

Centre of
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sexual abuse

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Foundation



Improving responses to the sexual abuse of Black, Asian and minority ethnic children

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About the Centre of expertise on child sexual abuse

The Centre of expertise on child sexual abuse (CSA Centre) wants children to be able to live free from the threat and harm of sexual abuse. Our aim is to reduce the impact of child sexual abuse through improved prevention and better response.

We are a multi-disciplinary team, funded by the Home Office and hosted by Barnardo's, working closely with key partners from academic institutions, local authorities, health, education, police and the voluntary sector. However, we are independent and will challenge any barriers, assumptions, taboos and ways of working that prevent us from increasing our understanding and improving our approach to child sexual abuse.

To tackle child sexual abuse we must understand its causes, scope, scale and impact. We know a lot about child sexual abuse and have made progress in dealing with it, but there are still many gaps in our knowledge and understanding which limit how effectively the issue is tackled.

Correction (February 2026)

We have made a small change to page 39, correcting an editorial error and clarifying the order of events.

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Executive summary

This research study was commissioned by the Centre of expertise on child sexual abuse (CSA Centre) to address knowledge gaps around professional practice in supporting children from Black, Asian and minority ethnic backgrounds who are at risk of, or experiencing, child sexual abuse (CSA).

Research has found that levels of CSA do not vary significantly with social class or ethnic group, but children from Black, Asian and minority ethnic backgrounds – defined in this report as encompassing all ethnic groups other than White British – are under-represented in official reporting of service use relating to CSA. Possible reasons for this under-representation include particular difficulties faced by these children in disclosing the sexual abuse they have experienced, and agencies' resistance to acknowledging that they can be victims of abuse.

To address this issue, the Race Equality Foundation conducted research with the aim of finding out about:

- current practice in England and Wales to support children from Black, Asian and minority ethnic backgrounds who are affected by CSA
- the use of resources (particularly learning materials) by practitioners, and evidence of their efficacy in England and Wales
- the needs of children from Black, Asian and minority ethnic backgrounds who have been sexually abused, and how effectively their wellbeing is currently safeguarded.

Between January and March 2020, qualitative interviews were conducted with 16 professionals working in the voluntary sector and local authorities in England; efforts to recruit interviewees working in Wales were unsuccessful. All the interviewees had expertise in working with children from Black, Asian and minority ethnic backgrounds – principally South Asian, Black Caribbean and Haredi Orthodox Jewish backgrounds – who had experienced CSA. They were recruited through approaches to 41 agencies and organisations known to the CSA Centre or the Race Equality Foundation, or identified through internet searches.

The interviewees were asked for their views based on their professional experience; many also drew on their knowledge of their own community of origin, but most had experience of working with children from a variety of ethnic groups. Relevant findings from the research literature in the UK allow some contextualisation of their statements. with the intention of enabling frontline practitioners, managers and commissioners to learn from existing knowledge so they can provide the best possible services to children from Black, Asian and minority ethnic backgrounds.

The interviewees identified a number of barriers which prevent these children from disclosing their experiences of CSA and accessing services: both internal (cultural) and external (structural, societal and organisational) barriers. They also observed how cultural insensitivity by agencies and service providers could reduce communities' trust in them, before outlining ways in which victims and survivors of CSA from Black, Asian and minority ethnic backgrounds could be better safeguarded and their needs met. Interviewees cited examples from their own practice and suggested further actions; although they did not provide examples of resources developed for use in work with children from specific ethnic backgrounds, a few discussed their use of other resources which they felt were applicable to children of all ethnicities.

Key findings

Internal barriers to disclosure and accessing support services

While our interviewees identified the following barriers as relevant to children from Black, Asian and minority ethnic backgrounds, it is clear that similar barriers may also be present for White British children.

Lack of understanding and awareness of concepts such as CSA.

Interviewees pointed out that some victims and survivors of CSA – in South Asian Muslim and Haredi Jewish communities, for example – may be less able to name their experience as abuse because of a lack of knowledge about sex and consent; limited access to online sources of information was felt to contribute to this. Published research has identified that similar issues can affect Somali communities, and noted that some languages lack words for CSA.

Pressure to conform to gendered roles.

Gender expectations make it difficult for both female and male victims of CSA in some communities to talk about their experiences, interviewees said. The influence of religious leaders and elders within highly patriarchal cultures was a common theme.

- ▶ The interviewees gave examples in which expectations around sexual ‘purity’ were likely to prompt some South Asian girls and young women experiencing CSA to feel shame or fear that they may be blamed for the abuse. Published research suggests that some abused South Asian women may feel they do not need or deserve help.
- ▶ Interviewees felt that boys and young men who are sexually abused by males may feel conflicted, embarrassed or confused about their sexuality, particularly if being gay is considered a sin in their culture; examples were cited from Black, Bangladeshi, Pakistani and ultra-Orthodox Jewish communities. Furthermore, it was observed that sexual abuse of boys or young men by women may be considered (by the victims and others in the community) less serious than abuse by men.

Fear of being disbelieved or ignored.

Even where a child knows they have been sexually abused, interviewees said, they may not tell anyone because they fear their parents and community will disbelieve or refuse to accept their disclosure. This fear – observed by interviewees in ultra-Orthodox Jewish and South Asian Muslim communities – was thought to be greater if the perpetrator holds a position of power in the community.

Pressure within families and communities to maintain honour and prevent shame.

While children of all ethnicities may feel individual shame and stigma after experiencing CSA, interviewees considered that in South Asian communities these feelings may be linked to and amplified by ideas of family/community honour and shame. To prevent disclosure and preserve family honour, some sexually abused children may be removed from the community and/or forced into marriage, or may be ostracised. The research literature has also identified honour and shame as barriers to disclosure for other communities, including African Muslim and Black Caribbean victims and survivors.

The cultural norm around ‘purity’ expected of girls and young women in some South Asian communities was felt to be a barrier to disclosure

External barriers to disclosure and accessing support services

Poverty and insecure immigration status.

Interviewees believed that disclosure of CSA may be particularly difficult in ethnic communities living in extreme poverty, and that families with an uncertain immigration status are unlikely to seek help or support following CSA because they fear deportation. Published research has shown how the circumstances in which some children come to the UK – to escape the war in Somalia, for example – may leave them particularly vulnerable to CSA, and less able to disclose it when it happens.

Limited awareness of support services and inability to access them.

While the same cultural practices and beliefs that limit awareness of CSA (see above) may also prevent members of some communities from knowing where to find help, interviewees considered that support services are insufficiently visible and accessible – particularly to people who do not speak English fluently.

Lack of trust in services.

Citing examples in South Asian, Black and Haredi Jewish communities, interviewees said that perceptions and experiences of racism, discrimination, marginalisation, exclusion and cultural insensitivity (explored further below) could lead to a distrust of statutory agencies. This distrust may also affect people's willingness to engage with voluntary-sector support services. It was noted, however, that some victims and survivors of CSA want to be supported by a professional from the same ethnic background or community while others prefer to receive support from outside their community.

Lack of cultural understanding in statutory agencies and service providers

Examples were provided of ways in which agencies (including the police, social services and schools) and service providers display behaviours based on culturally insensitive attitudes. These behaviours and attitudes were attributed to a lack of diversity in the workforce. There was also felt to be a lack of research evidence on which to build good practice.

Failure to recognise and take account of cultural issues and experiences.

Interviewees argued that, where statutory agencies assume that victims and survivors of CSA from Black, Asian and minority ethnic backgrounds face the same issues and pressures as those from white British backgrounds, and do not account for relevant cultural difference, their ability to respond appropriately is diminished. A lack of specialist services for minority and marginalised groups was noted, and interviewees highlighted that children who have learning disabilities are particularly unlikely to be heard and believed. Published research has identified how the intersecting categories of race, gender and disability compound the challenges faced by Black children and young people who have experienced CSA.



Interviewees said that some but not all CSA victims and survivors want to be supported by professionals from the same ethnic background



Racism and unconscious bias.

Racism, whether conscious or unconscious, was felt to be systemic and endemic at every level of the child protection system, occurring even among social workers from the same ethnic group as the children they work with. Interviewees discussed how racist dominant narratives about Black, Asian and minority ethnic communities affect the delivery of support for victims of CSA – because, for example, professionals accept stereotypes presented in the media as true. For example:

- ▶ There is often an assumption that girls and young women from Black and South Asian communities are unlikely to be victims of CSA – and where they do not conform to this stereotype, professionals may not know how to react. The dominant narrative of South Asian men as perpetrators and white girls as victims of CSA overlooks the experience of South Asian girls and women. Narratives that consider risks only in terms of forced marriage or honour-based violence for South Asian girls and women can result in signs of CSA being missed.
- ▶ Black and Asian boys and young men are often criminalised and assumed to be gang members; they typically come to services' attention because they have committed offences or displayed harmful sexual behaviour, with no recognition that this may indicate they are victims of CSA. Even in referrals, they tend to be described in more negative language than white males are. And a perception of South Asian men solely as perpetrators of sexual abuse may lead professionals to disbelieve their disclosures of having been abused.
- ▶ Professionals may overlook the possibility that members of religions which they associate with humility and non-violence, such as Buddhism, are capable of perpetrating CSA.
- ▶ The families of some CSA victims, such as those in Asian communities, may be more likely than white British families to be suspected of covering up the abuse, and may receive a less positive response – “a reluctance to pull out all the stops” – from frontline services.

Reluctance to challenge attitudes and practices.

Interviewees noted that a well-meaning desire to allow for cultural differences, combined with ignorance of specific cultures, may result in professionals failing to take action when they should do so: fearing being seen as racist, they may not intervene in some parenting practice or suggest that they see the child or young person alone, for example. Published research has identified a dominant view in social services that children are better off within their own family, with the result that intra-cultural tensions (around ‘honour’, for example) between young women and their parents are interpreted as an internal family matter rather than a safeguarding issue.



The narrative of Pakistani men as perpetrators and White girls as victims overlooks the experience of South Asian girls, interviewees noted



Overcoming barriers: working with professionals

Increasing diversity in the workforce.

Interviewees believed that having a diverse workforce can enable organisations to attract a wide range of service users, break down language barriers, and understand different cultures.

Addressing unconscious bias.

Professionals in the field were believed to lack training around cultural competency and unconscious bias. Interviewees thought such training is valuable, and said professionals must be aware of cultural nuances in the communities they serve and the priorities for those communities' children and families affected by CSA.

Developing cultural competency.

Interviewees who were not from their service users' ethnic background said that making an effort to learn about the culture enabled them to provide better support. Understanding each individual's identity through their gender, geography, race, religion, age, ability, appearance, class, culture, ethnicity, education, employment, sexuality, sexual orientation and spirituality was advocated. Published research has suggested looking beyond counselling approaches based on behaviouralism and cognitive therapy when providing therapeutic interventions to people from different cultures.

Sharing knowledge to improve practice.

Interviewees suggested that a framework/tool should be designed for professionals working with Black, Asian and minority ethnic communities. Focusing on both prevention of CSA in those communities and one-to-one work with children affected by CSA, this would need to be informed by the experiences of CSA survivors.

Overcoming barriers: working with communities

Establishing services within the community and building trust.

Most interviewees were themselves from Black, Asian and minority ethnic backgrounds. Those who worked in specialist services for specific ethnic communities, or on community-specific projects within generalist services, explained that disclosure of CSA to them was based on established relationships with the community. These, they said, gave victims and survivors confidence that their CSA experience would be understood in their cultural context. Working with a community was described as a gradual process, key to which was earning trust and maintaining confidentiality. The importance of being known in the community, so that many referrals come through word of mouth, was emphasised. Published research into services for sexually abused South Asian women has emphasised the importance of providing support in safe locations, accessible by those who need them.

Raising awareness of CSA within communities.

Interviewees considered that schools are well placed to safeguard children by educating them about sex and relationships. Awareness-raising with parents – perhaps alongside work on parent-child communication – was deemed essential, and interviewees stressed the need to involve men as well as women in discussions about safeguarding and CSA. Obtaining community and religious leaders' involvement and endorsement was suggested, although the research literature notes risks in relying on those presenting themselves as 'leaders' and advises caution in selecting individuals to involve. Focusing on the experience of victims was recommended, with interviewees noting the power of 'survivor accounts' in outreach work.

Challenging ideas that prevent disclosure and encourage victim-blaming.

The need to challenge gender roles and concepts such as honour and shame was identified; interviewees described how they had done this through coffee mornings and consultations with parents and children, film showings, and support groups. An activity for South Asian parents, focused on the health and wellbeing implications for the abused child, was said to have reduced the shame and stigma attached to CSA.

Implications

Actions that could improve the identification of and response to sexually abused children and young people in Black, Asian and minority ethnic communities – and encourage the use of CSA support services by members of those communities – include the following.

Support for agencies and service providers

Statutory and voluntary organisations that respond to diverse communities should allocate resources to reflection and action in order to improve their responses to CSA.

Given support, community-based organisations that currently work in related areas, such as violence against women or youth work, could provide services for children experiencing or at risk of CSA, and undertake wider awareness-raising outreach.

Outreach to communities

Outreach interventions to raise awareness of CSA, break down barriers to disclosure, improve understanding of disclosure processes and signpost therapeutic support should be piloted with different ethnic communities. These pilots – which could include ‘survivor accounts’ – should be developed in consultation and collaboration with parents and children, and co-produced with voluntary-sector organisations within these communities.

Training programmes for professionals

Training on CSA for professionals should embed anti-racist approaches, and improve understanding of the priorities for, and issues which may additionally affect, children and families from Black, Asian and minority ethnic backgrounds who are affected by CSA.

