

Case Study: Imkaan—Supporting Asian, Black, Minority, Ethnic, and Refugee Survivors (United Kingdom)

[Imkaan](#) is a national organization in the United Kingdom which represents and assists frontline support providers for black, Asian, minority ethnic and refugee (BMER) women and girls who have experienced various forms of violence, including domestic and sexual abuse, and forced marriage, or are at-risk of honour-based crimes. With over 13 years of experience, the organization serves as a representative of and provides support to shelters and other organizations specializing in support for BMER women and child survivors across the United Kingdom. The organization has contributed to strengthening specialist services available to these women and bringing together specialist organizations through training, research, capacity development support, and strategic advocacy. The network uses a grassroots approach to implement its work, based on the needs of service providers and the views and voices of the women and children they support.

Background:

In the 1970's, many BMER women were involved in the struggles for gender equality and racial equality. During this time, activists began to acknowledge that the needs of BMER women fleeing violence were not adequately considered or addressed within the wider feminist or race equality movement. BMER survivors were often isolated from the support of their extended families and communities, while women's services did not recognize their cultural, religious and linguistic needs, or understand the context in which they had experienced violence.

In response to these concerns, activists mobilized resources and established a number of specialist services in the 1980s and 1990s focusing on the needs of South Asian, African, Afro-Caribbean, Chinese, Jewish, Irish and Latin American women. Under pressure with limited resources, smaller grassroots services which had operated as collectives were encouraged or coerced to adopt hierarchical structures in order to be recognized as more 'professional'. Many groups also felt pressure to formalize as non-governmental organizations, which allowed them to compete for key resources and receive funds, but limited their ability to engage in political advocacy. Throughout the 1990s, many BMER women's services continued to operate on limited budgets.

In 2003, the Government introduced the [Supporting People](#) funding programme to streamline income for organizations providing housing-related support, with a view to ensure that women's refuges would receive adequate funding. As the programme developed, housing associations who owned the shelter properties started to compete for implementing services or elements of services. Larger mainstream shelter providers began to take over smaller services, which further marginalized BMER service providers. Drawing from the experiences of two organizations providing services to Asian women, Imkaan was founded as an independent organization in 2004, and has since grown to represent the broader community of BMER service providers across the United Kingdom.

Through its efforts, Imkaan aims to strengthen the results and achievements of specialist service interventions, among other actors in the violence against women sector, which can contribute to specific outcomes for the women and girls they support, including:

- Improvement in overall safety
- Reduction in repeat victimization and domestic homicides
- Improved quality of life, confidence and self-esteem
- Improvements in physical and mental health and well-being
- Increased awareness of the risks and indicators of violence
- Improved strategies for avoiding future risks
- Achievement of individual goals related to budgeting skills, training, education and employment

Specialist Service Framework

Integrating the principle of [survivor-centred services](#) with an approach that acknowledges the combined impact of gender, race and culture on a woman or girl's experience with abuse, Imkaan promotes key components of specialist refuge service-provision:

- Holistic services (beyond crisis-based accommodation) are independently developed, led and delivered in a safe, confidential, non-judgmental space by BMER women. This includes outreach, resettlement, support and advice groups, counseling, training and education to support women in their journey towards independent living.
- Safe and emergency accommodation in a women-only environment reflects women's cultural and religious needs to enable their transition from violence. Staff are able to recognize and respond to BMER women's experiences of violence combined with discrimination related to racism, social exclusion and social marginalization. This acknowledges the context of the abuse and the particular challenges they face by leaving family and community networks. This includes targeted [risk assessment](#) and [safety planning](#) practices.
- Staff provide emotional and practical support with acute knowledge of the specific needs of BMER women, and have the skills and ability to respond appropriately.
- Organizations advocate on behalf of the woman, with housing, social services and other agencies including the criminal justice system, to ensure her rights are exercised and her needs are met in the short and longer-term.
- Outreach enables organizations to engage and communicate with BMER women in the community who may be facing similar experiences.
- Resettlement assistance, which may involve ongoing emotional, practical support and advocacy, is provided to support women through the transition from leaving the specialist refuge to independent living.
- Ability to form appropriate working relationships with women, and provide a safe, familiar environment that counters isolation from family and community networks.

- Ability to provide confidentiality and privacy at all times, unless it is necessary to breach confidentiality to protect a woman, or another person, from harm.
- Working knowledge of the current legislative framework, government guidance, policies and procedures to advise and assist women to make informed choices.
- Ability to focus on each woman as an individual, promoting and upholding respect for individuality and difference among service users rather than responding to all BMER women as a homogeneous group.
- Ability to voice the needs of BMER women, advocate on their behalf, and liaise with a wide variety of state and non-governmental agencies.
- Ability to speak languages relevant to the community, allowing women who do not speak English or prefer to speak in their first language, to speak fully about their experiences.

