK. Human trafficking has been described as ‘a hidden crime’ where the scale of the problem can only be estimated, but police suggest that there may be hundreds of people in living in conditions which could be described as modern slavery.10

2.1 Violence against refugee, asylum-seeking and migrant women

DAPHNE funded research in Europe found that of 233 respondents who were refugees, asylum seekers and undocumented migrants, 166 were able to attest to gender-based violence experienced since arrival in Europe, often being able to

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9 See glossary.
recount numerous experiences. Intimate partner violence has been described as the most common form of interpersonal violence against foreign-born women. BME women make up victims of 59% of domestic murders in London.

According to the UNHCR, violence against women (VAW) can be identified where the victimisation occurs ‘because she is a woman’, or violence that disproportionately affects women. This can also be described as ‘gender-based violence’. Domestic violence, i.e. that occurring within the home at the hands of family members or intimate partners, presents a particular challenge because it is often experienced multiple times, and because exposure can lead to psychological and emotional repercussions.

2.2 Lack of Welsh research

The lack of Wales-centred research represents a serious gap in our knowledge, which is of particular concern within the context of recent policy and legislative proposals such as the development of the Welsh Government’s ‘White Paper on Ending Violence against Women, Domestic Abuse, and Sexual Violence in Wales’. This was highlighted in the Wales Violence Against Women Action Group’s report in 2010.

There currently exists little Welsh-specific evidence on women seeking asylum in Wales who have suffered violence. Anecdotally, it is clear that many women who are seeking refuge here have suffered from gendered violence, whether sexual assault, FGM or other forms of violence.

A 2008 report on Domestic Abuse by the National Assembly for Wales identified many of the issues which we examine more deeply in this report, including geographical, cultural and individual factors involved as well as shortfalls in the

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availability and accessibility of support for certain groups. This has been flagged as an area in need of more research, especially in relation to less common forms of gender-based violence such as female genital mutilation, forced marriage and ‘honour’-based violence.¹⁶

As of May 2012, Wales accommodates approximately 1500 asylum seekers who live in the official asylum dispersal areas of Cardiff, Newport, Swansea and Wrexham, with 825 of these being ‘dependants’ of the main applicant. The top five nationalities of asylum seekers in Wales in May 2012 were Iran, Pakistan, Afghanistan, People's Republic of China and Nigeria.

- The most common age group of asylum seekers is aged 30-34 years (including single people and heads of families);
- Of the 684 males overall in Wales, 36% are single and 18% are in families. Of the 634 females overall, 9% are single and 37% are in families.

These statistics are lower than previous years, reflecting lower national trends. However, some asylum seekers from previous years will have been granted a form of leave to remain, refugee status, or may have adopted British citizenship. There is no way of knowing how many former asylum seekers remain in Wales.

As a 2009 survey of Refugees Living in Wales highlighted, the lack of data on the needs and experiences of refugees living in Wales and on secondary migration flows makes delivering services highly problematic. The survey also draws attention to the ways in which the population of refugees and asylum seekers in Wales is distinct from the wider UK refugee population in some important ways. It thus becomes more important that service providers in Wales have regular and current statistics on the profile of this population.

This Wales Migration Partnership/Cardiff University research takes place in the context of the Programme for Government Commitments around ensuring public services meet the needs of those with protected characteristics¹⁷ and the agenda to transform social services in Wales through promoting people’s independence, in order to give them greater input into policy.

### 2.3 Research methodology

Primary research was carried out across Wales with five different groups using focus group methodology, totalling 55 respondents (8 men and 47 women and girls). The aim of the focus groups was to explore three broad areas:

1. attitudes towards violence against women and girls;

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¹⁷ See glossary
2. barriers to accessing services;
3. how services could be improved.

These were carried out in Cardiff, Swansea and Wrexham, and included a group of men, a group of younger women and girls, and a group which was primarily made up of South Asian women. Ages ranged from 11 to 68. Seven respondents described themselves as disabled. Data was collected anonymously and stored securely, and all participants were informed of the nature of the research before participation so that they could give informed consent, and were able to withdraw at any time.

![Diagram showing the status and nationalities of participants.]

A wide range of African nationalities were represented within the sample. Respondents spoke a variety of languages (over 30 in total), and most had been in the UK for over five years.

### 2.4 Forms of abuse

A well-known statistic is that 1 in 4 women in the UK will experience domestic violence. This does not include other forms of gender-based violence such as sexual violence, experienced by 1 in 3 women, forced marriage, ‘honour’-based violence and human trafficking. However little is known about gender-based violence amongst women living in Wales, and even less about its occurrence within asylum-seeking, refugee and migrant populations. According to statistics from the All Wales Domestic Violence Helpline, of 3013 enquiries, just 78 calls originated from persons identifying themselves as coming from a BME group. Five calls were received in relationship to forced marriage, 15 to forms of ‘honour’-based violence, and 19 with No Recourse to Public Funds (see Section 3.8 for a discussion of NRPF).
2.4.1 Domestic violence (DV)

“When violence is [from] a family member, they won’t believe you. The family will keep it quiet and blame you…”

Female respondent

Domestic violence is defined by the Welsh Government as:

...any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality.

This definition encompasses (but is not limited to):

- Psychological abuse
- Physical abuse
- Sexual abuse
- Financial abuse
- Emotional abuse

Recent changes to the UK cross-governmental definition also include controlling and coercive behaviour.\(^{18}\)

Our research demonstrated that perpetrators of domestic violence can be varied: from mothers-in-law who seek to ‘control’ their daughters-in-law, to the abuse of mothers by teenage children. Men may also be victimised by partners and relatives.

One man told us that:

“[M]en die young because of the stress in the home...Men tend to act in a macho way and men will not come out and say that they are facing violence.”

Male respondent

According to Home Office data, the 2010/11 British Crime Survey found that three-quarters (73%) of all incidents of domestic violence were experienced by repeat victims. While men suffer from domestic violence, and the quotation

above indicates that incidences are clearly underreported, women suffer both more serious and more frequent domestic assaults than men. For example, 1 in 9 women reported having experienced ‘severe force’ from a partner since the age of 16, compared to 1 in 20 men. The most recent BCS data (2011/12),\(^\text{19}\) disaggregated for Wales, show that 11.1% of women experienced ‘any domestic abuse’ (defined as partner or family non-physical abuse, threats, force, sexual assault or stalking) within the past year compared to 5.1% of men.\(^\text{20}\)

Our focus group research revealed that women were frequently subjected to violence from in-laws as well as by their husbands. They described marital relations where they were ‘there for the benefit of their in-laws’, and had to ‘abide by the principles of their husband’s family.’ Thus, abuse could be collective and consequently more difficult to evade.

South Asian women identified mothers-in-law as participating in abuses within the household:

“The mothers-in-law...are very controlling. The husband doesn’t listen and she keeps everything to herself. Mentally she becomes a wreck - psychologically, mentally, she cannot tell anyone.”

Female respondent

Abuse was predominantly committed by partners, but there were a wide range of potential abusers within the extended family and community. The Welsh Government intends to strengthen adult protection within the context of the Social Services Bill. Members of one group described the victimisation of ‘elderly women by their families [and] their own children’. Concerns around ‘honour’ meant families were unlikely to pursue these matters with the police.

Our youngest brother was giving our mother financial abuse — he would come home drunk, ring the bell and throw stones at her window. I was here with my older sister, we all knew it was going on but didn’t want to upset our mother. He was forcing her to go to the bank to draw money. He pushed me upstairs and hit me. I gave a statement to the police but mum persuaded me not to make a case because of honour.

\(^{19}\) This information was provided by the Home Office to Dr Amanda Robinson during 2012 as part of her work for the Task & Finish Group within Welsh Government.

Women recounted stories of abuse from their own family members and instances where other family members were unsupportive. This could lead to a loss of confidence and self-esteem.

“Sometimes violence happens in the house, but they would do nothing, could be an uncle/brother. It is sometimes talked of within the family. When violence is a family member, they won’t believe you. The family will keep it quiet and blame you— then you would lose your confidence and believe you’re to blame anyway.”

Psychological abuse
Women we talked to identified several forms of abuse, with particular reference to psychological and emotional violence, which was often felt to be more damaging than physical violence, which could lead to ‘low self-esteem’ and could be a precursor to physical abuse. They indicated that while counselling could help, psychological abuse had long-term effects. Women also identified controlling relationships as a form of abuse:

“Abuse is not just physical; you are not allowed an opinion, expression, or to read books. A friend once lent me a book on women’s rights. When I was found reading it I was hit by my family.”

Women recalled abusive language, including terms such as ‘slut, slag, fat and whore’ which were felt as being just as painful as physical violence.

Physical abuse
Extreme physical abuse was also reported, as well as being turned out into the streets without support:

Another girl who’d been beaten for 12 years – still doesn’t want to leave so the mother and husband throw her out. Her ribs were damaged and he hit her on the head and threw her out in the cold without anything. She sat in the police station from 8am until 2am the following morning.
Female respondent

Financial abuse was also recorded in asylum-seeking communities, with women being prevented from signing for the asylum support payments in order that the men could maintain financial dominance over them.

2.4.1 Intimate partner violence (IPV)
Intimate partner violence occurs where a spouse, sexual partner or ex-partner is the perpetrator. According to the World Health Organisation, intimate partner violence includes:

... acts of physical aggression, psychological abuse, forced intercourse and other forms of sexual coercion, and various controlling behaviours such as isolating a person from family and friends or restricting access to information and assistance.

IPV includes the stalking and harassment of current or former partners. Cross-culturally, the vast majority of recorded domestic violence is actually IPV, and victims are primarily female. Although women can be violent in relationships with men, and violence is also found in same-sex partnerships, the overwhelming health burden of partner violence is borne by women at the hands of men. According to the most recent BCS data (2011/12), women in Wales experienced nearly twice the levels of ‘any partner abuse’ than men (defined as non-physical abuse, threats, force, sexual assault or stalking by a partner) within the past year (7.7% — compared to 3.9% of men).

2.4.2 Sexual violence

Sometimes on top of those beatings they will force you to have sex with him. You have to accept sex with him because you have nowhere to go.

Female respondent

Sexual violence includes rape and other sexual acts where consent is not sought or is achieved through duress. Rape and other forms of sexual abuse may also occur in intimate relationships. The vast majority of victims of sexual violence are women and girls. The most recent BCS data (2011/12) indicates that women in Wales experience significantly higher levels of ‘any sexual assault (including

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attempts)’ at 3.2% of women compared to 0.7% of men in the last year, and 20.6% of women compared to 3.6% of men since the age of 16.

Common experiences of the women we interviewed were sexually exploitative relations where they were forced to exchange sexual services for food, shelter or accommodation due to having no other option for survival. Several women reported that men from their communities ‘preyed’ upon vulnerable, often young, asylum seekers through offering assistance such as legal advice, but these tended to develop into deeply exploitative relationships.

One said that vulnerable women who had recently been dispersed to Wales were exploited by groups of male friends for sexual purposes, and they feared if they reported violence then they would become homeless and vulnerable to yet further sexual exploitation.

*If I tell, I will be homeless, you are so vulnerable then, you will be ‘passed around’ (by other men with leave to remain) because of your immigration status.*

Female respondent

Other female asylum seekers with accommodation were exploited by homeless men.

*When they know you are an asylum seeker they know they have a ‘free’ house to stay. It’s very common abuse of asylum seeker status.*

Female respondent

Women trafficked into the sex industry are very likely to have experienced a great deal of sexual violence and asylum seekers and refugees may have been raped in their countries of origin, and also raped or forced to ‘pay’ people smugglers and traffickers with sexual services. Women and girls with no recourse to public funds may resort to prostitution or other exploitative sexual relations for survival; homeless women may be raped or sexually abused, and are at a high risk of violence.\(^{22}\)

Some of our respondents described other women engaging in prostitution while staying in refuges in order to make money, as they had so little financial support. This could be a situation which develops where women were accommodated

despite the fact that they were subject to NRPF restrictions, and the refuge provider could only afford extremely limited subsistence payments.

One participant identified an asylum-seeking woman whose children were removed from her care because she had been working as a prostitute in order to provide for them. Women who had been trafficked for sexual purposes highlighted a lack of recognition of their situations and difficulties in accessing appropriate support (see 3.6 below).

2.4.3 ‘Honour’-based violence (HBV)

So-called ‘honour’-based violence has been identified as a form of violence against women (in the sense that the majority, but not all, victims are women.) HBV may involve an abusive collective composed of the victim’s relatives. This makes the task of protection more challenging, given the networking potential of the collective and the emotional repercussions may be more traumatising, due to women and girls’ enmeshment with their families. HBV is perceived by its perpetrators and victims within ideas of ‘honour’ and ‘shame’, where the victim is believed to have caused ‘shame’ to the family through various behaviours which are perceived as deviant.23

Common triggers for HBV include expressions of sexual autonomy, refusal to enter a forced marriage, seeking divorce and taking legal action against an abusive partner, although some perceived ‘deviant behaviours’ may be comparatively trivial, such as receiving a text message. Such violence may be expressed through murder in its most extreme form, but may also lead to forced marriage, imprisonment, assaults, harassment and disfigurement. The BCS does not include questions on HBV specifically, so unfortunately it is not possible to determine self-reported levels of HBV in Wales. In response to a Freedom of Information request in 2012, South Wales police revealed that there were 53 recorded cases of HBV between January 2010 and March 2011, and 36 from April 2011 to January 2012.24

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In the UK, HBV is generally associated with South Asian and Middle Eastern/North African communities, although it may also be found within Eastern European and Central Asian families. Concerns around family ‘honour’ were identified as a significant issue for the South Asian group.