To address the under-identification of sexually abused children from some ethnic backgrounds, professionals such as teachers and healthcare staff could receive training to increase their awareness of cultural barriers to disclosing CSA and help them respond appropriately to concerns they may have.

A specific resource/toolkit for work with Black, Asian and minority ethnic communities, informed by survivor experiences, should be developed, piloted and evaluated. Recognising the heterogeneity of different ethnic communities, it should focus on:

- preventing CSA
- addressing internal and external barriers to disclosure
- supporting victims to negotiate the legal and court systems
- identifying therapeutic resources.

Research into the needs of children from Black, Asian and minority ethnic backgrounds who experience CSA

Further research is required with children and adult survivors – boys and men as well as girls and women – from a wide range of ethnic backgrounds, to better understand their needs in relation to their experiences of CSA and services’ response to these. This research could identify areas of promising practice and set up evaluation studies.



Research with CSA victims and survivors from a range of ethnic groups could identify areas of promising practice and set up evaluation studies



1. Introduction

In recent decades, the number and diversity of people in England and Wales from Black, Asian and minority ethnic backgrounds has increased. Between the 2001 and 2011 Censuses, the proportion of the population aged 0–17 who identified with an ethnic group other than White British rose from 17% to 24% (Nomis, 2003; Office for National Statistics, 2018a and 2018b). By January 2020, the ethnicity (where specified) of pupils in England’s state-funded primary and secondary schools was 66% White British, 8% White other, 6% Black, 12% Asian, 6% mixed, and 2% other ethnic background (Department for Education, 2020).

Research has found that child sexual abuse (CSA) does not vary significantly with social class or ethnic group in England (Bebbington et al, 2011). With regard specifically to child sexual exploitation, it is known that victims come from all ethnic and faith groups, regardless of how ‘protected’ they may appear (Fox, 2016).

Nevertheless, children and young people from some ethnic backgrounds tend to be under-represented in official figures related to CSA: among children in England on child protection plans under the category of sexual abuse on 31 March 2019, for example, 81% were White British or from other White backgrounds (Department for Education, 2019a). Research has found similar under-representation among the users of therapeutic and support services for children and young people who have experienced CSA (Allnock et al, 2012; Warrington et al, 2017). Children from South Asian backgrounds have particularly low rates of representation (Gilligan and Akhtar, 2006; Gutierrez and Chawla, 2017), and are less likely to be known to the statutory childcare system (Ward and Patel, 2006; Children’s Commissioner for England, 2015).

Such under-representation may be caused in part by a resistance within agencies to acknowledging that children and young people from some ethnic backgrounds can be victims of abuse (Berelowitz et al, 2013; The Children’s Society, 2018a). A further reason is likely to be the difficulty they face in disclosing that they have been abused. The barriers to disclosing CSA are considerable for any child, but research suggests that those from Black, Asian and minority ethnic communities face additional barriers to making a disclosure – and to maintaining it. For example, Gilligan and Akhtar (2006) reported that only 7% of CSA investigations by Bradford Police in 2002 related to South Asian children, one year after the 2001 Census had found 18% of Bradford’s population to be from Indian, Pakistani or Bangladeshi backgrounds; the police attributed the low level of investigations to the withdrawal of many allegations at an early stage.

Another area of under-representation relates to published research: there is relatively little literature relating to professional practice with children and young people from Black, Asian and minority ethnic communities who may be at risk of, or experiencing, CSA.



Children and young people from some ethnic backgrounds tend to be under-represented in official figures related to child sexual abuse



1.1 Research aims

To address knowledge gaps around support for victims and survivors of CSA in Black, Asian and minority ethnic communities, in 2019 the Centre of expertise on child sexual abuse (CSA Centre) commissioned the Race Equality Foundation to carry out research with the aim of answering the following questions:

- ▶ What is known about current practice in England and Wales to support children from Black, Asian and minority ethnic backgrounds who are affected by CSA?
- ▶ What resources, particularly learning materials, are being used by practitioners, and is there any evidence of their efficacy in England and Wales?
- ▶ What are the needs of children from Black, Asian and minority ethnic backgrounds who are affected by CSA, and how effectively is their wellbeing currently safeguarded?

To this end, the researchers conducted qualitative, exploratory interviews with 16 professionals in the voluntary sector and in local authorities. All had expertise in working with children and young people from Black, Asian and minority ethnic backgrounds who had been affected by CSA.

This report presents the findings from the interviews – alongside relevant findings from published research which allow some contextualisation of the interviewees' statements – with the intention of enabling frontline practitioners, managers and commissioners to learn from existing knowledge so they can provide the best possible services to children and young people.

1.2 Terminology

Ethnicity

It has long been recognised that race and ethnicity are social constructs rather than objective measures (Bhavnani et al, 2005), and the words we use to classify race or ethnicity are challenged. Nevertheless, the persistence of racism and the continuing evidence of its real and material impact in the UK (Marmot et al, 2020) exacerbate the impact of CSA on children from Black, Asian and minority ethnic backgrounds (Rodger et al, 2020), and it is important to focus attention on how best to respond to those children's needs.

During the life of this study there has been discussion within the research team and externally about what terms we should use, and indeed where our focus should be. The chosen remit was a broad one, reflecting the reality that practitioners in CSA services – our key audience – work with highly diverse populations including people from many different ethnic groups.

The use of broad collective terminology when talking about ethnicity is widely contested and criticised because it risks homogenising the experience of people from different ethnic backgrounds and masking inequalities between groups; it also maintains White British ethnic identity as the dominant privileged norm (e.g. Aspinall, 2020). Where appropriate in this study, we use the term 'Black, Asian and minority ethnic' to encompass all those communities whose collective experience we wanted to explore, and which have had only limited attention with regard to CSA in recent years (Lovett et al, 2018). We recognise, however, that Black, Asian and minority ethnic communities are not homogeneous, and that individuals from these communities have their own narratives. We aim in this report to be as specific as possible about the communities being discussed, and to avoid generalising from one group to much wider groups or to all people from Black, Asian and minority ethnic backgrounds where this is not warranted.

In this report, the term ‘Black, Asian and minority ethnic’ encompasses all ethnic groups other than white British; it therefore includes individuals from Jewish, Irish Traveller and Eastern European backgrounds, for example. In the published research literature, there is variation between studies in the terms they use and the communities they use those terms to refer to. When quoting directly the authors of published research and our interviewees, we have replicated their own terminology.

Child sexual abuse

The UK Government’s definition of CSA is as follows:

“[CSA involves] forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet).” (Department for Education, 2018:107)

One form of CSA is child sexual exploitation (CSE), which is defined by the UK Government as follows:

“Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact: it can also occur through the use of technology.” (Department for Education, 2018:107)

These definitions are used in England; the Welsh Government (2019) has its own definitions.

Note that forced marriage – which is illegal in England and Wales – can be a form of CSA, if the victim is under the age of 18.

Recording of ethnicity by agencies and service providers

The ethnicity of children and young people identified as experiencing or at risk of CSA is routinely recorded by some agencies: in 2018/19, this was the case for 99% of children placed on child protection plans in England under the category of sexual abuse, for example (Department for Education, 2019a). Recording of ethnicity by other bodies is less common, however. An assessment of agency records by the Child Exploitation and Online Protection Centre (CEOP) found that, among 2,083 identified victims of CSE, the ethnicity of 33% was recorded as unknown; it noted:

“In relation to ethnicity, the data was often recorded to a particularly poor standard at the point of capture.” (CEOP, 2011:9)

The CSA Centre has developed a ‘data collection template’ (Karsna, 2019) as part of its work to improve the quality of data collected by agencies and services delivering CSA support.¹ The template sets out 19 basic categories of ethnicity that services should record as a minimum, reflecting categories used in the Census to enable comparison, but the CSA Centre stresses that capturing ethnicity in more detail is welcomed. In their study of responses to women and girls from Black, Asian and minority ethnic backgrounds who experience sexual violence, Thiara et al (2015) argued that the use of broad categories such as ‘Black Caribbean’, ‘Black African’, ‘Asian’ and ‘Asian British’ disguises both the diversity and the needs of specific groups within these categories; and Williams (2018a) highlighted a lack of statistics available on the prevalence of CSA in the Somali community.

¹ More information can be found on the CSA Centre website at www.csacentre.org.uk/our-research/the-scale-and-nature-of-csa/improving-agency-records

1.3 This report

Following an outline of the method adopted for the interviews and their analysis (Chapter 2), this report sets out the interview findings.

The interviews focused primarily on current practice and its effectiveness. A common and much-discussed theme was the under-representation of children and young people from Black, Asian and minority ethnic backgrounds among the users of CSA support services, and the reasons for it. As this is key to understanding the needs of these children and young people, it is explored first in this report:

- ▶ Chapter 3 describes internal barriers to disclosure of CSA and access to services; these are cultural factors that might deter children and young people in Black, Asian and minority ethnic communities, and their families, from talking about their experiences or seeking help.
- ▶ Chapter 4 details the external barriers – structural, societal and organisational factors – that restrict access to services. These barriers include a lack of confidence in and distrust of agencies and service providers; Chapter 5 provides examples of cultural insensitivity within such organisations which can feed that distrust.

Chapters 6 and 7 then explore the ways in which the barriers identified can be and are being addressed, so that victims and survivors of CSA from Black, Asian and minority ethnic backgrounds may be better safeguarded. Interviewees cited examples from their own practice and suggested further actions for work with victims and survivors. While interviewees were not aware of resources produced specifically for use in work with children and young people from specific ethnic groups, a few interviewees discussed their use of other resources which they felt were applicable to children of all ethnic backgrounds.

Finally, Chapter 8 sets out the study's implications for practice and research.

Throughout Chapters 3 to 7, the interviewees' observations and reflections are accompanied by findings from relevant published research relating to children and young people from Black, Asian and minority ethnic backgrounds living in the UK. It should be noted that critically appraising the quality of the published research was beyond the scope of this study, and that there is a dearth of research evidence on the topics covered by this study. For example:

- ▶ The literature focuses mainly on South Asian (Pakistani, Bangladeshi and Indian), Black Caribbean and Black African children and young people.
- ▶ As noted by Ward and Patel (2006), research into ethnicity and CSE has tended to look at young people trafficked into the UK for purposes of sexual exploitation, and young people who arrive as unaccompanied minors and may be sexually exploited for commercial gain. There has been comparatively little published research into the sexual exploitation of young people from Black, Asian and minority ethnic backgrounds who were born and raised in the UK.



Published research focuses mainly on children and young people from South Asian, Black Caribbean and Black African communities



2. Method

As outlined in Chapter 1, the research involved interviews with professionals working in specialist Black, Asian and minority ethnic services and in general services, both in the voluntary sector and in local authorities. We sought working practitioners, not academics or ‘spokespeople’ for specific groups.

2.1 Recruitment of interviewees

To recruit professionals to be interviewed, we approached local authority children’s services, some larger voluntary-sector providers of CSA support services, and voluntary organisations catering specifically for Black, Asian and minority ethnic communities, to ask whether they were interested in taking part. This initial approach was made by email, and was followed up with telephone calls. There is no published list of such services or individuals that could have been used as a ‘sampling frame’.

The 41 agencies and organisations approached had been identified through existing links with individuals – such as via the CSA Centre’s Professional Development Scholarship Programme (CSA Centre, 2018) – as well as the Race Equality Foundation’s contacts and internet searches.

Securing participation in the project was often straightforward once we had:

- ▶ found organisations that were working with children and young people from Black, Asian and minority ethnic backgrounds who had experienced CSA
- ▶ explained the purpose and who the work was being done for.

However, our approaches to some organisations did not result in their being involved in this project (for reasons such as a lack of capacity within the organisation). The people and organisations that decided to proceed gave very generously of their reflections and their time.

Contact was made with potential participating individuals by email, which included sending them an information sheet. This was followed by a telephone call to answer any questions and to arrange a mutually convenient date and time for the interview.

2.2 Conducting the interviews

In total, 16 professionals were interviewed between January and March 2020. Eleven interviews were conducted face-to-face, and five via Skype.

The semi-structured interviews were carried out using a discussion guide which was informed by the research questions and the published research literature. The discussion guide covered the following broad areas:

- ▶ Experience of working with children and young people from Black, Asian and minority ethnic backgrounds who were at risk of or experiencing CSA, and their non-abusing family members.
- ▶ Factors influencing the experience of these children and young people.
- ▶ Addressing the needs of these children and young people.
- ▶ Supporting these children and young people.

2.3 Characteristics of the interviewees

All of the 16 interviewees had direct experience of and expertise in working with children and young people from Black, Asian and minority ethnic backgrounds who had experienced CSA. Although attempts were made to recruit professionals in the field from across England and Wales, all of the interviewees worked in England, with nine from London and the South East, four from the North West and three from Yorkshire.

Four of the interviewees were independent providers of CSA support services (a therapist, a counsellor, a sexual violence advisor and a CSA consultant).

Another four worked in, managed or had founded organisations providing CSA or domestic violence support services specifically for certain ethnic communities.

Of the remaining eight, three were from local authorities and five from generalist voluntary-sector providers of support services around CSA, domestic violence and youth violence. They included three managers, one team manager, two project workers and two social workers.

Interviewees were asked for their views based on their professional experience. Many also drew upon their knowledge of their own community of origin, but most also had experience of working with children and young people from other ethnic groups. This reflects the situation of staff in most existing services, since specialist services for specific ethnic groups are few and far between.