Specialist Responses

- Appropriate safety planning and risk assessment services for BMER women who are fleeing violence should demonstrate consideration of:
 - The complexities of risk and equalities issues that increase vulnerability to violence.
 - How to assess risk and safety plan in the context of multiple perpetrator(s).
 - Specific risk factors involved in cases of forced marriage, ‘honour’-based violence, youth violence and female genital mutilation (FGM), such as girls’ lack of awareness preceding specific acts of violence or identifying their experiences as abuse; isolation from support services due to their age and potential for future repercussions if they seek outside support.
 - How coercion operates in cases of forced marriage, sexual violence within gangs, and female genital mutilation; as well as its impact on disclosure to professionals.
 - Multiagency responses and working in partnership with other agencies to increase the availability and range of services available to BMER women, ensuring they receive holistic support that responds to their needs.
 - Survivor involvement as an essential aspect of services, which provides a platform for women to be involved at design, delivery and evaluation stages; ensures the service is inclusive and needs-based; and that women, children and young people have a genuine influence on the support they receive.

Monitoring and Evaluation

- Monitoring service outcomes from the outset is important to identify and address good practices and improvements, as well as document the effectiveness and need for specialist service, to commissioners, funders and policy makers.
- Within the context of adhering to national service standards, including [Supporting People standards](#) and [Women’s Aid National Standards](#), Imkaan developed a [data collection toolkit](#) in 2008 to enable BMER organizations to capture the experiences of women accessing their services, alongside data on the nature and value of the specialized services provided, which allows organizations to identify and respond to emerging needs.

The organization also outlines specific guidelines which specialist organizations should use to inform their governance and policy structure, as well as operational practices as follows:

Governance and structure should involve:

- An independent governing body, with a strong understanding and analysis of the impact of gender, race and culture on experiences of violence.
- A [governing document](#) that sets out clear aims and objectives that outline meeting the needs and promoting the interests of BMER women and children.

Services should be guided by equality alongside anti-discriminatory policies and practices which:

- Employ a human rights-based definition of violence against women in operational policies and procedures, which are understood, implemented and promoted by staff in their work.
- Promote respectful relationships and non-violence across service delivery.
- Integrate equalities policies in to all aspects of service, which address sex, age, faith, disability, race, nationality and sexuality, as well as inequalities not addressed in national legislation such as financial or social status, language, immigration status, health status, etc.
- Ensure that policies and procedures related to grievance, discrimination, equal opportunities, disciplinary, harassment, child protection, protection of vulnerable adults, protection from abuse and whistle blowing are accessible and publicly promoted.
- Have clear eligibility criteria and referral procedures and ensure women are informed of their rights and responsibilities on accessing the service.
- Hold up-to-date information about the rights and entitlements of women accessing services.
- Have business and service development plans that demonstrate involvement of survivors.
- Make available all operational policies and procedures to the governing body, staff and women receiving services, where appropriate.

Staff providing specialist support should have specific knowledge and expertise, including:

- Strong awareness of the links between different forms of violence / manifestations of male privilege, and its impact on BMER women.
- Consideration, understanding and value for cultural, religious and racial identities, and ability to provide women an experience of being understood, heard, and believed without proof.
- An acute understanding of and ability to respond to the multiple factors affecting BMER women's experiences (e.g. violence alongside social and economic issues).

Lessons Learned:

- It is crucial to invest in organizational development around key areas such as governance, strategic development and lobbying (e.g. the Imkaan framework created for specialist BMER organizations), which also builds expertise in issues relating to gender, race, ethnicity and culture as core service components in creating safe environments for women from marginalized communities.
- Specialist services have contributed to increasing the aspirations and support for BMER women's leadership and independence, by providing opportunities for empowerment, and moving beyond risk and safety management. This is critical for promoting ownership of the work by women from the communities concerned.
- It is essential that structures are established from the outset to monitor and evaluate the effectiveness of services provided. Information collected is most valuable when it is based not only on funding or reporting requirements, but on the priorities of women and the organization. For example, employing the data collection process supported through the Imkaan toolkit has helped to highlight the value of specialist services, with 87% of women (among an initial 307) reporting their preference for support from a BMER specialist. The data highlights the specific service components valued by survivors, such as access to and advocacy from staff who provide a safe and familiar setting; understand and respond to the specific context in which women experienced and left violence; as well as document information from the largest sample of BMER women and children experiencing violence in the United Kingdom.
- Creating a network of specialist organizations has provided important links across communities and created platforms for dialogue around all areas of violence against women and girls. However, local and regional strategic planning should seek to foster further effective engagement with grassroots activists from marginalized communities.
- Strengthening the capacity and voice of BMER organizations supporting survivors has increased their capacity to contribute to strategic advocacy, campaigning and lobbying, and influence important policy and legislative change and developments.
- Partnerships must be constructed to recognize the contributions of diversity and challenge structural inequality, which is critical to counter the limited acknowledgement of the specialized organizations and reinforce the value of culturally-specific services in addressing violence against women, both within the broader violence against women sector and wider political environment. This is particularly important to address challenges related to the credibility of individual organizations', increase their ability to influence change, and access resources to support their services.
- Despite increased capacity of specialized BMER organizations, ongoing marginalization of both gender and specific ethno-cultural identities within the broader society perpetuate stereotypes of, and at times hostility towards BMER women and specialist service providers.

'When we are silent about the violence in our communities, the violence continues; and as women we are told that we are covering up, colluding, somehow complicit. When we speak about the violence in our communities, our voices are used in evidence in the arguments that our communities are underdeveloped, more aggressive and more misogynistic'.

Read more about the Imkaan [training](#) and access [resources](#).

Sources: Marai Larasi, Director. Imkaan; [Imkaan Website](#).