Consistent with past research, our work has shown that attitudes around ‘honour’ and shame also form significant barriers to the reporting of abuse, particularly of sexual abuse within the family. Such issues came up widely across our focus groups, preventing women reporting or leaving abusive situations for fear of causing gossip in the community. One woman told us that, ‘even if the men beat you and you run away to your own family, your family will send you back.’ Women were also brought up to believe that ‘it’s only a bad woman who can leave her family. What makes a ‘good’ woman is endurance.’

2.4.4 Forced marriage (FM)

Forced marriage can happen. At 17-18, you don’t know any better. Mentally you are hurt.

Forced marriages occur in communities where arranged marriages are the norm, but where one or both members of a couple may be coerced into marriages against their wishes, often by their own parents or extended family. While many arranged marriages are completely consensual, there is, however, some level of ‘slippage’ between the categories where young people’s ability to give free and informed consent to marriages with partners selected by their parents is lacking, although coercion may not be explicitly expressed. It is important to base the difference between arranged and forced marriage in the capacity of the parties to give a free and informed consent rather than in expressions of violence.

One of the women was married at 14 and had a child at 15. She said:

In my country, culture and religion influence. Since I was small I was abused by my whole family, including my brothers. I had no childhood. I tried taking my life three times. Until today I feel psychological pressure. No one will believe me and no one understands.

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In the UK, the Forced Marriage Unit operates out of the Home Office. The number of forced marriages in the UK is estimated at 5,000-8,000, where one in three victims is under 18 years of age. While some marriages are coerced through physical violence, other techniques include psychological abuse, emotional blackmail and threats of imprisonment. Fears of reprisals and bringing ‘shame’ to the family could lead to reluctance to secure access services.  

Data from 2012 tells us that 1,500 cases the Foreign Office dealt with were connected to families in Pakistan, but cases also came from Bangladesh, India, Afghanistan, Italy, Holland, Australia, Thailand, Indonesia, Nigeria and Iraq. One in five victims was a man. Ages ranged from five to 87.

Male victims made up 22% of this figure, and many victims were under 18; in 2009 41 per cent of victims reporting to local agencies were under 18, and the percentage of actual victims who are under 18 is likely to be much higher. In Wales, 32 cases of forced marriage were dealt with by South Wales Police in 2008, and in 2011, this had increased to 49, with people seeking help for forced marriage every week. Legal remedies include civil protection through Forced Marriage Protection Orders (FMPOs), and where the victim is under 18, the use of Child Protection procedures can be used alongside FMPOs.

In our research, forced marriage was described as ‘stressful and emotionally abusive’, as was underage marriage. The participant quoted above revealed that she felt unprepared for the responsibilities of motherhood and found it very traumatic. She had been married to an abusive man who told her he intended to take three more wives, and who then attempted to kill her when she left him. She added:

> In my country, women are seen as weak. It’s normal for women in my country to commit suicide. They are very weak and there is no way out.

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28 Ibid.
29 Lakhani, N. 2012. UK Forced Marriage Victims Much Younger than Previously Thought. The Independent. 2 April 2012.
While one of the male focus group participants described forced marriage as a dying practice, most women in our research did not speak of it in these terms, and it was identified as an issue by young participants.

One woman, who came from a country with a notoriously poor human rights record, shared her story:

I am just a body there. We are married at 11, 12, and 13. I was so scared they would make me do this. I wanted to marry someone I chose. I had a mental problem, I was always crying. When I come here, I learned who I am... A woman can’t even buy fruit or do anything on her own... Your life is gone if you are married at 12. My mother had five children, faced abuse from her husband and family. No happiness. I told my mother I want my life to be different.

Female respondent

2.4.5 Female Genital Mutilation (FGM)

When sewing up some girls at circumcision, it’s not seen as wrong. Growing up, no one says it’s wrong ... At school, there was a perception [from teachers and classmates] that you are not a woman unless you have been circumcised. Now I am here, I can see it’s wrong.

Female respondent

FGM is a harmful traditional practice native to certain regions in Africa, the Middle East and South-east Asia, where girls and women, often at young ages, are subjected to genital surgeries which are intended to make them ready for marriage. These range from cutting the clitoral hood, clitoris or labia to even more extreme interventions such as infibulation which includes suturing the genital area leaving only a small passage for urine and menstrual flows.

FGM has numerous negative health and psychological impacts upon women and girls, from physical shock and haemorrhage during the procedure, to ketosis and scarring leading to difficulties in labour, to long-term post-traumatic stress disorders. One woman told us about the effects, ‘you are not you as a woman’ and another, that ‘no woman should go through that pain’. FGM is illegal in the UK, but is rarely prosecuted. It is estimated that at least 66,000 women in England

and Wales have undergone female genital mutilation, and 33,000 girls under the age of 16 are at risk of FGM.\textsuperscript{33}

In our research, most women identified FGM as a form of violence and a source of long-term trauma, but stated that this was less an act carried out by mothers, but more by paternal grandmothers, who often took advantage of the mother’s absence on an errand to cut the genitals of the daughter, and also that the requirement differed from tribe to tribe. One woman took care to specify that FGM is not only a matter which affects girls, but that women in mid-life could also be ‘cut’ as a precursor to marriage, if it was required by the prospective husband and in-laws. Whilst women in this scenario are perpetuating the practice of FGM, this should be seen within the context of familial and societal structures and expectations around male control and ownership of female sexuality.

2.4.6 Trafficking

Human trafficking is the fastest growing form of international organised crime, with estimated profits of $12 billion and $17 billion per year.\textsuperscript{34} In 2012, 1186 referrals were made to the UK Human Trafficking Centre from 95 countries, which was a 25% increase on 2011. 66% of these were females, and 34% were male. In the same period, 372 children were referred, who had been trafficked from Nigeria, Vietnam, Albania, Romania, China, Poland, Slovakia and Lithuania.

Women and girls are around 70% of trafficked persons internationally, and almost all of those trafficked for sexual purposes. Trafficked women are vulnerable to rape, violence and various forms of exploitation. Violence and threats of violence may be used to enforce compliance with the traffickers’ demands – including threats of violence against a woman’s children. Women trafficked as domestic servants may be raped by male members of the household, as well as forced to work long hours for no pay and little food.

Project Acumen found that of 17,000 migrant women working in the off-street prostitution sector, 2,600 had been trafficked into sexual slavery, and 9,600 more could be considered vulnerable. It identified 76 premises engaged in providing sexual services in Wales, with around 40% of the sex workers having migrant origins.\textsuperscript{35}

Participants in our own research reported personal experiences and wide knowledge of various forms of GBV in their communities. In the next section of

\textsuperscript{33} Dorkenoo, E. et al. 2007. A Statistical Study to Estimate the Prevalence of Female Genital Mutilation in England and Wales. London: FORWARD-UK.


this report, we provide an account of the topics which were identified as important by our participants.
3. Topics identified

3.1 Violence in the country of origin

I have no one to turn to. My asylum claim, based on domestic abuse, was refused. I have no friends, no family, no anyone, just me and the children.

Female respondent

Women form the majority of refugees on a global basis, and across the UK, since the early 2000s, around a third of all claims for asylum are initiated by women. Gender-based violence may be an aspect of women’s claims for asylum. Rape and sexual violence is a common phenomenon in warzones (e.g., during wars in Sierra Leone and Liberia, 50% of women were raped, rising to 80% of internally displaced persons and women living in refugee camps). UNHCR state that sexual violence and gender-based discrimination against refugees, sexual and gender-based violence, especially against women and children, ‘continues unabated’.36

The Information Centre about Asylum and Refugees (ICAR) state that women are... likely to flee from gender-specific forms of persecution: sexual violence, marital rape, domestic violence, female genital mutilation, forced abortion or sterilisation.38

The Refugee Council39 describes the perilous journey of women seeking asylum:

There are risks of violence at every stage of their experiences. During conflict, or prior to flight they may have experienced militarised violence, politically motivated violence or violence from family members. During transit, they are vulnerable to fellow travellers, people smugglers and go-between. In their country of asylum they are vulnerable to sexual exploitation, or being forced into prostitution through poverty. If they are repatriated, they may face reprisal violence in their countries of origin.

38 Information Centre about Asylum and Refugees. 2007. Women Refugees and Asylum Seekers in the UK. London: ICAR.
During transit, women and girls run many risks including the risk of arrest, illness, injury, and death from dangerous modes of transport, high-risk border crossings, and violence.\(^{40}\)

Only Sweden and the UK publicly provide gender-disaggregated statistics on the number of asylum appeals lodged and their outcome. However, official statistics on the number of asylum claims that are made due to gender-based violence are not routinely collected in the UK. This makes understanding the prevalence and impact of gender-based violence in the asylum process highly problematic.

According to Asylum Aid (2012), Belgium is an example of good practice as this country also provides detailed data for the different types of persecution related to gender-based claims, including sexual orientation and gender identity, ‘honour’ crimes, Female Genital Mutilation, forced marriages, domestic violence (other than sexual violence), sexual violence/rape, and forced sterilisation and forced abortion. In 2009, of the 24,450 applications received in the UK, 8,045 were made by women applying in their own right.\(^{41}\)

A recent study by Asylum Aid analysed a random sample of 45 women who had been granted or refused asylum (15 from each of three UKBA offices, one of which was Cardiff). In 31 of 45 cases (69%), the women had experienced some form of gender-related persecution.\(^{42}\) The most common form of gender-related persecution reported in the women’s asylum applications was rape (reported in 18 cases). Another study by the Refugee Council\(^{43}\) with 54 women seeking asylum revealed that:

- Over 70% had experienced violence
- 57% had experienced gender-based violence in their country of origin
- 44% had been raped
- Just under 30% had been tortured
- 33% had fled ethnic persecution
- Half had mental health needs; over 20% had acute mental health problems
- 33% had been refused asylum
- More than 20% were destitute

The Refugee Convention does not explicitly recognise persecution due to gender as grounds for a claim for refugee status: historically refugees have been


conceived as male political activists, persecuted by the state — women and children were regarded as passive dependents. The ‘membership of a particular social group’ category in the Refugee Convention has been used to partially fill this gap, though for women who have experienced gender-based violence or who fear harmful traditional practices such as FGM, it may be difficult to establish a credible asylum claim due to lack of gender-sensitive processes. Some refugee organisations argue that many procedural issues still prevent women from gaining protection through the asylum system.\textsuperscript{44}

In 2006, the UN General Assembly recommended that:

\begin{itemize}
  \item [...] States adopt a gender-sensitive approach to asylum, and successive Special Rapporteurs for Violence Against Women have recommended a greater awareness of issues relating to gender in the asylum claim.
\end{itemize}

The UK has more gender-sensitive policies in place than some other member States, but it can be argued that, despite improvements at a policy level, the steps taken so far are have not resulted in improvements on the ground.\textsuperscript{45} Criticisms of the Home Office’s quality of decision making with regard to women’s asylum applications led to the appointment of a ‘Gender Champion’ in the Home Office and the issuing of new Home Office Gender Guidelines in 2011. These guidelines acknowledge that a wider range of acts which have a gender-specific nature and may also constitute persecution.

However, there are on-going issues related to lack of gender sensitive process in practice. A recent report indicates the practice still lags far behind policy intentions.\textsuperscript{46} Souter summarises the findings of several agencies working in asylum issues which point to a ‘culture of denial’ operating within UKBA.\textsuperscript{47}

An analysis of women’s asylum applications found:\textsuperscript{48}

\begin{itemize}
  \item [...] Women were too often refused asylum on grounds that were arbitrary, subjective, and demonstrated limited awareness of the UK’s legal
\end{itemize}


\textsuperscript{46} Querton, C. 2012. I Feel Like, As a Woman, I’m Not Welcome: A gender analysis of UK asylum law, policy and practice. London: Asylum Aid.


\textsuperscript{48} Muggeridge, H. and Maman, C. 2011. Unsustainable: The quality of initial decision-making in women’s asylum claims. Asylum Aid.
obligations under the Refugee Convention... 50% of the refusals in our study were overturned when subjected to independent scrutiny in the immigration tribunal.

Research points to an inconsistent understanding by the Home Office of the relationship between gender and asylum and the complexities of asylum claims made on the basis of GBV.⁴⁹

Regional differences in the quality of decision making have also been highlighted. Asylum Aid reports that ‘the high percentage of appeals allowed in London is striking’ and also that ‘the number of cases where the initial decision was upheld at appeal (rather than overturned) was considerably higher in Cardiff than in other regions’. ⁵⁰ Further research is required to understand the reasons for this disparity. Asylum Aid research also shows that 60% of asylum seekers had a female interviewer which has been recommended as standard practice.

### 3.2 GBV and the asylum interview

> Our cultures are not used to disclose such information [about violence, rape, etc.] You need to prepare women. Refugee Council... whoever... someone should help. A counsellor should be there.

Female respondent

In our focus groups, asylum-seeking women described being ‘scared’ by their initial interviews and being accused of ‘lying.’ They felt underprepared, having never experienced such an interview before, and were inhibited from freely discussing their experiences, especially in relation to sensitive subjects.