The interviewees' age ranged from 28 to 64, with a median age of 38; one did not state her age.

Fourteen were female, and two male; the two men were the oldest participants.

They self-identified with the following ethnic groups:

Ethnic group	Number of interviewees
Black Caribbean/Black British Caribbean/American African-Caribbean	6
White English (one of whom was Jewish)	3
Pakistani	2
Sri Lankan Tamil	2
Ashkenazi Jewish	1
White and Black Caribbean	1
White Irish, Arab, African	1

2.4 Analysis

All interviews were audio-recorded and transcribed, and a 'framework approach' was used for analysis (Mason, 2017). This involved a detailed familiarisation of the data, identification of the key themes to form a coding frame, indexing the material according to the coding frame, and interpreting the findings in the context of other research and policy and practice considerations (Silverman, 1993).

To guarantee a degree of inter-rater reliability and transparency, 10% of the audio recordings were reviewed by the CSA Centre until a consensus was reached on the themes and sub-themes emerging from the interviews.

The 16 interviewees had direct experience of working with sexually abused children from Black, Asian and minority ethnic backgrounds

2.5 Ethical issues

It was made clear to the interviewees, during the recruitment process and on the information sheet that participation in this study was voluntary and confidential. All interviewees received a participant information sheet which they had at least 24 hours to look through before deciding whether to take part in their interview.

2.6 Limitations

This was a small qualitative study, seeking to learn more and to open up much-needed discussion. The 16 interviewees were professionals from a range of ethnic and professional backgrounds, working in a variety of organisations across England, and with expertise in working with children and young people from Black, Asian and minority ethnic backgrounds who had been sexually abused. Where possible, we have highlighted relevant findings from published research in relation to the issues raised in the interviews, to allow some contextualisation of the interviewees' statements. Nevertheless, their views and observations may not be representative of all professionals in the field with similar experience.

While this study has begun to address some of the gaps in research on effective support for children from Black, Asian and minority ethnic backgrounds who experience CSA, further work is certainly needed – including research to tie professionals' views around improving practice to the experiences of and outcomes for the children themselves.



Where possible, we have highlighted relevant findings from published research to allow contextualisation of the interviewees' statements



3. Cultural (internal) barriers to disclosing CSA and accessing services

Asked about the culture within the ethnic communities they have worked with, and whether cultural factors might act as barriers to the disclosure of CSA, the interviewees in our study identified that children in those communities might not disclose their abuse or access support services because:

- ▶ they do not realise that they have been sexually abused
- ▶ they feel shame or confusion about their experience, partly because of the gendered norms to which they are expected to conform
- ▶ they want to disclose the abuse, but they fear being disbelieved or ignored, particularly if the abuse has been perpetrated by a figure of authority within the community
- ▶ they want to disclose the abuse, but they fear bringing dishonour and shame on their families – and they fear the possible consequences, such as being ostracised or removed from their community, or being forced into marriage.

While our interviewees identified the barriers above as affecting children from Black, Asian and minority ethnic backgrounds, it is clear that similar barriers may also be present for White British children.

The interviewees' reflections on these barriers are set out in this chapter.

3.1 Lack of understanding and awareness of concepts such as CSA

The professionals we interviewed noted that victims and survivors of CSA from some communities may be unable to name their experiences as abuse. One referred to her counselling sessions for women from the Haredi Jewish community:

“People have come in seeking help because their sexual relationship with their husband, which is an arranged marriage to begin with, is difficult for them. And that [difficulty can often be] attributed to childhood sexual abuse.”

In her experience, these women's limited understanding of consent – which had never been discussed within the family, the community or religious schools – had prevented them from linking their difficulties with sexual intimacy to their experiences of CSA.

The same interviewee, and another who also had worked with the Haredi Jewish community, pointed out that a lack of access to technology prevented individuals from learning about sexual relationships and consent:

“Home social media is banned [so] children [have no] access at any way ... without any tools to keep themselves safe.”

“No TV, no social media, and that's how they almost keep them unaware of what's going on in the real world, and what's allowed and what's not allowed ... We had this one case where actually a boy was abusing his cousin, he was 16 and she was 14, but I'm not even sure that he knew what he was doing was wrong ... They're 16, they're experimenting, and no one said, 'You're not allowed to do that to someone,' and no one said, 'Actually, she's not consenting,' or 'That's your cousin.’”

Findings from published research

In some communities, sex (including sexual abuse) and pre-marital relationships may be seen as taboo subjects and not discussed (The Children's Society, 2018a).

In addition, terms such as 'child sexual abuse' and 'child sexual exploitation' may not easily translate to some languages (The Children's Society, 2018a). This has been reported in studies involving South Asian communities (Harrison and Gill, 2018) and the Somali community in London (Williams, 2018a), with the latter study also noting:

"[Some] felt that child sexual abuse was a 'Western' or 'White' problem, and that in effect it had been a disease that had infected the Somali community once they had arrived in London."
(Williams, 2018a:17)

There can also be a lack of words describing the genitals that are not 'swear words'.

Research into British South Asian communities in the north of England found that many women were unaware of what sexual abuse is, and in particular lacked knowledge about the concept of marital rape:

"When some British South Asian women were informed of the rape laws in England and Wales, including the recognition that a husband can rape a wife, many were shocked ... According to one woman: 'In the Muslim community, the women are told: "If your husband wants to have marital relations with you, you shouldn't deny him." ... They aren't told that you can say no'. Another believed many women construed rape as unwanted sexual intercourse with a brother-in-law or a father-in-law, but not a husband."
(Harrison and Gill, 2018:278)

For these women, access to information was filtered through the religious leaders in their communities; in focus groups, those leaders "showed no understanding that marital rape was an offence". Without direct access to other sources of education, women had no opportunity to learn about sexual abuse, their rights, and the resources available to them.

"Charity workers also told us that many women were restricted in terms of the buildings they were allowed to frequent; these restrictions presented a major barrier for those wanting to access services." (Harrison and Gill, 2018:278)

3.2 Pressure to conform to gendered roles

Our interviewees considered that gender expectations could make it difficult for both male and female victims of CSA to talk about their experiences. The influence of religious leaders and elders in patriarchal cultures was a common theme.

3.2.1 Girls and young women

Discussing the cultural norm around sexual 'purity' expected of girls and young women in some South Asian communities, our interviewees felt that gender inequalities prevented disclosure when abuse had happened:

"There's a chastity test and also a lack of talking about sex openly, there's a whole shame around it."

One commented that the practice of female genital mutilation (FGM) illustrated the role of elders within the extended family and the community in exerting pressure to maintain cultural norms:

"When you look at FGM ... it represents cleanliness, virginity, sacred ... 'If you don't have FGM you're impure,' you know ... The influencers in society are the ones that [maintain these views]. You have to acknowledge the influencers ... when you talk about minority communities."

In some communities, sex (including sexual abuse) and pre-marital relationships may be seen as taboo subjects and not discussed

Such views and expectations could lead female victims of CSA to feel ashamed about their abuse, or to fear being “shamed and blamed” if they talk about it:

“If it’s a patriarchal system or [if in] the community the family [is] still so strong ... the women talking about having had sex is just not seen as healthy or good. So then young women are less likely to disclose to their parents as well.”

“We still have a blame culture within [South Asian] communities. We’re still struggling with our patriarchal set structures. We’ve got lots of things that we’re still struggling with, and they don’t help with disclosures and in terms of supporting a young person to disclose.”

In addition to deterring disclosure of abuse, concepts of purity linked to virginity were believed sometimes to motivate certain forms of CSA. One interviewee recalled a case of CSE of a young South Asian girl by South Asian perpetrators:

“She was 11. She was still at primary school and it was the next-door neighbours who took her in for the day ... It was the White girls who went back and told the story about how the men got them to watch how they anally abused her, because what they said is that they were protecting her virginity.”

Findings from published research

Research in South Asian communities has suggested that the maintenance of cultural norms is measured by the preservation of virginity, synonymous with purity before marriage, so the loss of virginity outside marriage disrupts ideas of purity (Gilligan and Akhtar, 2006; Gill, 2017).

Kalra and Bhugra (2013) argued that interpersonal sexual and non-sexual violence against females is the result of unequal power relations between men and women, and is strongly influenced by cultural factors and values.

Such cultural norms can influence the disclosure of sexual violence/abuse in South Asian communities (Gill, 2004; Harrison and Gill, 2017). A study of South Asian women in the north of England found that their reticence to disclose sexual abuse was partly the result of “dominant moral codes within their community which seldom blamed men for their abuse” (Anitha, 2011).

Reavey et al (2006) suggested that “cultural perceptions of the self” for South Asian women can mean they do not believe they need or deserve help from a service if they have been abused. Besides deterring them from accessing services, this may lead them to suppress the abuse and internalise blame, which has been associated with increased susceptibility to suicide and depression (Sawriker and Katz, 2017).

Wilson (2016:187–188) noted how “some African-Caribbean British mothers may advise or coerce their daughters into hiding all manner of abuses, including CSA, by encouraging or demonstrating a racially specific way of being: ‘strong and chaste’”.

One interviewee highlighted the role of elders within the family and the community in exerting pressure to maintain cultural norms

3.2.2 Boys and young men

Our interviewees had provided services to male victims and survivors of CSA from Black, Asian and minority ethnic communities – but some observed that disclosure was less likely in certain communities:

“I’ve never seen, in 20 years, a West Indian male talking about being abused.”

“We have a lot of men who come regularly [to our support service] – people think quite a lot of the time that it’s women that are abused, but actually we have a number of young men and boys that have been [sexually] abused.”

When boys and young men are sexually abused by other males, interviewees said, it is common for them and their families to question their sexuality:

“One of the biggest barriers is homophobia. If young men are to get over the barrier to want to disclose ... but their perpetrator has been male, [there is conflict] around their ... sense of sexuality ... ‘Does that bring into question my sexuality? Does that make me gay?’”

“In most Black families, being gay is a sin – in most religions, I guess ... If it is male upon male, the line has been blurred and you can’t be Christian and be gay, so somewhere there’s, you know, damnation ... So you hold that in – because if you were a victim of same-sex abuse, how do you not then say that you’re gay? But that has nothing to do with your sexuality. That’s the harm that’s been caused to you, but it is also a mindset of a community or culture that needs to shift.”

“Some of the Bangladeshi or Pakistani families we’ve worked with ... for them, their religion is very important ... They may say, ‘Well, within my religion it’s not allowed for someone to be a homosexual.’”

“[Male victims of abuse in ultra-Orthodox Jewish communities] definitely come forward [less] because it’s even more of a taboo ... It’s this whole bravado thing – I mean, even in the non-Jewish community we have less men coming forward because it’s embarrassing to them or they [think,] ‘I’m a man, how’s this happened to me?’ Especially heterosexual men. But it does happen. It happens more than we think.”

If boys or young men have had a physical response to sexual abuse, this can confuse them further:

“There is a question of sexuality if they – even if it was a biological response – [believe they were] enjoying it ... and I think that leads to a lot of confusion because of the lack of connection. [They need] someone to say, ‘Actually, anybody would be aroused.’ ... I think it’s harder for them [to disclose]. I think research also shows, because they don’t bleed as much or spot or become pregnant or catch a STI, it’s easier [for] younger males to be abused without signs.”

One interviewee reflected on their work with a boy whose family struggled with understanding his sexual abuse in the context of his homosexuality:

“He identified himself as a Gypsy ... They came from Ireland ... He came out as gay at 12 and then he disclosed that he’d been abused by a worker ... but that his family found it really difficult to understand him.”

Concepts of masculinity were considered to inhibit recognition and disclosure when boys and young men are sexually abused by women:

“Male or female, it’s an abuse of power ... If they are 15 or 14 with a female older adult schoolteacher, they may not see that as particularly an issue until they get older ... [There’s] that patriarchal view that guys abused by a male, that is a bad thing; guys abused by a female, yes it is awful but maybe it is not as bad; and that guys can’t be raped.”

Findings from published research

Ideas about gender can prevent males of all ethnicities from disclosing that they are victims of CSA. Analysing the responses to a survey of men from a range of ethnic groups who had experienced CSA, Easton et al (2014) identified barriers to disclosure within three 'domains':

- Sociopolitical – values related to masculinity which influence societies' attitudes towards male survivors of abuse, such as the view that males cannot be victims of rape.
- Interpersonal – potential negative social consequences of disclosure, such as being criticised, ostracised, rejected or abandoned and having one's sexual orientation questioned by others.
- Personal – internally focused barriers such as negative emotions (e.g. shame, embarrassment, self-blame, humiliation, guilt, low self-esteem, pain), repressed memories and an inability to identify the experience as sexual abuse, and concerns about one's own sexual orientation/identity.

A fear of being labelled as gay may be heightened for boys and young men from religious or cultural groups which condemn homosexuality (Fox, 2016).

A study carried out by Barnardo's noted professionals' belief that the sexual exploitation of boys and young men "may be particularly hidden in [ethnic] communities where young people may be 'shamed' by disclosing sexual victimisation (for example, due to the stigma of same-sex sexual contact or of sexual contact outside of marriage)" (McNaughton Nicholls et al, 2014:8).

Research among South Asian male survivors of CSA found that their understanding of their experiences "is largely determined by cultural and societal expectations of 'being a man'. Cultural imperatives of shame and honour when contextualised within the masculinities framework [are] crucial to South Asian men's experiences of child sexual abuse" (Begum, 2018:3).

Community prejudice around sexuality may also leave some boys and young men more vulnerable to CSA. Fox (2016) recounted the case of a boy from an Irish Traveller community who kept his sexuality secret because of attitudes towards homosexuality in the community. When domestic violence led him to run away from home, he decided to go and stay with a man he had met online rather than remaining in the community; despite having promised to look after him, the man raped him.

“ Concepts of masculinity were thought to inhibit recognition and disclosure when boys and young men are sexually abused by women ”

3.3 Fear of being disbelieved or ignored

Even where a child knows that they are being or have been sexually abused, interviewees considered that they may be deterred from telling anyone about it because they fear their parents and community will disbelieve or refuse to accept their disclosure:

“If a child [from the ultra-Orthodox Jewish community] were to go to their parents and disclose what had happened to them, the parents would be, like, ‘Don’t be silly, now move on, that’s not happened,’ and just completely ignore it. I have a young lady of 21 [whose] abuse has happened at 14, 15, 16, and she is adamant that her parents know what has happened and just turn a blind eye to it.”

One interviewee recalled a friend who expressed the view that most “stories” about CSA were made up, because she was testing whether it could be safe to disclose her own experience:

“At that point I said to her, ‘Look, I’m a survivor ... I might or may not talk about it.’ ... I wasn’t prepared for [what happened] next; she’s a woman with a degree, married to a professional bloke ... they’re really [a] well-to-do, happy couple ... She then said, ‘Let me just put my children to bed.’ ... She put her two children to bed, came back down and then just cried for the next two hours. She’d been abused by her grandfather from the age of seven to 12 and never told anybody.”

Interviewees considered that the fear of disclosures not being believed or accepted is more pronounced if the perpetrator holds a powerful position in the community, such as a religious leader or religious teacher:

“There was a case where, in the mosque, there were children that were being sexually abused at Arabic studies, and how the community was wanting to deal with it ... It was, like, ‘He can’t possibly be causing such harm to these children,’ [that sort of] thinking about positions of power, but it is usually those in positions of power [who] are going to have access ... And then also the cultural shame. So, for that child, especially if it was a female child, ‘Well, she must have done something to, you know, elicit this.’ ... The cultural complexities of the religion [and] the family dynamics come into play as well.”

“You can’t really talk negatively about these people ... [You must] show respect because they’re teaching something that’s very holy and religious. So, it’s complex if a child is stuck in that situation.”

“Still now we’ll talk about how things happened at the masjid [mosque] ... but even though they may be in their 30s, they will not go public.”



Fear of a disclosure not being believed or accepted may be greater, interviewees said, if the perpetrator holds a position of power in the community



Findings from published research

According to Gutierrez and Chawla (2017) and Warrington et al (2017), the sexual abuse of women and girls may be covered up because the views of senior men in the family, or of someone well-regarded in the community, are respected while the victim of the abuse is disbelieved.

Additionally, attempts by children and young people to disclose their experience of CSA may be misinterpreted; a lack of awareness and understanding of CSA within the community (see section 3.1) may partly account for this. Reporting on beliefs around witchcraft and spirit possession in London's African communities, Briggs et al (2011) highlighted the case of a sexually abused child whose resultant challenging behaviour was attributed by their foster carers to evil spirits. Similarly, Islamic community groups in the London borough of Newham told social workers during 2010 that they knew of children and young women who had been labelled as 'possessed' after displaying behaviours which may have been indicators of sexual abuse (McKay, 2012).

Faith and belief can also be contributory factors in CSA; in some communities, this may result in children being accused of witchcraft or spirit possession. Tedam (2014) noted that such accusations can be used to force children into being trafficked for sexual exploitation.

Wilson (2016) found that, owing to racism towards Black men in society, Black women were likely to be protective of them and reluctant to accept that they could sexually abuse children. She also observed that Black communities appeared to take a particular view of CSA perpetrated by White males against Black girls and young women: "the individual accountability of [the] abuser is lost and subsumed within collective historical discourses of white supremacy and actual and perceived acts of racism within the present" (Wilson, 2016:180).

3.4 Pressure within families and communities to maintain honour and prevent shame

Our interviewees considered that all children and their families, regardless of their ethnicity, may be deterred from disclosing CSA by feelings of individual shame and stigma. For girls and young women in some communities, it was felt that these feelings are inextricably linked to and amplified by ideas of family/community honour and shame.

"Families talk and say, 'We would never ever go public with this because we can't bring the shame and dishonour onto our families.'"

Observing that women's honour in Pakistani communities is maintained through their conduct and actions (see section 3.2.1), with virginity central to maintaining family honour, one interviewee described how behaviour deemed dishonourable could be regarded by the community as justifying abuse:

"Girls who have [experienced CSA] are [those who have] boyfriends. Our community is then automatically blaming the girls, and [saying,] 'If you didn't have a boyfriend in the first place, you wouldn't get abused.'"

Recalling a case where White British girls were being abused and had spoken out about it, another observed:

"It would have been a lot harder if it was an Asian child speaking out ... with all the barriers that you might have around culture and religion and who these people are ... There is a whole catalogue of things that come with that: the shame, the whole thing around marriage, the whole thing around stigma, you know who these people might be related to ... There is a lot of consequences, there is a lot more at stake ... but I have not seen any discussions around that."

It was suggested that a concern to preserve girls' virginity and so avoid bringing shame on their families could lead to the sexual abuse of boys instead:

“Some people argue that boys are more easily abused in Pakistani communities than girls because, you know, boys are less valuable than the girls in relation to being shamed by a sexual act ... The community leaders often will collude with that because they do not want it to shame the total community.”

Interviewees also observed that children and young people in South Asian communities feel “connected” to their families, who can actively prevent them from accessing services:

“[They] have a different way of growing into adults than maybe your mainstream British culture. And so even the young adults ... at university ... still very much have a connected family home life and that's restricting a lot of disclosures.”

Findings from published research

Research on cultural pressure to maintain honour and prevent shame has focused primarily on the South Asian community, and has identified that concepts of *izzat* (honour), *haya* (modesty) and *sharam* (preventing shame/embarrassment) all play a role in deterring disclosures (Gilligan and Akhtar, 2006; Cowburn et al, 2015; Gill and Brah, 2014; Jassal, 2018).

Harrison and Gill (2017) described how, in patriarchal, honour-based societies, the father/husband is regarded as the head of the family and therefore the defender of this honour – and a family's honour is “maintained through the conduct, actions and social performance of its women”.

In addition to deterring victims of CSA from disclosing their abuse, the fear of causing family shame and dishonour can facilitate abuse, as perpetrators exploit their knowledge of that deterrent effect. The Children's Society (2018a) asserts that “race and ethnicity are not a cause or contributing factor for children and young people experiencing CSE”, but it also notes that perpetrators of CSE may use the idea of ‘honour’ to groom, shame and control young people from Black, Asian and minority ethnic communities.

Research in Birmingham and Coventry on the sexual exploitation of young South Asian women observed similar behaviour in the grooming and blackmailing strategies used by perpetrators, many of whom were also South Asian:

“Perpetrators appear to exploit conceptions of shame and honour, and normative gender expectations of young South Asian women, in order to silence and threaten them.” (Gutierrez and Chawla, 2017:6)

Research has also identified that stigma and taboo around mental health can prevent young people in South Asian communities from accessing support (Gutierrez and Chawla, 2017; Sawrikar and Katz, 2017).

Focusing on Black communities, Kanyeredzi (2014) identified family ‘dignity’ as an issue preventing the disclosure of CSA by an African Muslim survivor, and noted that concepts of honour and shame are critical to understanding why Black Caribbean women find it difficult to speak about their abuse and seek help.



For some girls, interviewees noted, feelings of individual shame and stigma following abuse are amplified by ideas of family/community honour



3.4.1 Removal from the community, or forced marriage, to prevent disclosure

To prevent disclosure and thus preserve family honour, interviewees said, sexually abused children or young people may be removed from the community or forced into marriage:

“Young women, particularly from South Asian communities, wouldn’t get to be known by services because the family and the community would very much try to do everything they can to hide what was going on. We know that young women were moved ... to different parts of the country ... to get away from that situation – yeah, and overseas.”

“Parents might deal with it themselves ... not necessarily going to the police. White families will report this more than Black and ethnic minorities ... It’s to do with shame – self-shame or family – and what happens then if you go to the police ... [I know] some examples of women who live in poverty and rented property, they live with their partners and they’re relying on their partners for certain things ... It’s difficult, it’s not straightforward.”

Acceptance in some communities of the idea of forced marriage was felt to be a facilitator of abuse as well as a deterrent to disclosure. It was noted that CSA can be ‘legitimised’ because the law in England and Wales allows under-18s to marry if they have their parents’ consent:

“They’re forced into marriages and forced into having sexual intercourse without anyone still monitoring that situation ... But the guy, if he’s older, could be done for ... having sex with a minor.”

One interviewee observed that forced marriage could be used to deny people the ability to express their sexuality:

“In the ultra-Orthodox [Jewish] community, no one would ever be able to admit that they weren’t heterosexual ... I know personally people who are gay, who have been ... forced into heterosexual marriages and then sexually abused ... but they can’t tell anyone that they are gay.”

Findings from published research

A variety of research has found that, to avoid the shame of CSA, families may take it upon themselves to manage the situation rather than reporting it to an external agency. This can have a range of harmful consequences for the victim: a cover-up of the abuse, the relocation of the victim and/or their family, and even forced marriage or ‘honour’-based killings (Department for Children, Schools and Families, 2009; Children’s Commissioner for England, 2015; Brandon and Hafez, 2008).

In 2019, the UK Government’s Forced Marriage Unit gave advice and support in 1,355 cases of forced marriage (Forced Marriage Unit, 2020); 12% of these involved victims aged 16–17, with under-16s involved in a further 15%. In 4% of cases involving under-18s, there was a concern that the victim might have a learning disability. Overall, 2% of cases involved victims who informed the Unit that they were lesbian, gay, bisexual or trans; a breakdown of this data by age was not published.

In 2019, under-18s featured in more than a quarter of cases in which the UK Government’s Forced Marriage Unit gave advice and support

Kazimirski et al (2009) pointed out that, in England, forced marriage takes place in families from Africa, the Middle East and parts of Eastern Europe, although the majority occur among South Asian communities. Among the 1,166 cases in 2019 where the UK Government's Forced Marriage Unit gave advice/support and the 'focus country' (the country to which the risk of forced marriage related) was known, Pakistan was the focus country in 48% of cases, Bangladesh in 12%, India and Afghanistan each in 4%, Somalia in 3%, and Iraq and Romania each in 2% (Forced Marriage Unit, 2020).

Among a sample of mostly Indian and Pakistani people in a local community in England, Khan et al (2018) found that 'honour'-based violence was uncommon but had a significant impact on victims' mental health and could lead them to run away from home. Fox (2016) noted that concerns about such violence made sexually abused girls from Indian and Pakistani communities less likely to report their abuse.

For Black families, according to Bernard (1997), reporting CSA "generates fear of reprisals" from the family and the community. This fear can motivate families to prioritise community loyalties "over a young woman's individual decision to disclose, as parents may be frightened of the potential ramifications".

The Children's Society (2018b) identified that boys and young men from some ethnic backgrounds may not disclose their experiences of CSE because they fear that a disclosure would get back to the local community, potentially resulting in 'honour'-based violence or domestic abuse.

Like our interviews, published research has highlighted that fear of forced marriage may make children and young people more vulnerable to CSA. Ward and Patel (2006) identified that teenage rebellion and educational underachievement by young Bangladeshi women could increase the risk of unwanted or forced marriages and family conflict. These might prompt the young women to run away from home and form culturally unacceptable relationships, causing disapproval and conflict within the family and placing them at risk of sexual exploitation; this is explored further in section 5.3.

3.4.2 Ostracisation following disclosure

The fear of being ostracised from or rejected by the community was felt to be a major barrier to disclosure. One interviewee discussed this in the context of the Haredi Jewish community:

"Mesirah [is] the prohibition of reporting things [about other Jews] to secular authorities ... Somebody who does that is called a Moser. And there's a very strong taboo."

In some cases, people who had reported CSA had been ostracised:

"There's a big faith school network. For some in [the Haredi Jewish] community, very often the threat – and it gets carried out as well – is that your children will lose their places in school. And that's not just to the people who do the reporting themselves; it's to anybody who gives evidence to support them."

Another interviewee revealed that the nature of their work had resulted in their children being refused a place in a faith school.

Discussing intra-familial CSA in Irish communities, one interviewee said:

"I have heard stories of people in Ireland – rural communities, you know – people who have disclosed and then they were excluded from the family, including mother rejecting the child or the young adult ... Those stories are not uncommon. That happens because people would rather survive [by not talking about the abuse] than face the reality of the internal dynamics of abuse within the family."

Findings from published research

Research in South Asian communities by Gutierrez and Chawla (2017), Harrison and Gill (2017) and Warrington et al (2017) has identified that disclosing CSA can lead to the loss of family honour within the extended family and community, resulting in the child being ostracised from both.

4. External (structural, societal and organisational) barriers

In addition to the internal barriers identified in Chapter 3, there are a number of external factors – arising from Black, Asian and minority ethnic communities’ perceptions of agencies and service providers, from attitudes and behaviours within such organisations, and from prejudices and inequalities within society – which have a significant impact on children’s access to support services. These include:

- ▶ lack of opportunity to report abuse or access services, for reasons such as poverty and insecure immigration status
- ▶ lack of awareness of support services
- ▶ lack of confidence in and distrust of agencies and service providers.

This chapter sets out our interviewees’ reflections on these barriers.