The impact of sexual violence on women’s ability to disclose their experience during the Home Office interviews is significant. They may be inhibited from full disclosure for a variety of reasons including feelings of shame, guilt, perception (or reality) of an unsympathetic environment, and also because, as the women we interviewed emphasized, many come from cultures in which the discussion of sexual violence violates taboos. Furthermore, women who are known to have experienced sexual violence may be shunned by their community and therefore may not disclose their experiences at interview. Several participants in one survey

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into the effect of sexual violence on disclosure reported difficulties in disclosing, with PTSD having an impact in terms of disassociation and feelings of shame. The survey also found that symptoms of PTSD may also be activated during the Home Office interview because the applicant is reminded of the traumatic event.\footnote{Bögnot, D. et al. 2007. Impact of Sexual Violence on Disclosure during Home Office Interviews. \textit{British Journal of Psychiatry} 191(July), pp. 75-81.}

In any case, an expectation of immediate disclosure does not reflect the psychological and cultural realities of women’s experiences of sexualised abuse. In Syria, a deeply conservative society where it is widely reported that women and girls are being systematically targeted and raped in the current conflict, most women will not admit to being raped themselves. Instead, they tend to say that they have seen other women being raped.\footnote{Greenwood, P. 2013. Rape and domestic violence follow Syrian women into refugee camps. \textit{The Guardian}. 25 July 2013.}

Women’s Asylum News profiled research into the factors which inhibit disclosure in the asylum process, the extent to which women’s recounting of experiences of rape are accepted by decision-makers, and the impact on women’s credibility.\footnote{Baillot, H. et al. 2012. Just a Story?: Rape narratives and credibility assessments of women seeking asylum. \textit{Women’s Asylum News} 4(111).} In this research, many participants in described the environment at the asylum interview and at subsequent appeal hearings as hostile.

These sentiments were echoed within our own research:

\begin{quote}
My experience is that from the word go you are not believed or credible. You have no proof for your claim and are unlikely to be believed.
\end{quote}

Female respondent

In refusing asylum claims, the decision-makers frequently gave reasons such as ‘delayed disclosure, narrative inconsistencies, and a calm (or, conversely, an ‘overly emotional’) demeanour on the part of the female applicant, to justify suspicion regarding the credibility of her (rape) claim.\footnote{Ibid.}

While a disclosure of rape may not be determinative in all asylum applications, it certainly may be relevant to many crucial considerations, including the degree of the harm suffered and the prospects for safe return ‘home’ in environments where rape victims are stigmatised by their communities, and in some cases their own families. Moreover, non-disclosure of the rape may affect credibility and lead to a subsequent negative decision on the asylum claim.\footnote{Ibid.}
It is often very difficult for women to recount their experiences in a predominantly male environment, where, for instance, there may be a male interpreter or interviewer or legal representative present. One woman told us ‘the second time I went to court, the judges and everyone there was male and I felt that they were judging me.’

The inability to disclose and the consequences of credibility issues can mean that many women’s cases are refused. The views of several women in one of our Wales focus groups showed a common perception that they had not been believed, and fed into a cynicism about services in general.

_We all have experience of not being believed, the UKBA don’t believe us so why will anyone else believe us, so what’s the point._

_Female respondents_

Women we interviewed often talked about not being believed by different authorities such as UKBA, the police and social services, and also had similar feelings about their experience of the judicial system:

_When I was in court for five days, I felt the judge did not believe me. When my four year old daughter spoke, the judge and the jury believed her but not me._

_Female respondent_

Issues with gender and the asylum claim were highlighted in a House of Lords Debate, where the Home Office was urged to act: 56

_In order to improve in particular the quality of asylum decision-making, the Home Office should show leadership on the importance of breaking down the culture of disbelief, which is particularly obvious in the treatment of women._

More work also needs to be done to ascertain what information women are given at the ‘front end’ of the process to ensure that women are aware of their rights at the asylum interview, including the fact that they can bring a friend or supporter

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by prior arrangement, are entitled to a female interviewer and interpreter as stated in the gender guidelines, and to discern what kind of support they would need pre-, during and post-interview to enable full disclosure — thereby ensuring that the full facts of their cases are known by the Home Office.

A critical but perhaps neglected factor in the process is the extent to which Home Office staff are both trained and supported in dealing with cases of gender, sexual violence and torture.

Baillot et al.’s research into key players — immigration judges, legal representatives, NGOs, UKBA and interpreters — working in the asylum process identified that:

*Professional actors may feel embarrassed or uncomfortable questioning on the detail of the rape, or avoid dwelling upon it as a strategy for coping with the emotional challenges of hearing such accounts.*

They highlight that Home Office Asylum Case owners dealt with issues in various ways, by ‘shifting responsibility’ to another decision maker, taking an ‘objective’, ‘matter of fact’ approach which sometimes translated into a ‘marked reluctance to engage with the asylum seeker’s narrative (of rape) altogether’. Women may also experience this issue with their legal advisor and in court: some participants, including legal representatives and UKBA personnel, spoke of ‘treating it all as just a story’ and ‘not thinking about the reality.’

It is well documented that many asylum seekers have suffered or witnessed torture and sexual violence. However, CEDAW highlight that women and girls who are asked to recount the details of rape and other forms of sexual abuse are required to do so under situations quite different from those in which British rape victims address criminal courts, and that their claims are not treated as credible if they are not made at the first encounter. At the time this research was conducted the United Kingdom Borders Agency (UKBA) was responsible for many aspects of service provision and decisions on asylum claims: these functions are now carried out by the Home Office. The Home Office provides statistics broken down by sex, age and nationality but does not specify the reasons for claiming asylum, so the extent to which individuals claim protection on gender-based grounds is not apparent.

CEDAW also notes that mistakes are likely:

*... in relation to gender-based violence, which women do not always reveal at first interview, especially if the interviewer is male and/or lacks*

awareness of and sensitivity to the shame associated with sexual victimisation, as recognised by UNHCR.

The Charter of Rights of women seeking asylum was launched in June 2008 and states.

If a woman suffers rape, domestic violence or honour crimes in the UK there are gender-sensitive practices that have been developed within the criminal justice system to respond appropriately. If a woman suffers similar violence in her home country and comes to the UK to seek protection, the immigration system should respond to a similar standard, learning the lessons from the criminal justice system.

Asylum Aid point out that the UK Border Agency (now subsumed into the Home Office) has two policies relevant to violence against women. In contrast the police and Crown Prosecution Service have developed a whole host of policies in response to gender-based violence. For a truly integrated and non-discriminatory strategy, the policies and practices developed for victims of violence against women within the mainstream criminal justice system need to be transferred to the asylum system.

Clearly the presence of children at the asylum interview inhibits full disclosure and also causes children harm through hearing their parent(s) recount traumatic experiences. Wales and South West was the first immigration region in the UK to have childcare provision at the asylum interview. This represents a major step forward in assisting full disclosure and helping the Home Office meet its duty to safeguard and promote the welfare of children. Childcare provision is now available at most regional offices and embedded in Home Office policy. However, our research in Wales highlights once more that serious and urgent consideration should now be given to how victims of sexual violence and torture (male and female) are enabled and supported to give an account of their experiences at the asylum interview.

We welcome the fact that the Home Office are currently reviewing their guidelines for case owners on conducting the asylum interview, and that women’s organisations are able to contribute to this process. Our research shows that the Home Office (and also legal and judicial stakeholders) should also consider how their staff are trained and supported on gender-based violence issues, ensuring

that new case owners are aware of the existence of the Home Office’s own gender guidelines, and enabling input from independent, local, expert agencies on training on violence against women issues to update their knowledge. They should also consider the extent to which structures and processes are in place in the Home Office to counter professional ‘burn out’ and detachment from rape and other traumatic cases.

There needs to be on-going dialogue with the Home Office on how they can enable survivors of torture and sexual violence (male and female) to recount their experiences, learning from the criminal justice system and in line with the Asylum Women’s Charter.

### 3.3 Access to legal support

*Female respondent*

_A man said to me that he could help me because he had papers. He said I can get you a solicitor—I am older, so I said, “You can’t help me. Only god can help me,”— but younger girls would have believed him._

As the quote above illustrates, women are so desperate for help, including for legal support, that predatory men can use this as a means of exploitation. Women are better informed about the asylum procedure and better prepared if they are legally represented. It is an important determinant of their ability to present all the facts of their case. Some (but not all) women say that they prefer female legal representatives and familiarity with gender related claims for asylum, such as those related to a fear of FGM. One woman told us she felt ‘abandoned’ at appeal stage (this relates to the fact that if a case lacks legal merit, it cannot be pursued to an appeal stage). The subsequent experience of going to a Tribunal alone was described as ‘traumatic’, some women said they felt exposed to the ‘whims’ of a Judge and Home Office Presenting Officer, who may not show sensitivity to the gendered aspects of the claim.

It should be noted that where families claim asylum together solicitors only deal with the main applicant which in the majority of cases the main applicant will be the husband; they may never meet the wife and will rarely have cause to meet with her alone. As a result of that, domestic abuse issues which arise in the UK will often never come to the attention of solicitors.

Asylum seekers and victims of gender-based violence often have complex claims and require early and front-loaded legal advice. This has always been a challenge but in the current climate the situation may be getting worse. Representations have been made in the House of Lords for the provision of better legal advice at in
the early stages of the asylum claim, citing the Solihull Early Legal Advice Pilot as an example of good practice. Unfortunately, unless the pilot is rolled out nationally, firms cannot be forced to adopt this way of working though some solicitors in Wales routinely adopt some of the practices (such as meeting with a client after a substantive interview). In 2009 the Welsh Refugee Council set out the difficulties for asylum seekers in accessing proper legal representation, highlighting the speed of the process, issues with onward dispersal and gaps in provision. The availability of legal advice has changed since 2009 and 16 new Legal Aid contracts have been awarded in 2013 with a geographical spread across Wales. The Legal Aid Agency state that while non-Asylum work is largely no longer covered by Legal Aid, some types of non-Asylum work remains in scope for Legal Aid designed to protect vulnerable clients, including; victims of Human Trafficking, victims of Domestic Violence and people in Immigration detention. However, other organisations argue that women are likely to be disproportionately impacted by recent cuts to the legal aid budget and changes in the provision of legal aid.60

3.4 Dispersal

People should be linked up when they first come in, people who have been abused, raped, to support them would help.

Female respondent

The Government programme of asylum dispersal61 has resulted in some asylum seekers being housed in racially tense and volatile environments with very little support.62 Dispersal is done on a ‘no choice’ basis and research has found that it may disrupt established relationships/friendships and continuity of healthcare, and can isolate women and children from potentially supportive networks, where they exist.63

In some cases asylum seekers are housed in areas where such communities are underdeveloped, where specific cultural issues are poorly understood, and where local authorities and public agencies have not yet developed appropriate responses to diversity, including violence occurring in BME communities.

61 See glossary
Some women fleeing violence may wish to seek safety with relatives in the first instance, but where women have no relatives and friends in the UK and their financial support is tied to living in a particular area, as is the case with dispersed asylum seekers, this option is mostly unviable. Conversely, if a woman needs to be protected from her extended families due to a risk of ‘honour’-based violence and she has relatives dispersed across the UK, finding a safe geographical location in the UK is more difficult.

Responses from the Wales focus groups show that the isolation of newly-dispersed asylum seekers may be exploited by men and women who ‘groom’ new arrivals into abusive relationships through taking advantage of their poverty, isolation and vulnerability. A review of the Wales Women Seeking Sanctuary Advocacy Group (WSSAG) Project found that women in Wales experienced ‘feelings of isolation’ and being ‘at risk of other dangers’ when they first arrived in Wales.

Despite the Home Office policy bulletin on domestic violence, which states that women should be given information by accommodation providers on arrival, provision of information is patchy and there is a lack of coordination between the policies of the Home Office and the contracted accommodation provider. This may leave some women and their children unaware of their rights and the way to access services.

### 3.5 Experiences of LGBT Asylum Seekers

LGBT asylum seekers people may face racism and homophobia. Many are isolated from their own communities due to fears of negative attitudes around sexual orientation and thus lack supportive networks, tending instead to try to build relationships through the LGBT social scene. In some cases this means they risk becoming exploited. Research shows that LGBT asylum seekers who had experiences of shared asylum dispersal accommodation reported harassment on the grounds of their orientation or gender identity from housemates due to a policy of housing on the basis of ethnicity.\(^\text{64}\) Thus, those who were attempting to escape homophobic attitudes within their country of origin were forced to share housing with people who shared the same prejudices that they had left their country to escape. Many LGBT asylum seekers who seek to leave their accommodation for this reason are dependent upon the goodwill of friends and partners for accommodation.

The Home Office does not publish statistics upon persons seeking asylum on the basis of sexual orientation. UK Lesbian & Gay Immigration Group (UKLGIG) note

that of around a thousand asylum seekers who sought help from their
organisation in 2012, just 47 were ultimately granted asylum. 

LGBT asylum seekers explicitly seeking protection on the basis of violence
experienced or feared due to their sexuality also face challenges in gaining
protection. Homosexual acts are forbidden by law in 80 UN Member States and
cultural taboos are even more widely prevalent. Several countries have been
identified as extremely hazardous for LGBT persons, including the Democratic
Republic of Congo, Iran, Iraq, Jamaica, Nigeria and Pakistan.

As is often the case for women and girls attempting to substantiate claims of
persecution on the basis of gender, LGBT asylum seekers confront the need for a
heavy burden of proof when dealing with the asylum system. 