4.1 Poverty and insecure immigration status

A number of interviewees noted the impact that financial insecurity can have on the disclosure of CSA. Discussing their experiences of working with Black, Asian and minority ethnic communities living in extreme poverty, some explained that it may be particularly difficult to disclose CSA in such circumstances:

“[The] socio-economic setting is very different ... There’s more of a language barrier, they probably all speak Tamil all the time, and I guess socially, economically speaking, working-class and possibly one parent working ... So it’s your basic needs ... you know, paying rent ... and if a child tells in that environment, it’s going to get lost. It’s the basic survival.”

“Poverty ... in Manchester, it’s huge, and I think that is massively a barrier for people. Quite a lot of the Caribbean families I work with, the Asian families ... asylum-seeking families, they literally have very little.”

“If you’re poor, you can have a particular experience of surviving, dealing with CSA. So that may prevent disclosure ... Without doubt, the fear of losing your home, of losing your children. Fear of loss and shame.”

Having an uncertain immigration status was seen as further preventing disclosure of CSA:

“I think that families, when they’ve got no recourse to public funds ... Those children – and those children do tend to obviously come from ethnic minority backgrounds, from Africa or Asia – I would say are high-risk because ... their parents are the least likely to report that their child has been abused. [That’s] because [if] we report it to the police, your immigration status might become an issue, and you could be deported.”

The circumstances in which some children come to and live in the UK may leave them vulnerable to abuse, and less able to disclose it

Findings from published research

Government policy and legislation has been found to affect abuse victims' ability to receive help. A qualitative study on domestic violence with Pakistani women in Scotland noted:

“[T]he UK government's immigration policies have equipped perpetrators with a powerful tool of oppression, making exit out of these relationships even more difficult for migrant South Asian women. Threats of deportation, the high standard of proof required for [the Domestic Violence Rule] and the clause of [‘no recourse to public funds’] that leaves women economically destitute illustrate the failure of such policies to recognise the socio-economic factors that maintain women's place in abusive relationships.” (Mirza, 2016:593)

Bernard and Gupta (2008) argued that many Black African families experience “complex social circumstances” which pose challenges for them and for child protection professionals. These circumstances include the adverse effects of poverty due to low incomes; immigration/asylum issues and their effect on employment and access to support services; and a distrust of state interventions in parenting and family life.

The circumstances in which some children and young people come to and live in the UK may leave them particularly vulnerable to abuse, and less able to disclose it when it happens. In research undertaken by Williams (2018a), members of the Somali community described how children and young people were being sent to live in London to escape the civil war in Somalia. They were often looked after by ‘surrogate aunties’ who used them to attract men to ‘khat houses’ – social spaces such as flats or back rooms in barber's shops, coffee shops or grocery stores where men came together to chew an East African shrub containing a naturally occurring amphetamine-like drug. It was also reported that men were travelling to Somalia to marry child brides, as this was considered to enhance male status within the community.

4.2 Lack of awareness of support services and inability to access them

Section 3.1 described how cultural practices in some Black, Asian and minority ethnic communities can prevent members of those communities from learning about CSA and related issues; such practices can also make it difficult for children and families affected by CSA to know where to find help.

Some of our interviewees, however, felt that support services were not accessible enough:

“There's ... stuff out there people can benefit from and don't, because they don't know it's available.”

One described how counselling services to support people from specific communities were available but not easily visible to the public:

“I know that in the counselling directory ... we've got a Black and ethnic section that we [counsellors] can access, but it's not advertised, it's not made public that it's there ... There's not enough promotion.”

It was also noted that many support services were inaccessible to people who do not speak English fluently, and that a lack of interpretation facilities could be a barrier to use of these services. Interviewees pointed out that, where families did access support, children could be placed in a difficult position by being relied upon to translate between their parents and the service providers:

“In particular [for] Somali families, we need interpreters for meetings and things with parents [when] the young people could speak English, [because the] young person shouldn't be translating.”



Interviewees noted that many support services were not visible to the public, or were inaccessible to people who do not speak English fluently



Findings from published research

Looking at child protection interventions, Chimba et al (2012) argued that – together with cultural practices – a poor knowledge of services (particularly among women born outside the UK) and limited English language skills prevented families from Black, Asian and minority ethnic communities from being able to engage fully with social services.

In a study of young mental health service users, Street et al (2005) found that language barriers and social isolation prevented young people from Black, Asian and minority ethnic backgrounds (and especially young refugees and asylum seekers) from accessing mental health support. Those who did contact services encountered a lack of interpreter services and translated material.

A lack of culturally and linguistically appropriate services, language barriers and limited knowledge of legal rights have all been cited as structural reasons why South Asian women do not report abuse (Belur, 2008; Anitha, 2011; Thiara et al, 2015).

4.3 Lack of trust in agencies and services

Interviewees believed that, overall, Black, Asian and minority ethnic communities were distrusting of statutory agencies, owing to their perceptions and experiences of racism, discrimination, marginalisation, exclusion and a lack of cultural understanding:

“Quite a lot of [South Asian] families had really negative experiences ... and they don't want social services. They didn't want the police crew around.”

“I think a lot of [young Black people] feel that you're part of the system, especially if they feel you're from social services. So you're part of the problem, you know ... 'What [are you] actually going to do to help and support me?' ... Before you've actually sat down and tried to resolve anything, all of those barriers are there. We know that young Black people, people of colour, are more likely to be stopped and searched than the others ... They recognise all of these things are out there for them already. So, there are all these barriers that they have to cross before they start.”

“[Black male victims/survivors of CSA faced challenges] particularly in terms of their relationship with the police. There was a hesitancy to even contact the police for their own safeguarding issues.”

“People [from the Haredi Jewish community] are experiencing an enormous amount of shame and difficulty navigating not just sexual abuse, but also just trusting people outside their own ... community ... There's this fear that you won't be treated fairly because of anti-Semitism.”

Experiences of discrimination, marginalisation, exclusion and lack of cultural understanding were felt to create distrust of statutory agencies

This distrust could also affect their engagement with voluntary-sector providers of support services:

“I remind my workers, ‘Although we’re not a statutory body, some people, depending on their lived experience, may still see us as part of the establishment.’ ... We also need to be mindful that [this] creates a power imbalance immediately.”

There was felt to be a link between levels of distrust and the length of time people had been living in the UK:

“Some communities who have been here for a lot longer might be a lot more distrusting of some services, whereas some who’ve only just come here may be a lot more open.”

It was noted that some victims and survivors of CSA might not be confident of receiving support from anyone from a different ethnic background:

“From the client’s point of view, they probably think, ‘Would you understand?’ ... That’s okay [and can be addressed once] the client comes through the door – it’s getting them through the door.”

However, the same interviewee – a Black Caribbean male – acknowledged that access to professionals from the same ethnic background might not be enough to overcome other barriers to disclosure:

“I’ve had very little experience of people coming to counselling from a West Indian background ... They don’t speak about it ... In the 10 years, that I’ve been counselling, I think I’ve counselled one or maybe two people from a West Indian [background].”

Furthermore, it was pointed out that some people prefer not to use services staffed by professionals from the same community:

“I have always been a supporter of specialist services that are culturally led. The issue is that every time I mention that, [the reaction] from those different [communities] is, ‘Oh no, I don’t want that.’ What they want is White-led services ... We’ve had people from [South Asian] backgrounds ring us and we’ve suggested going to services that might be more culturally positioned for them, and they’ve turned around and told me, ‘No, we won’t go over there because we’re terrified of that being leaked into the community.’ ... They think White services are safer because they don’t face the risk of [exposure]. They don’t trust the workers within those services, where they exist (and they’re very rare).”

Reasons for Black, Asian and minority ethnic communities’ distrust of agencies and other service providers are explored in more detail in Chapter 5.



A link was identified between the length of time that people had been living in the UK and their willingness to trust agencies and services



Findings from published research

Gilligan and Akhtar (2006) found that the under-reporting of CSA in South Asian communities was caused by fear about how agencies would respond. Harrison and Gill (2017) identified reasons why South Asian women rarely reported CSA, including a lack of trust and confidence in the police and a perception that police officers were men.

In a study interviewing children and young people from a range of ethnic backgrounds, some participants noted that their communities already faced racism and said that the desire not to expose them to further criticism might be a barrier to disclosure of CSA (Warrington et al, 2017). Gutierrez and Chawla (2017) identified this as a concern for young Muslim women, “especially at a time when Islamophobia and xenophobic violence towards Muslims is on the rise in the UK”.

Bernard (2001) argued that an understanding of CSA in Black communities must be grounded in an awareness of how racism and the state apparatus reproduce the ideology of ‘inferior’ Black families. This can militate against disclosure, and children and young people who disclose may feel that that they have betrayed their families. Wilson (1993) reported that young Black people may be more reluctant to approach services because they may encounter negative stereotypes regarding them and the abusers.

Furthermore, discussing CSA outside the family raises fears of invoking racism and being negatively judged by a White society (Bernard, 1997). Discussing the role of Black mothers, Bernard (2001) and Bernard and Gupta (2008) suggested that the negative representation of Black families and the focus on “mother-blame” may influence their decision whether to seek help following CSA in the family.

Uncertainty about and distrust of services may lead young people and their parents to seek support within their community first (Children’s Commissioner for England, 2015; Gutierrez and Chawla, 2017).

A study of mental health services highlighted the importance of service users being able to choose the gender and cultural background of the professionals who would work with them, but identified that this choice was lacking:

“[S]ome young people want someone from their own culture and others do not, for fear of someone from their own community hearing of their problems. A lack of younger staff from BME groups probably deters some young people, who do not feel able to talk about their difficulties with older members of their own communities.” (Kurtz et al, 2005:5)

Uncertainty about services may lead young people and their parents to seek support within their ethnic community first, research has found

5. Lack of cultural understanding in statutory agencies and service providers

The professionals interviewed in this study provided examples of ways in which statutory agencies (including the police, social services and schools) and service providers have displayed behaviours based on culturally insensitive attitudes towards people from Black, Asian and minority ethnic backgrounds.

This chapter explores those behaviours and attitudes, which include:

- ▶ adopting a ‘one size fits all’ approach which does not recognise or take account of cultural issues and experiences
- ▶ making casual assumptions (whether consciously or unconsciously) about people based on racial, sexual and cultural stereotypes, rather than considering their individual circumstances and views
- ▶ not challenging inappropriate or harmful views/behaviour expressed within Black, Asian and minority ethnic communities, out of a concern to be culturally sensitive.

Most of the examples provided here relate to statutory agencies, but they also affect voluntary-sector service providers in that some service users and potential service users will consider all agencies and service providers to be part of the same establishment (see section 4.3).

Lack of diversity in the workforce

While most of our interviewees were from Black, Asian and minority ethnic backgrounds, it was recognised that the workforce of many agencies and service providers was not as diverse as the communities these organisations need to be serving. Some interviewees felt that racism and unconscious bias were pervasive because of this lack of diversity:

“You have all sorts of issues where people go to services that, you know, are [staffed by] White therapists and have no idea what they’re dealing with in relation to the underlying deep cultural issues which are live in cultures that have migrated to this country over the last 50 years.”

Referring to her work with a young Black man who had experienced CSA while in a gang, one interviewee recalled how White professionals tended to criminalise Black boys and young men rather than seeing them as victims needing support:

“I was there to see if we could work [with] this young man, and I remember raising [the possibility of a referral to specialist CSA services] in a meeting. I think the trouble is, even though [it’s] a very multicultural borough, the managers at the top [are] still very White ... It’s still kind of been falling on deaf ears.”

Interviewees felt that materials available to professionals had been developed for White children, with little adaptation for other ethnicities

Lack of evidence to build good practice

Interviewees identified a paucity of empirical research reporting the experiences of children and young people from Black, Asian and minority ethnic backgrounds who are affected by CSA, on which good practice could be built. They also considered that materials available to them had been developed for White children, with little adaptation for other ethnicities:

“I don’t think that there is anything specific.”

“The majority of all therapeutic models that are used in this country are from a western or European ideology ... It’s almost, you can’t find research about young mixed-race boys and their experiences of being sexually abused, how it impacts them [and] their identity formation.”

“I’m a Black girl who’s lifting my own experiences, but also, we have our practice experience but there’s nothing, there’s not a lot to back us up academically – no universal approach.”

Furthermore, it was felt that such materials rarely focused on the sexual abuse of boys and young men:

“Most films, most resources [are] about a woman that is being sexually abused ... Boys are equally sexually abused. They don’t know how to disclose.”

Interviewees said there was a lack of CSA ‘survivor accounts’ which children and young people from Black, Asian and minority ethnic backgrounds could identify with, and which might empower and encourage them to seek support from services.

“When we see those stories around CSA, it’s often focusing on those sorts of big cases and we don’t see ... like, Black and Brown victims, survivors.”

5.1 Failure to recognise and take account of cultural issues and experiences

Some interviewees felt that statutory agencies cannot effectively support children and young people from Black, Asian and minority ethnic communities who are affected by CSA, because a lack of cultural understanding leads to an assumption that the issues and pressures they face are no different from those of their White British counterparts.

One interviewee who worked in a domestic violence service recalled having a case of CSA referred to her simply because the girl involved was from her own ethnic background. Furthermore, the referring social worker had shown no understanding of the cultural issues in the case:

“I asked the social worker what support she was giving the girl, and her response was, ‘I’m not ... I referred her to you.’ ... And then the next thing she said is, ‘We obviously need to get the parents involved.’ And I said, ‘You are not listening.’”

Another had worked with a survivor of CSA who felt “let down” by the police when she disclosed her abuse:

“She said they came across as very insensitive. I think a lot of the time they struggle to understand minority backgrounds ... I mean, a lot of the ultra-religious Orthodox [Jewish] community don’t even understand what sex is, what rape is, what consent is. And the police ... can’t understand [that members of that community] possibly couldn’t know what sex is at 25 years old ... [Survivors of CSA] can’t make these allegations without other fallouts within the community, being cast out of the community, and so sometimes people are nervous about going to the police, and the police don’t really support them because it is a slightly harder case to deal with – I think [the police] almost give up on them because they come with a lot of baggage.”

A further example related to the school environment:

“Some young African boys maybe might not make eye contact with an adult, and for them it’s a respect thing at home. However, schools are [not] seeing it that way ... The language of the head teacher when she posted her response [was] ‘I’ve learned how to do that [and the] Black boy should be able to do the same.’ And to me, that’s a bigger conversation to be had.”

One interviewee described the challenges faced by the families of victims and survivors of CSA from Black, Asian and minority ethnic backgrounds as they go through the criminal justice system, but noted that they endured this “because they are desperate to see justice for their child”:

“[From] the few cases that have actually gone to trial [and have] been through mainstream services ... people who have gone through these experiences have always expressed how the lack of empathy, the lack of understanding, the sheer ignorance, the attitudes that they face ...”

A lack of specialist services for a number of minority and marginalised groups was identified:

“We don’t have many services for CSA which specialise in any of these unique experiences of young people, be that for Black and Brown people or for LGBTQ young people. Inevitably they’re sent to generic services and spaces.”

What does published research say?

Research has highlighted a lack of understanding within services about the experiences and specific needs of children and young people from Black, Asian and minority ethnic communities, which acts as a barrier to their accessing support (Harran, 2002; Thiara et al, 2015; Berelowitz et al, 2013).

Exploring responses to the sexual exploitation of young South Asian women in Birmingham and Coventry, Gutierrez and Chawla (2017) observed that services in the statutory and voluntary sectors were not structured in ways that support effective engagement with families. Noting “the complexity of CSE and how it plays out in local contexts”, they highlighted specific challenges and opportunities around:

- understanding the role of shame, honour and community dynamics in disclosure and support
- supporting young South Asian women who are highly supervised
- balancing responses to CSE with protecting women from honour-based violence and forced marriage.

Discussing the role of race and ethnicity in safeguarding in response to increasing diversity in the UK, Bernard (2018) argued that the way professionals engage with a caregiver’s family affects the family’s experience of the child welfare system; she identified “a lack of critical assessment of race, as well as a lack of a critical look at the role that religion and culture play in the lives of minority ethnic families”.

In a study of mental health services, Kurtz et al (2005) noted that staff might “not fully appreciate ... or know how to work with” the fact that young people’s experiences are strongly influenced by the views of their parents, communities and peer group.

Guidance on responses to CSE from The Children’s Society (2018a) advised that professionals should be aware of the vulnerabilities of children and young people from Black, Asian and minority ethnic communities, the barriers to disclosure they face, and how these intersect with socio-economic disadvantage, gender and immigration status.

Other research has focused on inappropriate professional responses from statutory and voluntary agencies, including high levels of stereotyping and racism (Izzidien, 2008).

5.1.1 Cultural issues around disability and ethnicity

Among the interviewees who had direct experience of working with disabled children and young people, discussion focused on CSA victims or survivors with learning disabilities. These were considered to face additional barriers to disclosing their abuse, as well as barriers to being believed and heard when they had disclosed:

“Survivors with autism are more likely to disclose but less likely to be taken seriously ... You’ll find the people with autism have disclosed multiple times before they are heard.”

“With disability, especially vulnerable young adults who are non-verbal ... I think you have a huge problem. Black children with autism ... would really struggle ... and someone in the South Asian community that doesn’t maybe have the right support in place and doesn’t have the right knowledge.”

“Disability is definitely a factor as well, especially in adults ... We have a lot of people with learning disabilities who cannot explain what’s happened to them ... they don’t know that what has happened to them is wrong...And trying to get that to the police ... the victim has to explain to the police. We have a lot of intermediaries who can help in different ways to try and get them to explain what’s happened. It really depends what the disability is.”

One interviewee explained that she worked with an autistic girl whose parents had taught her the ‘underwear rule’ that no one should touch her private parts. However, she had taken that literally, not understanding that she should not be asked to look or touch anyone else’s private parts either, and her abusers had been able to exploit this.

Findings from published research

Bernard (1999) discussed how the intersecting categories of race, gender and disability compound the challenges faced by Black children and young people who have experienced CSA. She argued that race intersects with disability to form a particular experience of CSA for children with learning disabilities, and that this experience is under-recorded in data on prevalence as well as in research recording the experiences of disabled children and young people. Noting that Black disabled children may also encounter “hostile” and culturally insensitive child protection services, she called for practitioners making assessments to acknowledge the intersection of race and disability for Black children in their experience of CSA, in order to provide an empowering, non-stigmatising service.

A briefing paper from the charity Include Me TOO (2007) identified a number of barriers and difficulties experienced by the families of disabled children and young people from Black, Asian and minority ethnic backgrounds in relation to safeguarding. Many of these – such as a failure to provide translations of health and social care information, and a lack of sensitivity to cultural and religious needs – may be encountered by anyone from these ethnic groups when accessing services, but families of disabled children are likely to find them particularly challenging.

Research has explored how race intersects with disability to form a particular experience of CSA for Black children with learning disabilities

5.2 Racism and unconscious bias

Interviewees discussed the salience of racist dominant narratives and stereotypes of Black, Asian and minority ethnic groups – which circulate within all aspects of society – to the delivery of services and support for children and young people affected by CSA:

“It’s that ... institutionalised thing. We will look at the schooling as well. There’s so many schools ... [I am] taken aback by the staff teams ... they’re all White, middle class, in their twenties, you know ... Not all of them are going to hold preconceived notions [but] maybe [they are] thinking that this is what ... happens to this community ... you know, the young girls would be approached by older boys, and [the staff would think] it’s acceptable for this community to get married earlier.”

“I think a lot of it is a form of confirmation bias, like, ‘Well, the media has said this about Black families so I’ve now seen the case of it come through, that must be true,’ or, ‘I’ve heard stories about this ... therefore it must be true.’ I do think that there’s a lot of that. Some of it is, you know, shortcuts ... making assumptions about families and not necessarily fact-finding because they don’t have the time ... to actually go and dig deeper and explore and understand what that means.”

“Children who are from different ethnic minorities, specifically Black and Asian children – I think that sometimes there is this thing [where] they are not always seen as being victims ... That might be a subconscious thing, but I just feel that there are those barriers ... Maybe if it was a White child, the response would be different.”

This was considered to occur at every level:

“So many families have spoken to me, not just in [the context of my current work] but even when I did social [work] ... about the barriers to accessing support, because it seems punitive – and in fact because racism is rife and systemic and endemic ... It’s written into policies, procedures, law. People who are [from] the majority benefit from that [and] anybody who’s not in the majority does not benefit, so that immediately acts as a huge barrier.”

“[From] the person making the referral, the person recording what those concerns were, the social worker going out to the home, making decisions, the management who are challenging or not challenging those decisions, to [child protection] chairs, to the [independent reviewing officers], to the panels, to the judges, there is no one part of the system that is exempt ... Our policies, our legislation, the guidance, every aspect of it is biased. [Until] we begin to unpick what that means and how it impacts upon people and how there is actually inherent bias built into the system, we will continue to have those ... statistics.”

Furthermore, it was believed to occur even among social workers from the same ethnic group as the children and families they were working with:

“If they are looking at an Asian family [from their own community], their bias may be, ‘This is just part of the culture, this is what we do,’ and [they] begin to soften [or] minimise whatever the concerns are because it is just part of the culture. [Or they may have the view that] it is not that bad, like, ‘I have lived through it.’”

It was noted that bias could be unconscious, although one interviewee commented:

“It’s racist whether it’s unconscious or conscious.”

Findings from published research

With respect to CSE in particular, Ward and Patel (2006) identified that the dominant discourse had centred on young White women. Since then, high-profile cases in Rochdale, Rotherham, Peterborough, Oxford and Telford have increased awareness of CSE, but reporting of these cases has focused on Asian (mostly Pakistani) men exploiting White girls (The Children's Society, 2018a).

Berelowitz et al (2013:5,56) believe that victims are still not being identified, owing to "alarming resistance to the recognition that victims come from all ethnic and religious groups, as do the perpetrators ... We have heard myths that only white girls are exploited and as a result we have evidence of black and minority ethnic victims being ignored."

Thiara and Roy (2020) raise the issue of professionals not only assuming who can be a victim, but also interpreting young women's experiences of sexual abuse solely in terms of 'cultural' forms of violence such as forced marriage.

5.2.1 Assumptions about girls and young women

Interviewees noted how professionals commonly assume that some girls and young women are capable of being victims while others are not, based on their ethnicity:

"There's a sort of an assumption of young Black girls' sexuality and [a different one for] Pakistani girls. [There are] assumptions made about their sexual choices and sexual behaviours, even though they're both young people ... racist assumptions which are held about both groups. [This] means that inevitably we miss the mark on providing a true holistic service because we make assumptions that it's one particular group who experience CSA, one particular way, but we completely ignore other groups."

"Particularly with CSA, young Black women, [and] Asian women [who are] seeing older [boys, are regarded as] not having the same innocence as maybe a young White girl ... so [they are] not even being believed."

One recalled professionals' reaction when girls and young women did not conform to these stereotypes:

"[Victims] were treated differently because they weren't deemed to be the typical South Asian young woman ... They were missing at night, they were truant from school, they were drinking, they were using drugs, you know. There was definitely an element of ... not knowing what to do with this group of young women."

It was widely felt that the dominant narrative of Pakistani men as perpetrators and White girls as victims of CSA overlooked the experience of Pakistani (and other South Asian) girls and women:

"Disproportionately we see Pakistani men being labelled as perpetrators, which is just not the reality of what happens, and there was a lot of discussion around that time about, you know, 'They don't do it to their own,' ... which is a lie because we know that ... Pakistani girls will also [be] sexually abused ... But that muddies that sort of dominant narrative [so is disregarded]."

“Assumptions are made ... you know, if you see an Asian man pulling up outside a school and picking a White woman up ... If an Asian man picked an Asian woman up, nobody would bat an eyelid.”

“Currently the narrative is that all CSE is basically conducted by Pakistani men against White girls. In 2003 when that was happening in Keighley, you’d sit there with all the great and the good and they’d tell you, ‘The answer to sexual abuse basically ... it is all situated in one community, in one part of town, and if they can sort that out it will all disappear.’ You kind of sit there, you look at them and say, ‘It’s a bit more complicated.’ It’s a very significant cultural phenomenon that’s going on there, but in no way does it represent the majority of sexual abuse ... They are constantly looking for the bogeyman ... basically it is the stranger danger. [CSE] also happens in White estates where people are grouping together; it’s different because the networking is different, but you know it does happen ... But that is hidden, no one mentions that.”

Recalling the rape of an Asian girl by Asian perpetrators who claimed they were preserving her virginity (see section 3.2.1), an interviewee observed:

“Her story never made the papers because the press is not interested in Asian victims.”

Two interviewees referred to the Independent Inquiry into Child Sexual Exploitation in Rotherham (Jay, 2014), and subsequent publicity which focused on White girls as victims and Pakistani men as the perpetrators:

“The Jay report had a massive impact in Rotherham and I, like many Muslims, was at the receiving end of it ... All we had been told was there were 1,400 victims, and those victims were all White ... All the xenophobic, Islamophobic, racist attacks that were happening, we just took it silently because the report said it was 1,400 women, girls, and it was mainly Pakistani men. As a community we did not retaliate, we didn’t challenge it, we just took it ... People were really demoralised.”

They were aware that Muslim girls were also victims of the abuse:

“[Someone at a conference had stood up and said that] approximately 120 of those children were Muslim children. [It] was like someone had dropped a bomb in that room, because it erupted ... That was a defining moment for me, because prior to that all I was hearing was that this community knew about it, were in on it ... I couldn’t relate to any of that ... I didn’t know it was a thing, I didn’t even know what grooming was before that and I had done years of youth work ... We’d heard things but there was no word for it ... There are victims from all communities, and we need to be vocal about this to challenge some of that narrative.”

They had taken action to highlight the plight of these girls:

“We were saying, ‘Look, we know of cases within our communities – for example, of child sexual exploitation. Yet nobody’s talking about them. So Muslim Women’s Network did the report ‘Unheard Voices’ ... We contributed a case study.”

However, they encountered racist attitudes from the media:

“I did 30 different interviews, TV, radio ... journalists from the UK and abroad as well. I was shocked because, out of 30 interviews that I did, [all except] one of the journalists, their questions were ‘What was it about your community, what is it about you being a Muslim, about being Pakistani that meant you knew about these men and you kept quiet?’”



Professionals were thought to make assumptions about whether girls from different ethnic groups were capable of being victims of CSA



Findings from published research

Sharp (2013) argued that only some types of risk for young women from Black, Asian and minority ethnic backgrounds are identified:

“[W]hilst ‘honour based violence’ is commonly recognised as a risk related to running away, the risk of CSE remains unnoticed ... practitioners fail to consider the intersection of age, gender and ethnicity lead to particular experiences for Black and minority ethnic runaways which, when mediated through wider systems of inequality, result in high levels of vulnerability to CSE.” (Sharp, 2013:96)

In response to the Independent Inquiry into Child Exploitation in Rotherham (Jay, 2014), the Muslim Women’s Network published a report highlighting that Asian children and young people were also being abused (Gohir, 2013). Nevertheless, Gutierrez and Chawla (2017) observed a widespread opinion among professionals that Asian children and young people are not sexually exploited, because it is perceived that their families exert greater control over their whereabouts and they are more respected than White girls by Asian men.