Research in Scotland suggests:

...that lesbian asylum seekers find it extremely difficult to succeed in their
asylum claims. As well as shortcomings in the use of country evidence and
criticisms of the use of ‘safe internal relocation’, our research suggests
that UKBA is failing to fully understand the pressures that women come
under to conform to their expected gender role and often unfairly refuse
to accept women’s accounts of being a lesbian as credible.

Reports from Stonewall and UKGLIG identified faults in UKBA’s casework
relating to LGBT asylum seekers – with particular reference to ‘discretion’ and
assumptions around internal relocation – which led to a statement from the
Coalition Government in 2010 stating that ‘We will stop the deportation of asylum
seekers who have had to leave particular countries because of their sexual
orientation or gender identity puts them at proven risk of imprisonment, torture
or execution.’

3.6 Human trafficking

‘Trafficking largely operates in an underworld of failing economies, poverty,
discrimination, patriarchal attitudes, corruption and violence,’ according to

UK Lesbian & Gay Immigration Group. 2013. Missing the Mark: Decision making on
lesbian, gay (bisexual, trans and intersex) asylum claims London: UKLGIG.
66 Bowcott, O. 2013. Gay Asylum Seekers Feeling Increased Pressure to Prove Sexuality,
67 Cowen, T. et al. 2011. Sanctuary, Safety and Solidarity: Lesbian, gay, bisexual and
transgender asylum seekers in Scotland. Glasgow: Equality Network; BEMIS; GRAMNet.
68 Miles, N. 2010. No Going Back: Lesbians and gay men and the asylum system. London:
Stonewall.
69 UK Lesbian & Gay Immigration Group. 2010. Failing the Grade: Home office initial
decisions on lesbian and gay claims for asylum. London: UKLGIG.
Baroness Helena Kennedy. Women described her experiences of sexual trafficking in our focus groups:

_Why didn’t this country see my faked passport? I had to work with men and have sex, like many girls from my country._

_I was alone. I had nowhere to live. I came from my country to do house care. She brought me here. She lied about house care. She brings the men so I do sex. No help because I speak no English._

Female respondents

Many women, including some of the women who participated in our research, are trafficked to the UK for the purposes of sex-work or forced and domestic labour.

Forced labour and sexual exploitation may be found in situations which do not fit the stereotype of human trafficking, where traditional practices like bride price and the exploitation of financially vulnerable women such as those with NRPF may create similar dynamics. For example:

_I was kept at home for eight years. I was not allowed friends. I was told that my parents had sold me to the family. They would lock me in a room. I was chucked out when I was dependant, like I was nothing._

_I was made to work for a family like a slave. They kicked me out in the middle of the night. They told me I can’t do a thing for myself. No one knows you are here or cares. You are like a ghost. I didn’t even know I could go to the police. I was brainwashed to believe I cannot do anything without them. My friend helped with solicitor, and BAWSO showed me how to do things._

Female respondents

Women may find themselves criminalized if they have been forced by their traffickers to engage in behaviour such as prostitution, using forged ID (issued by their traffickers), cannabis cultivation or petty theft — although hard evidence is not easy to obtain. Research suggests that defence lawyers often encourage

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trafficking victims to lodge a guilty plea rather than to challenge the charges on the basis of ‘duress’ – this may be related to delimitations around legal aid which can make lengthier engagements unprofitable for the lawyers involved. 71

Hale and Gelthorpe concluded that there needs to be:

...early and effective recognition of their victim status, criminal investigations into their abuse and for those with grounded fears of return, leave to remain in the UK and re-start their lives.

Research clearly demonstrates that the health implications from being trafficked are profound. Little is known about how trafficking victims access health services, though it is recognised that trafficked men, women and children frequently experience extreme physical, psychological and sexual violence and social marginalization, and many suffer from acute and long-term health problems. The impact that trauma can have on memory has implications for women who have to give an account of their experience, either to police and/or to the Home Office, to provide criminal evidence, and to participate in trial proceedings as well as an asylum interview.

Research conducted in 2010 indicated that guidelines were not being followed and that a victim-centred approach, which prioritises the support needs of the victim, was not being followed. 72 Similar conclusions were reached in Wales, where it was found that responses to victims of trafficking were variable and inconsistent. 73

The Anti-Trafficking Monitoring group note particular problems in dealing with trafficking within Wales: they suggest that lack of awareness of trafficking suggest means traffickers are identifying Wales as a lucrative destination for their criminal enterprises; they also identified a lack of knowledge of the National Referral Mechanism and differences in approaches across the four Welsh police forces. 74

Given the key role of health professionals in identifying and referring trafficked people to other services and receiving and treating people referred for healthcare, more needs to be done. Front line staff — not just in health — but across statutory and non-statutory agencies in Wales must be trained in recognising signs of trafficking and routes of referral with especial attention being paid to staff working in ports such as Holyhead. Article 12 of the Convention on Trafficking emphasises the need for physical, psychological and social rehabilitation of trafficking victims.

 Trafficked women and girls may have experienced physical, sexual and psychological abuse, the forced/coerced use of drugs and alcohol, economic exploitation and debt bondage, legal insecurity, abusive working and living conditions, and a range of risks associated with being a migrant and/or marginalised.\(^75\)

Since this research, an Anti-Human Trafficking Co-ordinator (AHTC) has been recruited to develop the service response and a specialist training module for Police Senior Investigating Officers (SIOs) has been designed by the Police, Crown Prosecution Service and the Anti-Human Trafficking Coordinator.

### 3.7 Poverty and destitution

Destitution (as defined in Section 95 of the Immigration and Asylum Act 1999) is where a person:

- does not have adequate accommodation or any means of obtaining it (whether or not his other essential living needs are met); or (b)...has adequate accommodation or the means of obtaining it, but cannot meet... other essential living needs.

An asylum applicant who is homeless or without money to buy food (the Home Office call this ‘destitute’) can make a claim to the Home Office for accommodation and support whilst their asylum claim is being processed. Asylum seekers are not permitted to work, and asylum support rates have been frozen for three years.

One woman we spoke to highlighted the difficulties of managing to feed and support families with such a tight budget, commenting ‘because we are asylum seekers on £36 a week, you have to eat small amounts sometimes so that this money can go far.’

Evidence from the Children’s Society which was given to a recent Parliamentary inquiry highlighted that some families live on less than £5 per person each day.

One participant told us:

    I knew of a case of an asylum seeker going out at night to look for money to help the children. When social services found out they took the children, but what she was doing was to help herself and the children.

Female respondent

For those asylum seekers who have failed their asylum claim and who are destitute and fulfil qualifying criteria, the Home Office provide ‘Section 4 support’ on the proviso that asylum seekers make arrangements to return to their country of origin as soon as possible. However, the levels of support through Section 4 are low and lead to immense privations for women. Also, S4 support is given via a card-based system with no cash available, and it leaves many women unable to cover expenses such as public transport.

The quality of decision making in relation to granting Section 4 support has been strongly criticised: 82% of UKBA decisions to refuse Section 4 support on the grounds that the applicant is not destitute are overturned on appeal.76

Many asylum seekers will not sign up for Section 4 support because they fear returning to their countries of origin and will therefore face homelessness and destitution. Their survival strategies are documented in research conducted in Wales and the UK by Oxfam. The ‘Coping with Destitution’ report highlights the link between poverty and violence and the fact that many refused asylum seekers live in desperate poverty with constant fear of deportation – reliant on friends, transactional relationships, commercial sex work or low-paid illegal work.77 Such activities may increase vulnerability to various forms of abuse, including domestic violence from sexual partners who are exploiting the vulnerability of women in desperate circumstances.

Some asylum-seeking women we interviewed were victimised by friends and boyfriends who took advantage of their relative poverty and vulnerable situations.

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76 Asylum Support Appeals Project. 2011. No Credibility: UKBA decision making and Section 4 support. London: ASAP.
Some men see your asylum seeker status as a way to control you; they say that because they have a secure status they can help you. My friend moved in with someone who said this, she ended up being a slave with her children, cooking and cleaning, she was kicked out in the end.

Female respondent

Some women were exploited by ‘friends’ who offered accommodation in return for domestic labour:

Even friends abuse you as well. After a time you become a slave, you clean for her, you serve her and even your child becomes her slave.

Female respondent

Destitution and poverty thus present major problems to the stability and security of women and families, leading to violence and exploitation.

3.8 No Recourse to Public Funds

No recourse to public funds makes such a difference. The person has no money and the abuser knows that so he continues to abuse. Organisations need money to help you but they can’t claim from the government so they cannot survive.

Female respondent

The NRPF policy affects a wide range of women including asylum seekers, women who entered the UK on valid visas as spouses, students, visitors or workers, those whose visas have expired and who are therefore classified as over-stayers, and those who have been trafficked into the UK. Women and girls from European Union accession countries are also restricted in their ability to access public funds if they have been in the country for less than a year. Changes to the immigration rules in 2012 mean that some people granted leave to remain for reasons of family or private life will also be subject to NRPF conditions.

This policy presents a serious problem when a woman experiencing violence wishes to seek protection in a refuge: she is likely to be turned away. One woman told us ‘I was referred to BAWSO, seeking a place to stay. Because I had no papers, they turned me down.’ Women we spoke to clearly felt the pain of being denied protection because of their limited access to public funds and their insecure immigration status.
The organisations that can assist rely on public funds to survive. If you have NRPF then the help they will give you is limited. They should not put a barrier; a woman is still a woman.

Female respondent

Several reports detail the severity of problems faced by people with NRPF and the desperate position of many women, forced either to tolerate abuse, or to take to the streets to face homelessness and destitution. Similarly, in our research, we were told:

*Regarding my experience of contacting Women’s Aid – I was destitute – so they said they could not help me as I had no recourse to public funds – and said I should make sure I was safe. It wasn’t easy to leave with two children. I could read a bit of English – for those women who can’t read there is a real problem.*

Female respondent

Another woman recounted that she was forced into homelessness due to abuse:

*I had no house, no friends and I was NRPF. When I came here, I was sleeping on the streets. If it was a film, no one would believe it. I had no help from the police.*

Female respondent

NRPF restrictions lead to women continuing in abusive relationships, and women’s lack of independent immigration status was used as a tool by which abusers could exert power and exploit their partners. One woman told us ‘*when men know you are powerless, that gives them more power and domination*’. An abuser’s non-cooperation in regularising women’s status can increase dependency. Many women asylum seekers reported ‘*keeping quiet*’ and ‘*enduring anything while waiting for their [immigration] papers*’. Another stated, ‘we have to be quiet and put up with it.’

Movement towards the ten-year route for married women will intensify this problem (see 3.10 below). Some women stated that families and partners actively prefer women with insecure immigration status or new to the UK because it made them easier to control through restricting their ability to leave:
They would rather bring someone from [the country of origin] so that the mother-in-law...can control her more.

Female respondent

Many organisations in the UK, including Women’s Aid, Eaves Housing and The Women’s Resource Centre have joined in urgent calls to address this situation. In the UK, shelters are generally financially supported by women’s access to various state benefits: since women with NRPF had no access to these benefits, domestic violence shelters and other organisations were being forced to either send desperate and vulnerable women back into the street or risk financial viability.

This had profound implications for women’s safety:

A survey of 11 London refuge providers found that in the period 2006/0, 223 women with no recourse to public funds requested refuge space. However, only 19 (8.5%) women were accepted for support. This is just 3% of the total of 585 women who were provided with refuge space by these providers in 2006/07. Of the 19 women accommodated, 16 had children.

Many women in Wales were also left without protection:

BAWSO...have indicated that the total cost to them for supporting women with NRPF was £222K in 2008/9 through cost of refuge, outreach support and subsistence allowance. Some 204 women in Wales have been supported in this way over the last three years. In 2008/9, 40% of BAWSO’s service users who were fleeing domestic violence had no recourse to public funds. Forty-two women remained on BAWSO’s waiting list for space in a refuge.

It is unclear what level of financial and other support is available to women with NRPF who nevertheless are accommodated in refuges, rather than being left destitute and homeless or returning to violent situations. Women’s refuges, risking financial viability by providing emergency protection, may need to support women for extended periods of time. Anecdotal evidence suggests that women in this situation have as little as £10 a week to live on.

In our research, many women identified NRPF as a serious problem. Women (and their children) were placed in extremely difficult and dangerous situations as a result of this policy.

CEDAW recommendations already require the UK to address the impact of the no recourse rule on women experiencing violence. Rights of Women ask also for a ‘permanent, legally enforceable, resourced solution to the no recourse rule for all women – not only spouses fleeing violence, and state evidence suggests that this is also a cost effective solution.’

Local Authorities often lack the information and ability to deal with victims of abuse who have restrictions relating to NRPF and evidence suggests they may try to pass on the problem rather than taking action. Many staff are not aware of where to go for information on NRPF policy and legislation — such as the WMP, who chair a NRPF network in Wales, or the NRPF UK network, which has published guidance and research.

NRPF cases need to be dealt with by Local Authority staff who are aware of, and follow, NRPF guidance to prevent attrition, and who link in with the right partners, including the Home Office. NRPF research shows that NRPF cases need to be continually monitored and reviewed, but that this is not happening in many cases. This presents safeguarding concerns, especially for children. The NRPF Network also highlight that proactive engagement with cases could help militate against the distress caused to individuals and families associated with delays in the immigration process. Their report recommends that while NRPF is not a devolved policy area, local policies and procedures should be available to ensure statutory duties to people with NRPF are met. Also, many Local Authorities in Wales and the UK are not collecting data on the numbers of NRPF people they are supporting.  