Professionals working in services to support victims of sexual violence from Black, Asian and minority ethnic backgrounds told Thiara et al (2015) that they considered young women under immigration or asylum control to be more likely to encounter victim-blaming attitudes from wider statutory agencies.

5.2.2 Assumptions about boys and young men

Cultural assumptions often led professionals to criminalise boys and young men from Black, Asian and minority ethnic backgrounds, interviewees said:

“Some professionals who aren’t used to working with inner-city children, or [those] from a BAME background ... without knowing, they have already labelled that person, and therefore that young person may not either be offered the same [support]. Or they might get the gun question ... Because he happens to be [a] boy ... it’s an automatic kind of assumption [of gang membership] ... You would think they were talking about men, not young boys, and I think that is how society sees Black and Asian young men of varying backgrounds as well ... Let’s say I get a referral and mum has concerns that this other young person [is] smoking cannabis, you’ll see what the school’s officers are asking them ... The school’s officers are asking only the Black boys if they’re part of a gang.”

Similarly, the terminology used in referrals when talking about young Black males was considered more negative than that used for their White counterparts:

“I see ‘aggressive’, ‘angry’, ‘disruptive’ [as terms used] to ... describe their behaviour or their presentation. They are more likely to have been suspended or excluded from mainstream class ... Whereas the language used for boys of non-BAME communities is more ‘He’s boisterous,’ or maybe they would use terms like ‘has been more aggressive’, [but] placed ... within a wider broader context. It’s not ‘that angry little Black boy’. That’s how it tends to come across when you are reading referrals.”



Interviewees considered that male victims of CSA from some ethnic backgrounds were particularly unlikely to come to services’ attention



Interviewees recognised that boys and young men experienced CSA, but observed that few were accessing services. While acknowledging that male CSA victims of all ethnicities tended to be overlooked, they felt that this was especially true of those from certain ethnic backgrounds:

“I was [working in a London borough] ... with Black men, some Asian men, as well as young boys from Turkish backgrounds, Eastern European backgrounds and everything else ... It was disheartening at times just in terms of how [with] young men, particularly young Black men [from socially deprived backgrounds], it wasn't really noticed that [they] can be groomed to be in a gang ... It was just criminalised ... because it was a young Black boy.”

When young males came to the attention of services, this was usually because of their behaviour (such as drugs and alcohol offences, or harmful sexual behaviour) rather than because it was thought that this behaviour might indicate they were victims of CSA. Some interviewees explained that a CSA disclosure would often be made once a service had worked with a young male referred because of his behaviour:

“[With] harmful sexual behaviour, ... a lot [more] younger men come to those services than young women. But when you look at their history, not all by any means, but a majority will have been sexually abused.”

“There is a big lens now on criminal exploitation, county lines, all that kind of stuff, where I think young men from BAME communities are coming through as referrals ... We [might] find that actually a lot of those young men are also being sexually exploited or have potentially been sexually abused, which is then putting them in a vulnerable position to be targeted for CSE.”

One argued that CSA within a gang could go unnoticed:

“[In the] majority of referrals that we see coming through, young men will use sex as a control mechanism ... We know that young men are made to carry drugs ... in body parts ... It's a different form of sexual abuse, but you need to be looking at it in the widest context and we also know that lots of young men are gang-affiliated. So ... being young men, not just [a] White young man, [they] will be asked [to] perform sexual acts as part of their initiation into those gangs, which potentially will never be seen as CSA or CSE. It will just be seen as part of what happens in this gang.”

Ideas of masculinity could also result in cases of CSA being ‘written off’ when the abuser was a woman:

“We are beginning to hear some things coming through about the targeting of boys ... Somebody I know who works in the community approached me and said, ‘I've got a man that was groomed by a White woman, and you know what, he's gone to statutory services and said, ‘I'm being groomed by a White woman.’ [But they said,] ‘It's you Pakistani men that are doing it to the White women, you know, is this some kind of joke?’”

Findings from published research

Research has found that, when children and young people from Black, Asian and minority ethnic backgrounds are identified in relation to CSE, this is usually in the context of their involvement in peer-on-peer exploitation within a group or gang:

“This suggests that BME young people are criminalised and therefore not seen as victims, which in itself is problematic and impacts on appropriate safeguarding responses, reporting measures and the overall support children and young people receive.” (The Children's Society, 2018a:3)

5.2.3 Assumptions about potential perpetrators of abuse

While the stereotype of Pakistani men as perpetrators of CSA is a common one, interviewees also reported circumstances in which – in contrast to the criminalisation of some victims of CSA from Black, Asian and minority ethnic backgrounds – perpetrators of abuse were not suspected by professionals because their religion was viewed as “peaceful”:

“Sometimes professionals will have this perception that Buddhist people are really good ... ‘They’re really nice, and maybe they don’t understand the culture in England.’ ... Because they are a monk and they wear these robes and there is this thing around humility, non-violence ... people including the police and some of the other professionals were very sympathetic towards this person who was a Buddhist, when children have said, ‘This is what he did to me.’”

5.2.4 Assumptions about victims’ families

According to one interviewee, some professionals might assume that the families of CSA victims and survivors from Black, Asian and minority ethnic backgrounds might have been covering up the abuse:

“If a child has disclosed and they come from a BAME background, the response from the establishment – social services and the police – tends to be more heavy-handed ... [There] might be more scrutiny of an Asian family ... You may see that social services are more questioning or curious or not believing when an Asian mother says, ‘I didn’t know, had no idea that uncle was doing this.’ [Their attitude is] ‘What have you done to protect your children?’”

Several interviewees thought that White British families received a more positive response from frontline services – a response that might be linked to class and wealth as well as ethnicity:

“I used to work in one particular borough, like a lot of the boroughs in London, high levels of deprivation ... I would get referrals from wealthier White families, and the response from social care and from the ... police would be so much more friendly, professional, engaging, positive, and also better quality at times, because they knew that they would have been held to account – they knew that the parent or parents would come to child protection meetings with a lawyer friend, [who would] be cross-checking everything that was said. However, [there was a different] safeguarding response given to a poorer family who didn’t have that social capital, [the] Black and Brown.”

“There may have been a different outcome if this child was [from a] different background, different race, different school, different postcode.”

“I do feel from some agencies there would be a reluctance to kind of really pull out all the stops ... naturally it is easier if you’ve got a parent or family that just speak the same language.”

Some professionals might assume that the families of CSA victims in certain ethnic communities had covered up the abuse, it was said

5.2.5 Resistance to admitting unconscious bias

Interviewees felt that unconscious bias needed to be addressed and challenged directly:

“Those people who are serving the community are coming into contact with different cultures, different identities all the time. But [I] don’t think that [contact alone will] slowly solve racism ... There’s a lot of work to be done around, like, checking your biases.”

However, frustration was expressed at professionals’ response when the subject was raised.

“It’s always shut down whenever you bring up race, whenever you bring in culture, whenever you bring in the biases within the language being used to describe certain groups of people, and that’s the biggest challenge. It feels like, ‘Oh, you’re talking about it again. Oh, here we go again. Oh, this isn’t a factor. Oh, but you know, it’s safeguarding.’ And I’m [saying that] in all the safeguards we need to understand how all these things are at play.”

5.3 Reluctance to challenge attitudes and practices

While interviewees pointed to a lack of cultural awareness among some professionals, they added that a well-meaning desire to allow for cultural differences combined with ignorance of specific cultures could result in other professionals not taking action in cases where they should do so:

“The police and social workers, if they don’t necessarily understand the culture of that particular community, are very frank and do [not want to do anything] that might be seen as racist. We certainly had cases where children’s social services have not wanted to intervene [in] some parenting practice because parents of that child say, ‘In our culture we do this.’ ... There has been a reluctance in some cases to say, ‘Well, actually, regardless of what culture you come from, that’s not acceptable behaviour.’”

Recalling the case of a female South Asian teenager who had been sexually abused, one interviewee reflected that she had not questioned the idea of the girl’s mother attending support sessions with her:

“She was there with her mother and I ... felt, ‘That’s the culture,’ ... [but] you’re not taking into account that, maybe, if her mother knows the extent of the assault, she’s going to go home and experience abuse.”



While feeling that unconscious bias needed to be challenged directly, interviewees said the discussion was ‘shut down’ whenever they tried to do so



Findings from published research

Practitioners have reported a lack of confidence in working with families from Black, Asian and minority ethnic backgrounds (Qureshi et al, 2000; Chimba et al, 2012). Fear of “being viewed as culturally insensitive or racist when investigating concerns of abuse” may lead professionals to not intervene or act as they would if concerns arose in other communities they more commonly work with (Gutierrez and Chawla, 2017).

Reporting on a project that supports young Bangladeshi women experiencing or at risk of CSE, Ward and Patel (2006) asked whether the “fears of intrusion into cultures that are different from the dominant culture can hinder effective intervention at an appropriate stage”. They argued that the dominant view, embodied in official social services policy, was that a child is better off within their own family; this meant that intra-cultural tensions, such as may arise where izzat (honour) is at stake, were seen as a ‘clash’ of cultures between traditional parents and more ‘westernised’ children, and were interpreted as an internal family matter rather than a safeguarding issue. Referrals to specialist services were thus delayed:

“By the time they presented to the project, their problems and needs were immense, requiring intense specialist time, culturally sensitive mediation and significant resources.” (Ward and Patel, 2006:347)

Berelowitz et al (2013) described how children and young people’s perception of their needs differed greatly from professionals’ understanding of those needs, and this “contributed to children and young people slipping through the net”.

Harran (2002) discussed the difficulties that social workers have in understanding diversity, and how cultural sensitivity affects the safeguarding interventions they put into place to protect vulnerable children. In a study of a range of support services, Thiara et al (2015) observed that such a lack of understanding “stemmed from an excessive focus on ‘culture’” and a view that sexual violence was ‘normal’ in Black, Asian and minority ethnic communities; staff cited a lack of training as a reason for not being able to address issues affecting those communities.

A desire to allow for cultural differences, combined with ignorance of specific cultures, was felt to result in action not being taken when it should

6. Overcoming barriers: working with professionals

While the examples of poor practice and poor support described in the previous chapter indicate that there is a significant and urgent need for change within agencies and other CSA services, the professionals interviewed for this study also identified key actions that could lead to better practice and better support.

6.1 Increasing diversity in the workforce

Interviewees believed that having a diverse workforce can enable organisations to attract a wide range of service users, break down language barriers, and develop an understanding of different cultures.

“I feel that the staff actually reflect the community which we see. So, we do have quite a large number of ethnic minorities within our service – we have Asian people, Black people, White people.”

“Languages, you know, this is massively important. In order for young people, and for adults, the parents [to engage with us], we need to have multilingual people ... including signers [for deaf people].”

One interviewee said she had been employed by a service because it recognised that, despite the diversity of the town, children and young people from Black, Asian and minority ethnic communities were under-represented among its service users. It was hoped that her presence would enable outreach to these communities:

“They were ... quite open and honest about the fact that they’d been around for so long and never had a single BAME child walk through their doors to access their services. So, I came on board ... as a community engagement worker ... to go around and make connections with the communities and raise awareness on CSA and CSE, get people to talk about the issues, raise parents’ awareness.”

Others explained that an ethnically diverse workforce helped them to support a wide range of children and young people who had been affected by CSA:

“I feel like I understand the nuances within the Caribbean context to some extent. I understand that that’s where we’re different to ... West African [communities]... [And how I engage with Caribbean service users is] so different to the way that I would work with a White Irish woman. It just depends on different cultural needs.”

Recalling a young Bangladeshi girl who was being groomed and abused by a White British male, one interviewee considered that a White therapist might not have been trusted in such a case:

“I have five workers who identify as White British and I have two workers ... of the BAME communities themselves. When I first came [to the role] some people were not thinking about the whole lived experience for a child, how it feels to be ... minority, and the discrimination and oppression and trauma that can be caused by just existing, then compounded by the fact you’ve been targeted and abused.”

A diverse workforce was said to help attract a wide range of service users and develop an understanding of different cultures

It was noted, however, that people from the same ethnic background might not necessarily be considered part of the same community. An interviewee who worked with Haredi Jews explained that, although she was Jewish, survivors of CSA from that community were reluctant to speak to her:

“They actually asked my colleague ... because she was from that community and therefore they know her, they trust her and their people are willing to disclose to her ... whereas I could be anyone. So I have struggled a bit with that.”

Another interviewee observed that some people will not want to seek support from someone from the same ethnic community (see section 4.3). They added:

“The principle is having well-meaning White people working with ethnic minority communities ... but I will still make mistakes so you need to have a mix and, if necessary, perhaps services that are run by people who really understand it ... Are you listening to people that are talking to you, and are you constantly reviewing your own practice and your own kind of sense of what you are doing, really?”

Findings from published research

Gutierrez and Chawla (2017) suggested recruiting frontline workers from Black, Asian and minority ethnic communities, using culturally relevant language and discourses to convey information and resourcing outreach support within communities. To make a significant impact, such workers will require access to support, training and development, and routes to progression.

6.2 Addressing unconscious bias

It was notable that none of the interviewees had received diversity training, but there was a general belief among them that professionals in the field lacked training around cultural competency and unconscious bias, and that this would be valuable (see section 6.3). All considered it important for professionals to be cognisant of cultural nuances of the communities they serve and the priorities for those communities' children, young people and families affected by CSA.