Newport City Council is the only Local Authority in Wales which is part of a pilot NRPF ‘Connect Project’ and therefore the full extent of the issue is unknown in Wales, in terms of numbers of people being supported by LAs, and the reasons why they are destitute or subject to NRPF restrictions. There is a clear need then, for solutions to the problems of the NRPF policy to be developed and shared across the sector so that service providers are able to deal with cases appropriately and consideration given to how refuges can be funded so that they do not have to turn abuse victims away on the basis of NRPF.

One significant development to address the problems of NRPF is the Home Office Destitution Domestic Violence Concession (DDV).

3.9 The Destitution Domestic Violence Concession

The Destitution Domestic Violence (DDV) Concession was introduced in April 2012 to rectify the severe social problems which had been identified with NRPF. Under this concession, women with insecure immigration status (and any dependent children) can make an application for Indefinite Leave to Remain (ILR) on the basis of domestic violence, and apply for funding while this is in progress.

However, the requirement for engagement with the Home Office and other agencies through this process may be a particularly intimidating prospect, standards of proof necessary for the DDV process can be very hard to come by for women and girls in abusive relationships, many without passports and other documentation which may be held or destroyed by their abusers.

Until an eligible person with NRPF has submitted their notification under the DDV, and the Home Office has responded, an applicant will still have no access to public funds. This institutes a delay into women’s ability to access protection from violence. Furthermore, the timescale of the DDV means that women who have limited or no understanding of English, who are traumatised by abuse, and have not been able to gain support from statutory or voluntary bodies, may struggle to meet the requirements in time. Some organisations have been critical of the DDV decisions made, identifying some of the dubious reasons for refusals given by the Home Office, including:

- *No evidence of physical violence, despite claims of being beaten up, the woman had not referred herself to a MARAC*.  

  _The supporting information was provided as second-hand, that is, the agency preparing the letter had not actually witnessed any domestic violence but had relied on what the women had told them._

  _She did not tell the police or health professionals._

Women experiencing violence who do not have a spousal visa are not included and thus women and girls abused by other family members, or who have become involved with abusive partners subsequent to arrival in the UK, or those who are in marriages which are not recognised under British law, may not apply and

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80 See glossary for definition.  
82 It is not possible to self-refer to a MARAC.
remain without recourse to public funds. However, it marks a significant step forward for many women; Ruth Grove-White of Migrants’ Rights Network describes the DDV Concession as ‘a critical safety net for the 700 or so individuals who are granted indefinite leave to remain under the domestic violence rule every year.’

South Asian women recounted several examples of husbands using their citizenship status to attract second wives, abandoning their first wives after their children had left home.

_One man who had been married for 55 years married an 18 year old... she came in on a student’s visa because her husband had a lot of money and got her a place in university._

Female respondent

Such unregistered marriages, having no status under British law, will leave young women unable to avail themselves of the protection of the Home Office Destitution Domestic Violence Concession.

3.9.1 **The new burden of proof**

Rights of Women spell out the complex procedures and requirements of the DDV:

_In order to make a successful application an applicant has to complete an 18 page form (a SET (DV) form) and provide evidence of the violence she has experienced, evidence that her relationship was continuing at the beginning of the probationary period and a letter or witness statement explaining that her relationship has broken down permanently because of domestic violence._

The complexities of this system has led to the development of self-styled ‘consultants’ charging sums as high as £750 for their services in helping vulnerable women complete their applications.

In 2012, proposals to restrict legal aid for claimants of the DDV were widely challenged by organisations such as Rights of Women and Welsh Women’s Aid

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who provided proof that victims of domestic violence faced particular difficulties in meeting the standards of evidence required.86

Police don’t help, they are the worst, someone hits you - they say you need to give us evidence, they want injuries.

Female respondent

While there was some level of climb down in terms of an extension of the timeframe and approved forms of evidence, concerns remain. Baroness Scotland, who spearheaded the challenge to the legislation remarked that the ‘provisions of the bill were muted, but unfortunately not entirely arrested’. The various intersections of vulnerability mean that migrant women in these situations are less likely to use services like the NHS, Social Services or the police to seek help when they are experiencing abuse, and therefore there is less likely to be a ‘paper trail’ which allows women to prove what has happened.

Legal actions, such as prosecutions or the raising of non-molestation or exclusion orders, are often considered as a strong and convincing means of providing proof of abuse; however, gaining these may well expose women to further violence, and require the disclosure of the appellant’s address. The requirement to engage with official processes takes a psychological toll, as one woman told us - ‘the process is too long...you just have to keep re-living it.’

Thus, the requirement for proof tends to shape women’s strategies in responding to violence in ways which may not meet their own wishes or best interests.

It may also be problematic for a woman to locate proof within this timescale due to patterns of exclusion from state services able to provide evidence of abuse. Women who have achieved support from BME NGOs or other sources may benefit from help with translations and interpretation, and guidance in achieving these requirements. However, the sector is overstretched and facing cuts in funding. Some women and girls in newer, smaller communities in Wales may not find NGOs, community groups, or other services able to deal with their specific languages and needs and will be left to deal with the demands of this process without the necessary support, if they are aware it exists.

The requirement for proof is thus built upon assumptions of engagement with state and other agencies which cannot be taken for granted. Services mandated to work with Domestic Abuse/VAW survivors need to raise their visibility and reach within such communities, and to ensure their services are accessible, welcoming and non-discriminatory. This is particularly relevant to health services

in the context of the DDV, since medical records are an acceptable form of evidence in the claim for the DDV.

Due to the difficulties outlined above and the fact that the DDV does not apply to many groups with NRPF, the NRPF policy remains a barrier which prevents women from leaving abusive situations.

3.10 The ten year route
Where a husband has brought a wife from abroad to the UK, previous legislation established a two-year probationary period after which she could apply for Discretionary Leave to Remain.\(^8^7\) This was extended to five years on the 9th July 2012, and the ability to achieve Discretionary Leave removed and replaced by a new ‘10-year route’ to settlement for those claiming a right to leave to remain on human rights grounds, and/or the ‘best interests of the child’ under the UN Rights of the Child and Section 55 of the Borders, Immigration and Citizenship Act 2009.

This proposed lengthier route significantly increases the length of time by which some women are subject to NRPF legislation. Where the victim has a spousal visa, the abuser may refuse to regularise her position in order to keep her in a position of dependency for a number of years. Even after the probationary period has expired, this is a widely expressed pattern of abuse identified by Amnesty International.\(^8^8\)

This extended period intensifies the problems already identified in relation to NRPF. For married women who lack awareness of the DDV, or who find the process prohibitive or intimidating, the option of waiting out abuse until they are able to apply for citizenship in their own right has become prolonged, leading to longer exposure to violence for themselves and any children, and a higher risk of escalation to more grave forms of abuse.

3.10.1 EEA Nationals
While the family members of EEA nationals (i.e., countries falling within the European Economic Area) who are not EEA nationals themselves retain their rights of residence in the UK if their relationship ends due to domestic violence or other circumstances, this provision is very limited because:

- the perpetrator of domestic violence must be present in the UK and exercising treaty rights at the time of divorce/dissolution; and,
- the survivor must be economically active, self-sufficient, or the family member of such a person.

\(^8^7\) See glossary for definition.
Such restrictions are particularly problematic because they relate to issues beyond the control of the victim (relating to her or his financial status and the compliance of the abuser with official processes), and they do not take into account the difficulty some barriers many migrant women face in accessing paid work, including childcare commitments or pregnancy.

Thus, even within the categories of married victims of abuse, the coverage supplied by the DDV is partial.

### 3.11 Lack of awareness

> I typed ‘abuse’ into Google and got Women’s Aid. If you don’t have a computer or know how to use it, what will happen then? We need to educate women about services.

Female respondent

This woman told us that later her perpetrator took the computer away from her in order to increase her vulnerability and isolation and prevent her seeking assistance. Lack of awareness is evidence upon both sides of service provision: women and girls who are new to the country may particularly lack knowledge of services able to assist them, but it is also true that some women and girls who have been in the UK for a number of years may share this information deficit, due to their marginalisation, the actions of an abuser to isolate them, lack of familiarity with, and access to the services along with other issues such as trust, language, literacy and poverty.

Our research showed that awareness of services was very poor. For example:

> You are telling me now there are services? I needed help two months ago and I didn’t know there was any support...

> How many women are there who come here expecting that there is support for women who have experienced abuse, but now no different?

> Women do not know about the services. Services need to go out and meet people as well.

Female respondents
Women identified the need for literature about services in various languages/formats (some women may not be literate in their own language), and for violence against women to be recognised and addressed by NGOs and community groups supporting asylum seekers and refugees, as well as other services. Women also called for specialists within the police, health and social services who would understand their situations and who are able to provide accurate and sensitive advice.

Rights of Women highlight a general lack of availability of information on the civil and criminal law remedies available which leaves many women unable to choose the remedy they identify as the most appropriate to their needs.

Some service providers in Wales are unsure of whether or in what ways immigration status affects access to services (and where to obtain information and advice on this) and may also lack knowledge of how to deal with violence within communities sensitively, proportionately and appropriately. Awareness around the legal and immigration status and entitlements of asylum seekers, refugees and migrants (including undocumented migrants) has also been found to be poor across multiple services in the UK, with a ‘culture of referral’ where agencies who do not understand how to deal with complex cases of abuse, distance themselves by ‘passing the buck’ through a chain of referrals.

While the different forms of violence against women such as HBV, forced marriage and FGM have been more broadly recognised as areas which require specific attention and tailored measures to address them over the past decade, awareness and the development of appropriate responses has been patchy, and training for these is not specifically funded.

Successive encounters with agencies and individuals in efforts to seek support may be emotionally stressful and exhausting for the victim, who is often required to recount her experiences repeatedly, to travel between services, and to find repeated opportunities to access to services, which is difficult if her abusers are monitoring her movements, or if she has work or childcare responsibilities. It may also prolong women and children’s exposure to abuse.

### 3.12 Fear of deportation

Fear of deportation was a common theme, raised in the Cardiff, Swansea and Wrexham focus groups, across many categories of women. Many women were fearful of being deported if they came forward to report domestic violence, and this was often wielded as a threat by their abusers, including the potential for

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‘dishonour’ if they were deported to their countries of origin as single women. Rights of Women discuss the case of a Jordanian woman, married to an abusive man from Norway, who wished to separate from him, yet feared a forced return to Jordan, where her status as a separated woman would be considered shameful and could result in further violence from her family. 91

If you tell people in your community they will use your status, they will say ‘if you do anything about the violence I will get you deported’.

If you leave him, and the Home Office send you back to your country, you will face the consequences of the shame. 

Female respondents

Some women were concerned that reporting would lead to their partner being deported which would leave them without financial support.

Little by little you hear things like, ‘if you call the police and you/ he hasn’t got papers he will be deported’— then you will be worse- no man, no money, no papers.

Female respondent

Women felt that they would be blamed by other community members for causing the deportation, and also that they would have the knowledge that their partner had been returned to a potentially dangerous situation on their conscience. This led to reluctance to approach any services. As Siddiqi et al identify:

The threat of activating immigration legislation to remove a woman from the UK is often the only coercion needed to force a woman to remain living in violent circumstances. 92


3.13 Language barriers

No English, no help.

Female respondent

Many asylum-seeking, refugee and migrant women are not able to communicate their situations effectively in English (or Welsh). In this case, it can mean that all meetings with service providers are mediated by a relative or partner. Thus, some women are constantly reliant upon their abuser or his supporters and cannot speak freely about the abuse they have experienced. It is also known that abusers who seek a high level of control may restrict a woman’s opportunities to attend language classes. Several women in our focus groups pointed out the difficulties of negotiating access to services in English.

I know someone who had been beaten for years she finally called the police they couldn’t understand her — nothing happened.

Female respondent

Interpretation is vital in some incidences but often interpreters are not trusted since it is feared that they may share information with the community. It was also highlighted in the focus groups that there is a need for more female interpreters so that women can talk about sexual abuse more freely. One woman told us that ‘if you go to the Police, it has to be a woman’.

In healthcare settings, a GP may be unable to ask about injuries or take further action due to the presence of a husband or relative acting as interpreter, and there have been suggestions that the need for interpretation and translation services is not fully comprehended by many agencies. 93 Informal interpretation through family members, children and friends, often found in healthcare and other settings, may present a barrier to disclosure. Access to reliable and neutral interpreters is paramount, (as recommended by the BMA in all non-emergency circumstances). 94

This issue affects men and other family members who may be attempting to access services. For example, one man reported that ‘the law is too soft on perpetrators; there are not enough programmes to rehabilitate them’, and that:

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...The NSPCC delivers programmes for perpetrators. I sent a man to them for assistance, but they rejected him because they said his level of English was not up to the standard required to take part in the training programme.

Male respondent

Our research reinforces the need both for wider knowledge and use of professional interpretation services.

The Wales Interpretation and Translation Service are funded by the Welsh Government and aims to improve access to public services for people who may otherwise face communication difficulties. It provides fully vetted interpreters in foreign languages, Welsh and British Sign Language (BSL). WITS do not collect statistics on how many GBV incidences in which they have provided interpretation. However, they have acknowledged that interpreters should be specially trained to deal with this and are willing to consider how best this can be achieved.  

3.14 Impacts of violence upon children

Violence against women has an impact on children. It’s so immense. It affects the performance of children at school. Some resent men because of their experience. There are no provisions for counselling for these children.

Male respondent

Section 120 of the Adoption and Children Act 2002 recognises the potential for domestic violence to cause significant harm to a child. The Department of Health estimates that 750,000 children in England and Wales witness domestic violence each year.

In our research, respondents were aware that exposing children to domestic violence was harmful to their development, but also that children created the main barrier to leaving abuse – identified both by men and women - due to concerns about their wellbeing, and, for women with NRPF there is a very real problem of providing for children in the event of fleeing the marital/family home, coloured by fears of having children taken into care by social services.

Children may be victims of family violence in their own right and suffer serious consequences, as this participant starkly illustrated.

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95 For example, specialist domestic violence training for interpreters is provided in Hackney.
It makes children insecure. Sexual abuse comes from close family members. Girls are hit and abused by brothers, fathers, uncles, etc. Mothers stop them speaking to police because they don’t want their sons to be in trouble.

Female respondent

Again the dynamics of family ‘honour’ are described as inhibiting the reporting of crimes. Children also face negative health, educational and emotional consequences through witnessing the abuse of a parent. It is well recognised that children who witness domestic violence are at greater risk of developing emotional, behavioural and educational problems, which may compound already identified issues around poverty and marginalisation affecting children within refugee and asylum-seeking communities. These can lead to ‘poor educational achievement, social exclusion…juvenile crime, substance abuse, mental health problems and homelessness from running away.’ Participants in our research also observed that children raised in violent homes could themselves normalise and imitate abuse:

My 12 and 13 year old nephews see abuse and now they’re becoming abusive themselves. They think it’s normal behaviour.

Female respondent

Violence also creates perpetrators. The boys are most likely to be perpetrators in the future. I know a 13-year old. His father passed away. He took over the role and thought he needed to be violent.

Male respondent

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Given that BME women may take longer to leave a violent relationship, their children will face prolonged exposure to violence in the home and increasing trauma and risk.

One participant identified how fleeing an abusive relationship could also endanger children:

> I left the man who was abusing me. I had a friend, who housed me for a week, then she helped me find a room in a shared house (male and female) and in order to pay the rent, I had to get a job straight away. I had to work night shifts in a care home, so I had to ask other people in the house whom I did not know to look after the kids. Ask people you don’t know, you pray and hope they will be safe with a stranger. You have to survive and you take risks.

Female respondent

Women with NRPF may be accommodated on the basis of the fact they have dependent children: however, in other cases, children have been removed from their families by Local Authorities under a duty of care which does not extend to their parents. One respondent seeking help for a health condition stated that ‘social services said [they] could only help the baby and not me’. Fears of children being taken into care means victims of abuse will not report their situations. Roy suggests that in some cases LAs used their potential to remove children as a method of avoiding confronting the problems of women with NRPF, with women subsequently feeling unable to pursue claims for support, and thus mother and children continued to face abusive and violent situations.

One young woman told us that if she knew of a friend who was experiencing violence, she would tell her to tell her teacher or the doctor, but that generally, ‘young people don’t know about specialist provision’. There appears to be little in the way of culturally appropriate services for children facing abuse within BME families, and statutory funding for work with children in refuges is minimal and in some areas non-existent. In 2007, the then Welsh Assembly Government developed school-based counselling across Wales, which the NSPCC have identified as being particularly important for young people unable to access

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99 Izzidien, S. 2008. "I can’t tell people what’s happening at home": Domestic abuse within South Asian communities - the specific needs of women, children and young people. London: NSPCC.

100 Roy, S. 2008. No Recourse, No Duty to Care: Experiences of BAMER women and children affected by domestic violence and insecure immigration status in the UK. London: IMKAAN.
support through other routes, such as those with controlling families who do not allow their children to take part in extracurricular activities.

### 3.15 Relationships and gender

Our research in Wales also sheds some light on why certain forms of abuse exist and also on how it is perpetuated. It is recognised that displacement arising from armed conflict, persecution and other serious human rights violations can intensify the discrimination and inequality experienced by women and forced displacement frequently exacerbates the risks of gender-based violence.

Men in our focus groups identified the strain of the insecurity of the asylum process as a causal factor leading to increased violence:

> As an asylum seeker trying to ‘fight’ it out, there is so much the man is carrying. There is pressure on the couple, lack of information on where your claim is going, limited income, provision of services, lack of provision while people are going through the process.

Male participant

On the other hand, women tended to locate violence in terms of unequal power relations, rather than in outside pressures.

They spoke of violence as an expression of masculine power through statements such as:

> Men need to prove that they are the boss.

> It is the culture to say women are ‘under’ the man.

> Girls stay at home while boys are educated.

Female participants

Although factors such as ‘culture’ and ‘tradition’ are indeed strongly associated with abuse by our participants, this should not be considered to reduce the personal responsibility of abusers. There appeared to be misunderstandings about how child protection and systems designed to support people experiencing violence work. Furthermore, our research found that organisations which assist victims of domestic violence were also criticised by men in our focus groups for ‘destroying families’ — rather than acknowledging the culpability of the abuser.
One male victim of abuse related his situation to his comparative lack of rights in comparison to his partner who had a secure immigration status where he did not, which gave her greater power over the household suggests that inequality is indeed core to experiences of violence, even where the genders are reversed.

The United Nations’ High Commissioner for Refugees notes that violence against women is;

*exacerbated by unequal gender relations within communities of concern...it has been both a cause of forced displacement and a terrible consequence of the breakdown of family and community structures that accompanies displacement.*

However, gender-based violence is endemic and an almost universal phenomenon, but one which is capable of a great deal of variation, in which gendered inequalities and cultural beliefs may inflect experiences of violence. Men said the fact that there was little protection for women in some countries was a factor that led men continue with abusive and violent behaviour after leaving their countries of origin.

*Some of it (violence) is a norm in some cultures, they accept it. When they come here they live with it. When they come here they live with it (carry on with it) and become content.*

Male respondent

Male violence against women is both universal and particular, according to Yakın Ertürk, writing as the Special Rapporteur for Violence Against Women, and experiences and understandings of violence vary. Within certain contexts, she suggests, normative systems developed in other societies may clash with those of the host country, resulting in:

*...the formation of ethnic/religious/ national enclaves with strong tendencies for marginalization and bonding with the home culture. This is a highly ambivalent situation for those immigrants/minorities whose survival becomes dependent on a tight knit community which is both the source of identity, security and solidarity in an alien and/or sometimes ‘hostile’ environment as well as the source of monitoring of codes of conduct, which may necessitate greater surveillance of women to prevent them from going ‘native’.*

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Our research and other work highlights that men may use violence to retain a dominant status which may have been challenged through the empowerment of women on relocating to UK, and possibly due to an increased awareness of their rights, as one woman told us:

_Thank god we came to this country because back home they abuse you, now we are exposing these things._

Female respondent

‘Imported brides’ are frequently vulnerable and isolated, since besides being legally and financially dependent, they may also be entirely dependent upon their husbands for information and access to services.

South Asian women we spoke to confirmed the vulnerability of women arriving in the UK as brides:

_Girls who come from Pakistan as a spouse do not get any rights from in-laws. They are fully controlled by their in-laws._

Female respondent

As one participant told us, there are difficulties around changing customs and culture:

_You try to adjust to the laws of the UK but actually changing the customs takes time—laws in UK... are not compatible with cultural practice and traditional practice._

Male participant

### 3.16 Community pressures

_If women do seek help, they have to leave their family and friends._

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It is very clear that for women to speak out about gender-based violence is a very significant step. One of the strongest themes which came out across all the focus groups was that communities will tend to reject and ostracise women who take action to end abuse.

*Stigma — if a woman is to take the issue further, it may actually hurt her more, she will face isolation in her own community. How is she going to live in that community, how will she be viewed by them?*

Male respondent

Communities were described by participants as ‘not changing’, of ‘people who came to the UK in the 1940’s and 50’s ‘still living in that era’, being more ‘concerned with their reputation’ and treating any exposure of domestic abuse as a ‘taboo’. Women who left abusive relationships were described as being rejected and isolated from their communities and even threatened with deportation by some community members. There was a great fear of confidentiality breaches and gossip, and that if women disclosed abuse to someone in the community, ‘little by little information will get out.’ There were tendencies for victim-blaming with the community even where the abuse seemed very clear.

*A...girl was pregnant; he beats her all the time, she called the police and now solicitors are involved. [The abuser] is saying that the baby who is now born isn’t hers, it’s his new wife’s who he has just brought into the country. Her own community will not talk to her because she has involved the police.*

Female participant

For South Asian women, these ‘silent pressures’ were articulated using the discourse of *izzat* – family ‘honour’ which they felt service providers on the whole failed to recognise and fully understand:

*Honour thing is everything in families. Honour is very important and because of this we hide everything. Abuse, sexual, physical is all covered up because they don’t want anyone else to know. It makes children insecure. Sexual abuse comes from close family members. Girls are hit by brothers, fathers, uncles etc. Mothers stop them speaking to police because they don’t want their sons to be in trouble.*

Female participant
The women identified that this pressure did not diminish through the generations, but that families which had established status within their communities were even more anxious to maintain their reputation than new arrivals. Some women were careful to distinguish between Islamic teachings and family ‘honour’ and local cultures.

*Our religion respects women above anyone else. It’s supposed to support us – it’s the culture that lets us down.*

Female participant

Several women in one focus group said that there was a cultural expectation that they bore violence with stoicism, and that, to make complaints was seen as an expression of weakness, and that they should bear hardship without complaint. One woman describes her mother-in-law’s attitude as ‘*I went through it, so should you*’. Women who complained about abuse were disparagingly compared to ‘white women’.

Men also had problems in leaving abusive situations due to stereotypes around male invulnerability.

*From our communities, people should open up about it.*

*Women should talk to community leaders, Imams, etc.*

Male participants

Although men we interviewed encouraged women to talk about abuse to community leaders and Imams, and while community support can play an important role, our research identifies that women and girls may fear talking about abuse to anyone in their community, that some communities may deny or play down abuse, and persuade women and girls to remain in abusive relationships in order to maintain family honour and status.

Families may also breach confidentiality, blame victims or police their behaviour. While abusers in all communities often use strategies to isolate women and children from potential sources of support, those who have little knowledge of the country or how to access support are particularly vulnerable, an issue raised by many of the women we interviewed. For example, asylum seekers who have spent time in the UK without familial supervision may be considered to have become ‘Westernised’ and suspected of the violation of normative codes.
during their stay in the UK. Shahien Taj, of the Henna Foundation, noted that
certain members of Cardiff’s Asian community ‘have distributed circulars that
‘name and shame’ women who are seen acting too “western”’ which she
identifies as being likely to trigger abuses against women stigmatised in this
manner. 105

A Women Seeking Sanctuary Advocacy Group report also cites difficulties in
women accessing services such as housing and healthcare mainly due to language
barriers, but with some examples of women being ‘doubly isolated’ as male family
members provided additional barriers to public or civic engagement and
education. Research into Eastern European women similarly shows that migrants
can also face isolation due to poor social networks. For some, abuse started soon
after they arrived in the UK, and they had no friends or family to support them
and no knowledge of services. Some men did not introduce their partners/wives
to friends for over a year, or destroyed mobile phones, as methods of isolation
and control. 106

3.17 Specialist services

Participants in our research raised several questions around the extent to which
services understand their communities and their particular issues:

Social Services... it’s all about awareness. Social services
should not just focus on taking children away.

UKBA and Social Services need to catch up with diverse
communities. Before assessing a case they need to understand.
Everything is treated in the way of the British culture.

Male respondents

Training on gender-based violence issues needs to include the development
 cultural competencies so that practitioners, such as people working in Sexual
Assault Referral Centres (SARCs) and Multi-Agency Risk Assessment Committees
(MARACs), and Domestic Abuse Coordinators are able to respond effectively and
sensitively to women and girls’ situations in order to stem the increasing
marginalisation of ‘specialist services’, to prevent migrant women from constantly
being referred on, or from making inappropriate, disproportionate interventions
in some cases.

105 Brandon, J. and Hafez, S. 2008. Crimes of the Community: Honour-based violence in the
UK. London: Centre for Social Cohesion.
Lottery Fund.
Negative perceptions of NGOs were ultimately related to problems beyond their remit, such as their lack of resources or the inability to support service users with NRPF: ‘they helped as much as they could but they have their limitations’.

Although issues with capacity and limitations were raised, the following organisations were mentioned as being helpful:

- BAWSO (especial mention made that floating support workers were very helpful)
- Welsh Refugee Council
- WSSAG (Women Seeking Sanctuary Advocacy Group)
- Women’s Aid
- The African Community Centre – Swansea
- The South Wales Police Minorities Support Unit
- The British Red Cross
- Swansea City of Sanctuary
- Share Tawe

The Women Seeking Sanctuary Advocacy Group, a women’s refugee community group in Cardiff, which is run purely on voluntary effort and not constituted to address VAW in particular, provided a lifeline for many destitute and vulnerable women. They were singled out as providing ‘an excellent service’. One participant said

*When I came to WSSAG, I learnt how to talk; how to find solicitors. Whenever I was stuck, they motivated me.*

Female respondent

Another woman said they should have these at different points in Cardiff so that ‘other women can access them as well’. However, reliance on this unfunded service which by its own admission lacks the technical expertise, resources and knowledge of services needed to provide all the support women need, is unsustainable.

Siddiqui et al.’s 2008 report on service provision for Pakistani women in the UK (which included research conducted in Wales) stated:

*Domestic violence support services in the UK were consistently perceived to be poorly resourced, thin on the ground, over-subscribed, culturally unaware or, at times, culturally inappropriate. These were also described as being at their most inadequate at ‘crisis point’ leading to ‘service breakdown’. A common perception, particularly of the statutory sector, is*
that they were often unwilling to intervene; whether that was due to complacency or to avoid being culturally insensitive.\textsuperscript{107}

The awareness and sensitivity to the religious and cultural practices of clients show by specialist BME VAW services can make a considerable difference to the quality of the experience that BME women have and often dictates whether they stay or return to violence. However, there are risks in always ‘diverting’ such cases to specialist services. It would appear that specialist BME services do take the majority of BME VAW cases, which are often more complex, requiring additional time, resources and specialist support.

Siddiqui et al. point to the practice of always referring women and girls at risk to specific BME community groups, bypassing mainstream services in ‘the belief that it was inherent within their culture to attend to “their” women’s needs, without considering whether such action was appropriate or indeed dangerous.’ Given the taboos and sensitivities in some communities, and fears of repercussions, it is necessary to identify sources of support with extreme discretion. Furthermore, while specialist BME VAW services were identified by respondents as providing optimal support, where specialists are able to cater to the linguistic needs of a diverse client group, and provide culturally sensitive advice and advocacy in a way which centres upon the client, they are overstretched and most are not funded to provide a service to women with NRPF.

Research by the NSPCC shows that mainstream some professionals (police, social services, and teachers) in both England and Wales engage reluctantly with South Asian cases because of concerns about political correctness and fears of being labelled racist.\textsuperscript{108}

More needs to be done to ensure that asylum-seeking women are given information at the right times about the asylum process, their rights in terms of violence against women and also the asylum interview and process, and sources of support. Our research found information provision and support to be very patchy in this regard.


\textsuperscript{108} Izzidien, S. 2008. “I can’t tell people what’s happening at home”: Domestic abuse within South Asian communities - the specific needs of women, children and young people. London: NSPCC.
4. Summary and conclusion

Asylum-seeking, refugee and migrant women and girls face numerous barriers to accessing services to various degrees, some of which stem from their communities and cultural pressures, but many of which result from immigration policy, and shortfalls in service delivery to BME, asylum-seeking, refugee and migrant women.

4.1 Summary of key findings

The experiences of our focus group participants demonstrates that in order to deliver responsive public services, we need to understand the make-up of communities better and to equip frontline staff to provide services in ways which are appropriate to those with protected characteristics, which include race and ethnicity. These experiences suggest that thus far, specific issues relevant to the experience of migrant women in Wales are poorly understood, and that responses and policies are underdeveloped.

Our review of existing research along with our fieldwork in Wales has confirmed numerous complex legal and social barriers facing this group of women. The evidence contained in this report indicates the following three issues are most urgently in need of attention:

1. The most significant barrier is No Recourse to Public Funds legislation (NRPF), which applies to several categories of migrant women in the UK. People with NRPF are unable to access state benefits, including refuges, meaning they are faced with remaining with an abuser or destitution. The ‘Domestic Violence Concession’ is only eligible to women who have entered on a spousal/partnership visa, and the application process is extremely difficult.

2. The lack of knowledge and low priority given to issues of gender-based violence across a range of public bodies poses a particularly stark barrier for women who have insecure immigration status and who may be facing forms of violence which are unfamiliar to service providers.

3. Many women who have left their countries of origin as asylum seekers or as economic migrants or for other reasons, face isolation in Wales. Women report that specialist BME NGOs provide the best support, yet there are very few such organisations in Wales, and they are under considerable strain due to austerity measures.
4.2 Conclusion

Asylum-seeking, refugee and migrant women face the intersection of several kinds of discrimination which may prevent them from seeking help: as women, as minorities, as victims of abuse, and as non-UK citizens (many with insecure immigration status and having no recourse to public funds). This, however, is by no means an inevitable situation.

*Women who are lucky to find themselves in a good and conducive environment with reasonable, caring and loving partners are able to function effectively in their roles as mothers, wives, breadwinners, soul mates, homemakers and nation builders.*

Female respondent

While this report has explored the vulnerability of women and girls due to various factors, it should be noted that a distinction can be made between a state of vulnerability and a situation of vulnerability. Women and girls from asylum-seeking, refugee and migrant communities are not necessarily vulnerable *per se*, but may find themselves in situations of vulnerability due to their status.

Flynn has drawn attention to the resilience of migrant communities, observing that ‘far from being dominated by victimhood. ...there is [also] a huge capacity to fight back and change’\(^{109}\). This characteristic was evident in all of our focus groups, where women whilst talking about their experiences of violence and abuse also demonstrated great clarity of purpose when it came to asking what can be done. One woman eloquently articulated the way in which communities should take on the issue:

*I want to insist that established communities should break the cycle... If communities believe it’s not acceptable, the women will be able to access services. Unless the established communities change their views, you can make services available, but there are cultural boundaries which are invisible. We have educated BME communities about racism — let’s do the same about VAW. We have to make the effort. Men from those communities have to know it’s not acceptable.*

Female respondent

While the VAW sector and Welsh Government has made great progress in developing best practise and designing solutions to end violence against women, it now needs to make sure that all women benefit from these measures with thorough and decisive action. There are many issues which cause and perpetuate violence against women and present significant barriers of access to services and protection – these need to be addressed urgently, so that the most vulnerable women and girls can access their human right to be safe. It is necessary to go beyond policy development, to ensure implementation of policies. Good practise and creative solutions need to be identified, but also disseminated across all agencies, with leadership from Welsh Government, the Home Office, the Police and other services, along with the engagement of the VAW sector and asylum-seeking, refugee and migrant people who have experienced violence, we are confident that Wales can make greater strides and lead the way.

Recognising that VAW is found across all of the communities living in Wales means that we must commit to enabling access to support services for all regardless of where they live in Wales, including those who may be most disadvantaged due to their immigration status.

Despite all the problems identified in this report, some women identified Wales as providing the safety and protection they needed to fulfil their potential and access to their rights, and who clearly felt empowered by their experiences of life in Wales:

*When I come here, I learned who I am. Here, I am a woman, I can do anything... I have a boyfriend, I can study, I can choose. My mother doesn’t want me to marry the boy because he is from a different country...but I told her I could go to the police if she forces me to marry someone not of my choosing.*

*I am really happy here. They helped me – the police, the Home Office.*

Female respondents

It is within our power to make these experiences normal, rather than exceptional experiences for asylum-seeking, refugee and migrant women and girls in Wales.
5. Recommendations

5.1 Respondents’ recommendations

Both CEDAW and the UNHRC have emphasised that the refugee community (especially women and girls) should be involved in all stages of programme delivery, design implementation, monitoring and evaluation. With that in mind, we asked respondents to identify their own recommendations for the development of services. These include:

4.1.1 Raising awareness and women’s rights

- Literature in plain language for greater accessibility, and in different media for those who are not literate, as well as extending the languages in use; leaflets to be widely distributed in a variety of settings, including at doctors surgeries, ladies’ toilets and police stations.
- Advice and guidance on rights, including the right to request a female interpreter and interviewer at the initial screening interview and at the substantive Asylum interview.
- On-going specialist training in gender-based violence for social services, local authorities, police, housing and health on gender-based violence.

4.1.2 Services and support

- Greater support for women undergoing the asylum interview — and clearer explanations of the process and their rights.
- Services should recognise women’s particular needs rather than focussing upon their immigration status.
- Abuser programmes which are accessible to people who do not speak English and which are available in community settings.
- Positive Parenting tools for mothers who have experienced abuse and guidance on how to parent children who have witnessed abuse.
- Reassurance from the social services regarding the custody of children at first engagement.
- Mentoring and befriending programmes for women experiencing gender-based violence.
- Wider ESOL provision; specialised ESOL for men and women working in the field of gender-based violence (like Police ESOL).
- Choice of speaking to a female police officer.
- Access to professional female interpreters.
- Better partnership and collaboration between NGOs in Wales supporting BME women.
- Funding for NGOs and community groups working to address issues of violence against women.
- Greater employment of people from ethnic minorities across all sectors.
5.2 Recommendations for Welsh Government

These recommendations have been developed as an extension of the WMP’s response to the Welsh Government’s consultation on legislation to ‘End Violence Against Women, Domestic Abuse and Sexual Violence’, submitted earlier in 2013.

- Welsh policy should reflect the different social and cultural contexts that normalise violence against women while keeping sight of the general and widespread prevalence of gender-based violence across all social groups.
- No Recourse to Public Funds: although this is a non-devolved policy area, nevertheless the impacts are felt in Wales as a wider report by the National Assembly into Domestic Abuse outlined in 2009. The response to the report stated that the Welsh Government and the UK Government remain committed to finding a solution to victims of domestic abuse with NRPF. Given the findings of the National Assembly and our own research, we recommend that expenses for refuge or other accommodation for women and children with no recourse to public funds should be made available, and underwritten by the Welsh Government where necessary, in order to address their needs and protect their human rights, where they would otherwise be homeless. This should be a cost effective solution and weighted against the overall costs of gender-based violence across the broader economy. In making this provision available, the Welsh Government will be upholding the human rights treaties to which it has signed.
- We recommend that the Welsh Government addresses its commitment in the Right to be Safe Strategy to issue guidance to Local Authorities in Wales on this complex problem (Right to be Safe, p.13).
- There is a need for a full review of NRPF cases in Wales, in order to gauge the capacity of existing systems, and discern how many women are unable to achieve help. This review should canvass all Local Authorities and organisations dealing with people who are experiencing gender-based violence, and ask:
  1. How many survivors affected by NRPF are currently being accommodated in refuges and other emergency accommodation across Wales? – to assess the current capacity of the system;
  2. What mechanisms are currently being used to provide support to women with NRPF? – to learn from current practise, identify creative solutions and develop best practise recommendations to deal with this issue across Wales;
  3. What are the situations of the survivors affected by NRPF who are currently in the system? – to understand how many survivors can be helped through expediting the Home Office Destitution
Domestic Violence (DDV) Concession application process, and how many require alternative solutions to be found;

4. How many survivors have been refused accommodation and support on the basis of NRPF? – to discover the capacity shortfall of the current system.

- For those women who have NRPF but are unable to apply for the DDV, a number of funded places may need to be established in order to provide short-term accommodation to fill gaps in the capacity of the existing system. This provision should be reviewed yearly to ensure that it is adequate to fit changing demand.

- Robust challenges should be made to the negative media reporting of migration which can impact on attitudes and service provision.

- **Training and awareness:** the National Training Framework proposed in the Welsh Government’s White Paper in 2012 should focus upon those persons most likely to make initial contact with a person at risk of violence, and include police, teachers and other school staff, housing and homelessness officers and social services as a priority, with clear and immediate lines of referral in the event of a disclosure of abuses such as ‘honour’-based violence, forced marriage, FGM and trafficking, and how best to assist women with NRPF.

- Full training on trafficking, NRPF and the Domestic Violence Concession, ‘honour’-based violence, forced marriage and FGM should be part of the requirements of Stage 3 and 4 training within the Wales National Training Framework.

- Training needs to be developed along with specialists from sectors currently addressing issues of gender-based violence including BME women’s organisations and organisations working with the immigration and asylum system. Their insights should be mainstreamed into the leadership and training element.

- Training should include methods of identification and clear and immediate routes of referral for women and girls who need assistance due to NRPF, or because they have been trafficked.

- Interpreters and translators should be trained on gender-based violence under the Framework with a robust Code of Conduct—both in the public sector and in other environments. Increasing the availability of trained, preferably female, interpreters will mean that women experiencing domestic violence are more able to disclose their experiences with confidence.

- ‘Healthy Relationships’ education should sensitively address a variety of patterns of violence within the family, in all primary and secondary schools in Wales in order that girls at risk of forced marriage, ‘honour’-based violence, FGM and other forms of abuse can have confidence that their concerns are understood and that there is support available to them.
These topics should be broached early in the programme, given that these issues may affect girls at young ages. Education on violence against women should be delivered within a human rights framework emphasising gender equality.

- Make teachers aware of the indicators of ‘honour’-based violence, FGM and forced marriage.

- Addressing violence in the workplace is currently delimited to public sector workers, although the Welsh Government intends to encourage compliance with the Welsh EHRC scheme for dealing with violence against women in the workplace. However, while the Welsh EHRC provides materials and guidance, the guidelines neglect forms of violence such as forced marriage, ‘honour’-based violence and FGM. Work with employers to raise awareness of violence against women in the workplace need to take all forms of violence against women into account, and to ensure that employers provide information in ways which are accessible to employees who do not speak English or Welsh as first languages. It is recommended that the Welsh Government include liaison with the Gangmaster’s Licensing Authority within their outreach strategy, to ensure that isolated workers in rural areas are able to access information and resources.

- Information on all forms of gender-based violence such as forced marriage, ‘honour’-based violence and FGM and Human Trafficking should be available for all statutory and non-statutory services, and targeted in areas where it is likely to be most prevalent. Information should include sources of support and expertise.

- Services and support: There is a need for a streamlined identification of victims of trafficking and consistent use of the National Referral Mechanism, which should be monitored, in order to establish and analyse referral rates. Identification questions should be incorporated into the DASH Risk Assessment Checklist, which has been in use since 2009 by police and other agencies, and should be conducted wherever there are indicators of trafficking.

- Ensure sustainable funding for support services for children and young people affected by violence, in accordance with the increases in demand that this proposal will engender.

- Specialist agencies providing services to the BME women’s sector need secure sources of funding so they can concentrate on supporting and meeting the needs of BME women affected by gender-based violence. Government should ensure that women’s BME community groups are able to access sufficient resources to progress this work.
5.3 Recommendations for UK Home Office

- In our focus groups, asylum-seeking women described being ‘scared’ by their initial interview and being accused of lying. Adversarial approaches should not be used in such sensitive issues as gender-based violence. If gender-based violence arises as part of a claim for asylum, the claimant needs to have a tailored interview in surroundings conducive to facilitating disclosure, conducted by a person with expertise in gender-based violence. Women should be able to be accompanied by trained support workers, volunteers or other companions if they choose.

- The initial screening interview document should be amended to ask question around torture (and marks and scars) at this stage. A question around gender-based violence would alert the Home Office to these types of cases at an early stage. Relevant routes to support should be signposted upon the basis of evidence given at the screening interview.

- The Home Office should ensure that women are offered choice of female interpreter at the initial screening event as well as the Asylum Interview.

- The provision of a same-sex interviewer should be offered as standard rather than as a special request. This should not be a person who has worked elsewhere in relation to the same case. The interpreter should be properly vetted and subject to a professional code of conduct.

- People who do not speak English as a first language should not be required to sign the Interview Record, given that they may not understand the contents of the document and the implications of signing it; inaccurate screening interview records may later be used to undermine women’s claims if statements appear contradictory.

- The Home Office should review the guidelines and training on conducting the Asylum Interview with a focus on how survivors of torture and sexual violence are enabled to give proper account of their experiences, ensuring parity with victims of violence going through the Criminal Justice System.

- The Home Office interviewer should not be making/typing verbatim notes during the course of the interview, which means some interviews can take several hours. Instead, the interview should be videoed or tape recorded, with the Interviewer making ‘trigger’ notes instead of a verbatim record. They should be free to engage with the applicant, build rapport, and be more able to focus the interview on the following four areas;
  - Is there a well-founded fear/convention reason for the claim?
  - Is there sufficient protection in the home state?
  - Is there a safe relocation option?
  - Is the applicant at risk on return?

- For trafficked women, the Trafficking Interview should be conducted separately from the Asylum Interview.
• Claimants currently have just five days to submit comments to the Home Office after their interview. This is inadequate, and should be extended to ten days.
• The Home Office (and also legal and judicial stakeholders) need to consider how their staff are trained and supported on gender issues and enable input from local, expert agencies on training on violence against women issues. They should also ensure the right structures and processes are in place in the Home Office to counter professional ‘burn out’/‘detachment’ from rape and other traumatic narratives.
• The development of local panels of experts who can provide expert statements in gender-based violence cases, including psychiatric, psychological, medical and cultural expertise, and are able to produce ‘Istanbul-Compliant’ reports would speed up the process and lead to more accurate understandings of women’s situations. Currently, women in Wales who are referred to the Medical Foundation for Victims of Torture or the Helen Bamber Foundation have to travel to London which institutes delays into the process.
• Given the high levels of successful appeals in women’s claims for asylum, there is a need for scrutiny of the decision-making process and a review of the given reasons for refusal.

5.4 Further Recommendations

5.4.1 Local Authorities
• Relevant Local Authority staff should be made aware of training and information on NRPF and should maintain records of cases supported, and ensure proactive management of cases.
• Social Services should improve accessibility and relationships with BME women and provide reassurance around concerns around fears of deportation and having children taken into care when women report violence and abuse.

5.4.2 Health
• All NHS workers should be made aware that they are a significant route for women in these categories to achieve support and need to be aware of how to identify gender-based violence in all its forms, how to enable disclosure and to provide support and routes of referral.
• Trafficking should be recognized as a health issue: health care providers should receive training on the health consequences of human trafficking, in terms of physical, sexual, reproductive, social, and mental health consequences, and culturally competent approaches to supporting trafficked persons.
5.4.3 Police

- There needs to be concerted, consistent and continued engagement to build, improve and maintain relationships with women from BME communities.
- Police should establish community cohesion reference groups which are comprised of BME women only and led by female police officers.

5.4.4 Welsh Women’s Aid

- The All-Wales Domestic Abuse & Sexual Violence helpline should include specialist call-handlers with the ability to assist women to make an application for the Home Office Destitution Domestic Violence (DDV) Concession. Call-handlers should be trained to be able to identify ‘honour’-based violence, forced marriage and FGM; specialists able to provide suitable responses should be available at all times to ensure appropriate and timely responses.

5.4.5 All agencies

We need to ensure the development of gender and culturally appropriate service provision for the psychological, physical and social rehabilitation of survivors of gender-based violence;

- Multi-agency co-operation is required across the sectors in Wales to provide much more coordinated, sensitive and intensive support to women and girls who have experienced violence in country of origin and in the UK.
- All service providers should ensure that women dispersed to Wales are aware at the earliest stage of the services available to them, which, for asylum-seeking women, should include their rights in relation to the Home Office Asylum Interview according to the Home Office Gender Guidelines.
- Ensure that asylum seekers, refugees and migrant women are encouraged to form mutual support networks. A ‘Community Chest’ fund or other forms of funding should be made available and publicised so that BME women can establish Survivor Support Groups within their communities, and link to other ‘mainstream’ Survivor Forums and other services.
- Agencies should not be put in a position of turning women away on the basis of their NRPF status. Services should help or signpost eligible persons with NRPF to make an application for the Home Office Destitution Domestic Violence Concession at first contact, either through the helpline or an appropriately trained staff member within the organisation who is able to identify eligibility and provide support throughout the process.
- The Wales Migration Partnership should develop an Action Plan from the recommendations and work with partners to make sure the
recommendations are taken forward, engaging with the Welsh Government and other key partners and service users.

5.4.6 Closing the evidence gap

- The Welsh Government has acknowledged a gap around protected characteristics in its Strategic Equality Plan and Equality Objectives 2012-2016, and has committed to strengthening the evidence base (p14). The Welsh Government should establish data collection for all of the relevant activities of the Welsh Government, from ‘Healthy Relationship’ education to referral outputs across agencies — and all demographic data collected should record the immigration status (where possible and appropriate) and ethnic identity of clients, and discover their first languages (both written and spoken). There is a need for greater recording of variant identities, including immigration status and sexual orientation, and the publication of disaggregated data in order that trends and access to services can be assessed and services planned accordingly.

- The Home Office should maintain and share statistics on incidences of gender-based violence within their records with agencies across the UK in order to build a better picture of prevalence.

- Local Authorities and other public sector agencies should consider using the Wales Migration Portal to assist in giving an overview of ethnic diversity by local area in Wales and in assisting with development and monitoring of strategic equality plans. http://wmp.infobasecymru.net/IAS/

We would also recommend that research and policy developed both internally and externally to Wales takes into account Wales’s specific situation: the fact that Wales has fewer asylum-seeking, refugee and migrant women that other parts of the UK should not mean that their situations demand less attention: rather this report indicates the existence of a subject which urgently needs to be broached and addressed, and that there is a need to learn from approaches developed in the rest of the UK in order to develop the best practises for the Welsh context.

Finally, while these specific recommendations were framed within the Welsh context and took into account the delimitations under which the Welsh Government operates, we also would wish to draw attention to recommendations made in relationship to law and policy at an England and Wales level, and commend and support their conclusions:

- Rights of Women (2011) Silenced Voices Speak: Strategies for protecting migrant women from violence and abuse

- In terms of good practice, a PICUM (Platform for International Cooperation on Undocumented Migrants report, Strategies to End Double Violence Against Undocumented Women) provides an evaluation of laws, practices and partnerships and their development.
6. Glossary

Given the complexity of immigration statuses and the phenomenon of violence against women, this section will outline key terminology.

Asylum seekers are people who leave their own country for their safety, often due to war or political conflict and seek safety in another country. Women and Lesbian, Gay, Bisexual and Transgender people may also seek asylum due to gendered forms of violence for which they cannot find protection in their countries of origin. The UK’s provision of asylum is based on the 1951 United Nations Convention Relating to the Status of Refugees. Asylum seekers must prove they are unable to return to their countries of origin because of a well-founded fear of persecution to achieve refugee status.

A refugee is a person who ‘owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group, or political opinion, is outside the country of his nationality, and is unable to or, owing to such fear, is unwilling to avail himself of the protection of that country...’ (1951 Refugee Convention). Refugees granted leave to remain in the UK may be granted on a permanent or temporary basis.

European Convention on Human Rights (ECHR) is an international legal instrument adopted under the auspices of the Council of Europe. Its provisions are enforceable in UK law courts.

Migrants are people who have come to the UK in search of work or for other reasons, such as for educational reasons, or to be reunited with their spouse or family. There are various subcategories of migrants including seasonal workers, students, spouses and EU migrants. Migrants from ‘Accession’ countries include A2 Nationals (citizens of Bulgaria or Romania) and A8 Nationals (citizens of the Czech Republic, Estonia, Hungary, Latvia, Lithuania, Poland, Slovakia or Slovenia)

The National Asylum Support Service (NASS), created in 2000, is a section of the now defunct UK Border Agency (UKBA), which has been subsumed into the Home Office, responsible for supporting and accommodating people seeking asylum while their cases are being dealt with. Prior to 2000, local authorities and the Department for Work and Pensions were responsible for the support and accommodation of asylum seekers.

No Recourse to Public Funds (NRPF) is a regulation which restricts access to services and benefits to certain categories of people in Britain. This includes several categories of persons who are considered ‘subject to immigration control’:

- People with sponsorship visas
- People with spousal visas, who are married to British citizens or settled persons
- International students
- Asylum seekers whose claims are exhausted
- Over-stayers

Over-stayers are persons who have stayed in the country beyond the period of leave to remain, or after being issued with an order for removal. This is considered a breach of immigration law.

The Destitution Domestic Violence Concession. From 1 April 2012 partnered victims of domestic violence were extended the ability to apply for Indefinite Leave to Remain on the basis of domestic violence. Simultaneously, they became able to apply for public support under the Destitution Domestic Violence (DDV) concession, which is a rather complex process. This is laid out in Paragraph 289A of the Immigration Rules as follows:

The requirements to be met by a person who is the victim of domestic violence and who is seeking indefinite leave to remain in the United Kingdom are that the applicant:

(i) was admitted to the UK for a period not exceeding 27 months or given an extension of stay for a period of 2 years as the spouse or civil partner of a person present and settled here; or;

(ii) was admitted to the UK for a period not exceeding 27 months or given an extension of stay for a period of 2 years as the unmarried or same-sex partner of a person present and settled here; and

(iii) the relationship with their spouse or civil partner or unmarried partner or same-sex partner, as appropriate, was subsisting at the beginning of the relevant period of leave or extension of stay referred to in (i) or (ii) above; and

(iv) is able to produce such evidence as may be required by the Secretary of State to establish that the relationship was caused to permanently break down before the end of that period as a result of domestic violence; and

(v) the applicant does not have one or more unspent convictions within the meaning of the Rehabilitation of Offenders Act 1974.

Discretionary leave is a form of immigration status granted to a person who the Home Office has decided does not qualify for refugee status or humanitarian protection but where there are other strong reasons why the person needs to stay in the UK temporarily. Discretionary leave is granted outside the Immigration Rules.
**Dispersal** is the process by which the Home Office moves an asylum seeker on a ‘no choice’ to areas outside London and the South East. In Wales, the agreed dispersal areas are Cardiff, Newport, Swansea and Wrexham.

**Domestic violence** was defined in recently published guidance from the Home Office and includes controlling and coercive behaviour in the following terms:

*Controlling behaviour is: a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.*

*Coercive behaviour is: an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.*

**Indefinite leave to remain (ILR)** is a form of immigration status given by the Home Office. Indefinite leave to remain (ILR) is also called ‘permanent residence’ or ‘settled status’ as it gives permission to stay in the UK on a permanent basis.

**Human trafficking** is the exploitation, the intent to exploit, or knowingly moving a person into a position of exploitation, most often in order to generate profits. Trafficking involves the movement of a person from one place to another by use of deception or coercion, abuse of power or of a position of vulnerability into conditions of exploitation. Exploitation types include sexual exploitation, labour exploitation, domestic servitude / slavery. Less common is the exploitation of human tissue (organ harvesting) This sets it apart from human smuggling or facilitation, which is the provision of a service to the person being moved and smuggled and to which migrants usually consent. Trafficking happens internally within the UK (it does not necessarily involve crossing a border) and as such it is not solely an issue of international migration.

**Humanitarian protection** is a form of immigration status granted by the Home Office to a person who it decides has a need for protection but who does not meet the criteria for refugee status.

**Protected characteristics** are those covered by equalities legislation. These include:

- Age
- Disability
- Gender reassignment
- Marriage and civil partnership
- Pregnancy and maternity
- Race
- Religion and belief
- Sex
- Sexual orientation
References


Izzidien, S. 2008. "I can't tell people what's happening at home": Domestic abuse within South Asian communities - the specific needs of women, children and young people. London: NSPCC.