“Maybe unconscious bias training needs to become mandatory.”

“You need your practitioners to be self-aware or you need a manager who is going to make people be more self-aware. Think about power and oppression and [practitioners'] own gender, religion, race, ability, class, culture, ethnicity, education level, sexuality, spirituality – you are making them think about all of those things before they interact with a family. So, for example, if you are a White British worker and you're going into a BAME family, you must acknowledge and name [abuse, and] be curious.”

“[It's about] creating scenarios or making sure that they are nuanced. So, we're talking about female perpetrators as well as male perpetrators, we're talking about same-sex relationships and the violence that happens ... [We] make sure that any sort of debates that we're having, ... [in] group work settings, you know, address some of these issues which exist.”

Findings from published research

Bernard (1997) argued that a key challenge is how to frame the experiences of African children without reproducing stereotypes. Exploring how race, culture and ethnicity are addressed in serious case reviews for Black children, Bernard and Harris (2019) pointed to a “lack of professional curiosity in understanding the salience of race in children's lives” and recommended “a critical interrogation of how race, ethnicity, gender, class, religion and immigration status converge for Black children in their intrafamilial and extrafamilial environments”.

6.3 Developing cultural competency

Interviewees who were not from the same ethnic background as their service users said that making an effort to learn about the service users' culture enabled them to provide better support:

"I let them teach me about their background, their culture, their story, and I think that's really important, no matter where they're from ... Otherwise you can have some quite stereotypical views of how that might be for them."

One who was supporting a male Sikh survivor of CSA explained that, although they did not understand the impact of what the man was going through after disclosing the abuse, they were able to build an instant rapport with him by indicating what they did understand about Sikhism:

"[I told him,] 'What I do know about the Sikh community is that it's a warrior culture – that it is about bravery, it's about integrity, it's about being noble, and you've done all that ... and you should remind yourself about the nobility of what you've just done.' And you could hear him just visibly relax ... It's not going to take away the difficulties or the stress of what he was doing, but it was someone who saw him [in that light]."

Referring to the 'social GRRRAACCEEESSS' acronym – gender, geography, race, religion, age, ability, appearance, class, culture, ethnicity, education, employment, sexuality, sexual orientation and spirituality – to represent different aspects of an individual's identity (Burnham, 2012), another interviewee explained that this was used as part of their practice:

"It's predominantly play-based therapeutic work, based on what is helpful to the child. So we have loads of figurines of all abilities ... figurine kids in wheelchairs, different ethnicities, different religions, different cultures, different animals – kids like to use animals sometimes in the sand tray work. We work with what they bring to us and that's what's so great ... because it wants you to tell me as a family what your lived experiences [are], what's helpful to you, what trauma already existed [before the sexual abuse] and how is it now compounded by the [abuse]."



By making an effort to learn about service users' culture, it was said, professionals from different ethnic backgrounds can provide better support



Findings from published research

Identifying that social workers lacked confidence in working with families from Black, Asian and minority ethnic communities, Chimba et al (2012) recommended that a wider understanding of different cultures could be achieved by considering extended family contexts; ensuring cultural competency training for social workers pre- and post-qualification; improving communication methods; enhancing opportunities for professional networking; and conducting further research in understanding communities' experiences of safeguarding.

Fontes (2005) presented examples of how professionals can address cultural concerns and also challenge their own cultural viewpoints, using an 'ecosystemic framework' for practice with children and families in child maltreatment cases. The framework presented concentric circles representing 'domains' – with the 'individual child' at the centre, surrounded by 'home/family', 'ethnic culture', 'proximal social systems' and 'wider social systems' – for professionals to consider when formulating interventions.

While acknowledging positive developments to encourage cultural understanding and diversity in the police – such as an increase in female officers from Black, Asian and minority ethnic backgrounds – Harrison and Gill (2019) identified a need to focus on improving cultural and linguistic understanding across the entire police service in order to tackle the reasons behind British South Asian women's "culture of silence". Their proposals included a national programme of training for officers, the establishment of multi-agency community forums to discuss issues that protect perpetrators and deter disclosure, and police-led initiatives to tell women about the support they could expect. Although the focus of their paper was South Asian women, the authors suggested that their model is generalisable to other communities.

Pathan (2016) argued that Islamic "concepts of the inner self, intellect, heart and soul" provide an alternative and contrasting perspective on understanding human emotions and behaviour to "social work counselling approaches that incorporate classical behaviouralism and cognitive therapy":

"By social workers understanding the terms and concepts found in Islamic literary and theological traditions relating to the human condition, this in turn can help in effectively responding to the emotional and social needs of Muslims requiring therapeutic interventions using therapeutic approaches such as the person-in-relation approach" (Pathan, 2016:407).

Research has explored how understanding Islamic terms and concepts can help social workers offer therapeutic interventions to Muslims

6.4 Sharing knowledge to improve practice

Interviewees suggested using an intersectional approach to design a framework/tool for professionals working with Black, Asian and minority ethnic communities, which would focus on both prevention of CSA in those communities and one-to-one work with children and young people affected by CSA.

“Just to be able to know what to do with any BAME group ... taking it from every organisation and building it together – maybe [there could be] a steering group that creates that framework. And having a better way to interact with [and] communicate [with] communities.”

“There’s something that’s used in domestic violence around healing trauma, workshops that are very popular for people who experience domestic violence. I would like to see similar sorts of stuff being constructed ... although I haven’t seen anything good myself.”

They considered that this framework/tool should be informed by the experiences – in terms of disclosure, the legal and court system, and therapeutic services – of CSA survivors from Black, Asian and minority ethnic communities.

“At the moment that’s an issue, that we don’t have the number of children within our systems where we could learn from their experiences. [Recording these children’s views] should be undertaken, but it’s got to be one-to-one ... The [Independent Inquiry into Child Sexual Abuse] Truth Project have recently done some consultation with survivors.”

Findings from published research

The Children’s Society operates a Child Sexual Abuse and Exploitation Prevention programme, which recognises the disparity in the way that victims of CSE from different ethnic backgrounds are identified, responded to and safeguarded. It has produced guidance for professionals which provides practical tips to identify and report CSE and enhance protection.

- ▶ Guidance on supporting children and young people from Black, Asian and minority ethnic backgrounds who experience CSE (The Children’s Society, 2018a)² discusses additional vulnerabilities and risks affecting these individuals, and provides guidance and signposting to specialist services.
- ▶ Guidance on boys on young men at risk of CSE (The Children’s Society, 2018b)³ presents more recommendations and practical tips specific to male victims and potential victims. It does not focus on specific communities, but it identifies the specific barriers to disclosure faced by boys from Black, Asian and minority ethnic backgrounds as a result of both internal (culture, faith) and external (societal) barriers; its findings echo the messages from research cited in Chapters 3 and 4 of this report.

The London Safeguarding Children Board (2011) developed a ‘training toolkit’ to enhance the training of professionals and voluntary groups who work with Black, Asian and minority ethnic culture and faith communities, groups and families.⁴ Covering a range of issues around the safeguarding of children, including CSE and forced marriage, it used focus groups and interviews with a number of local safeguarding children boards to map activity and identify ways of improving services.

² www.csepoliceandprevention.org.uk/sites/default/files/cse_guidance_bame.pdf

³ www.csepoliceandprevention.org.uk/sites/default/files/Boys%20and%20Young%20Men%20Toolkit.pdf

⁴ https://dera.ioe.ac.uk/13737/1/london_cf_training_toolkit_5_dec.pdf

7. Overcoming barriers: working with communities

One of this study's aims was to find out about resources being used by practitioners to support children and young people from Black, Asian and minority ethnic communities who are affected by CSA. Although the interviewees did not provide details of any such resources, they did talk about interventions within these communities to encourage disclosure of CSA and take-up of support services.

Please note that there has been little evaluation in the UK of any interventions in this area.

7.1 Establishing services within the community and building trust

As noted in section 2.3, the majority of the interviewees were themselves from Black, Asian and minority ethnic backgrounds. Those working in specialist services for specific ethnic communities, or on community-specific projects within generalist services, explained that disclosure of CSA to them or their services was based on long-standing and established relationships with the community; such relationships helped victims and survivors of CSA to feel that their experiences would be understood in their cultural context.

Some interviewees had set up their own organisations to address gaps in service provision. One explained that she had been frustrated at the lack of support for South Asian women in generalist support services, so had set up a specialist service for them:

“I thought, ... ‘Nobody’s doing the awareness in my own community,’ ... so I decided that I was going to use whatever leadership position, whatever power I had, to get this issue on the agenda.”

A male interviewee explained that his impetus for setting up online support for men was the lack of services for male survivors of CSA. He explained that he had been working in NHS frontline mental health services when the ‘Waterhouse Inquiry’ (Waterhouse et al, 2000) had been published:

“I was quite surprised ... that there were no services there [for men] and I found that quite amazing ... we struggled to get anywhere with male issues.”

While specialist organisations were considered to be providing much-needed services, however, funding to maintain them was seen as a challenge:

“The resources have been put into the wrong places ... A lot of times I think [some organisations are] struggling for funding.”

Interviewees spoke about the importance of being known in their community, which meant that many referrals came through word of mouth:

“[People think,] ‘There’s this organisation, we know it deals with domestic violence, but they might be able to help us [with sexual abuse].’”

“It’s very much word of mouth. So, they know it’s what I do, and I’ll have people meet me at the school gates and say, ‘I really want to talk to you.’ ... I can’t think of a single area of my life where this is not happened.”

Interviewees spoke about the importance of being known in their community, which meant that many referrals came through word of mouth

Working with a community was described as a gradual process, a key element of which was building trust and assuring people that support was confidential:

“[[It’s] really gradual and slow, being willing to be really patient because you’ve got people who’ve never said the word ‘sex’ out loud before ... In Modern Hebrew ... there is a word for [CSA], but [that] doesn’t mean that people know the word.”

“[[One young Somali woman] wouldn’t work with any professional ... I spent about eight weeks sat at the bedroom door, talking through the bedroom door.”

“[[It’s about] knowing where people are coming from and really going at their pace and having enough capacity ... and not saying, ‘Well, I can only see you a maximum of six times, so we best get on with it,’ because they’re just not going to even engage in the process ... Not being shocked when they use really inappropriate language and really juvenile-sounding language. Yeah, really seeing the person in front of you, and with no presumptions.”

Disclosure in particular required trust to be earned, one said:

“They need more time. Even when it comes to disclosing to the police, [the child is] expected to sit down [with] the police officer and have maybe an hour or so with some crayons and a piece of paper, and [they are] meant to be able to talk and it doesn’t work. Yeah, they need to get to know that police officer over three or four visits, and over that time you’ll get a good disclosure ... a good description. Also, often what happens is [that] children ... give a partial disclosure, which is a test. They want to see if they’ve shocked you ... They also want to see if you will do anything and then they’ll see: ‘Okay, you’ve done something now.’”

Referring to her experience of working with survivors of CSA from the Tamil community, another interviewee stressed the importance of maintaining confidentiality “because it is such a small community”.

Interviewees also discussed how a professional’s ethnic background may affect trust; see section 6.1.

Findings from published research

Reviewing working practices in services for sexually abused British South Asian women, Harrison and Gill (2018) noted that the provision of support in locations accessible by those who need them is “a key factor in terms of whether a woman feels comfortable taking that first important step in changing her future and making herself, and possibly also her children, safe”. They recommended:

- ▶ attaching community workers and peer support workers to venues and groups attended by South Asian women, to help bridge the gap between victims and support agencies
- ▶ Introducing more ‘safe’ venues, e.g. children’s centres, women’s centres or drop-in centres with several charities and services all housed under one roof.

Working with a community was said to be a gradual process, key to which was building trust and giving assurances about confidentiality

7.2 Raising awareness of CSA within communities

7.2.1 Work with children and young people

Interviewees discussed the importance of raising awareness of CSA and positive relationship among children and young people from Black, Asian and minority ethnic communities – especially those who were not allowed access to social media and the internet (see section 3.1).

“Is it a boyfriend or is it just an acquaintance?’ Because again, where do [South Asian children] get that information? ‘Is it a relationship or is it abuse?’”

Most considered that schools are well placed to safeguard children, by educating them about sex and relationships and giving them the agency to identify and speak out about unacceptable behaviours:

“For me, it’s sex education in schools ... It’s not like their family is going to talk to them about it.”

“We need to be talking about this in school, because too many times I’ve heard adults saying, ‘I didn’t know actually that sex abuse was happening to me and I did not know what it was.’”

One interviewee had created a community resource called ‘Ending the silence’ to encourage disclosure:

“Basically, it’s a toolkit. It’s supposed to equip parents and young people about the dangers ... to raise that awareness and also to educate them about the issues around grooming and exploitation.”

Others did not use resources specially designed for children and young people and survivors from Black, Asian and minority ethnic communities, but some referred to resources which they considered were suitable for children and young people from a range of ethnic backgrounds:

- ▶ One used the ‘Real Love Rocks’ resource⁵ – an animated prevention programme designed for use by teachers to help Year 6 children learn about healthy relationships, grooming and keeping safe online.
- ▶ Another provided counselling in schools and referred to a book, *Whisper*,⁶ which her organisation had produced to help young children understand the importance of not keeping secrets. The book comes with material for teachers to use in stimulating conversation about its themes.

Findings from published research

Harrison and Gill (2018) recommended making school lessons on healthy relationships compulsory in England, as it already was in Wales; the UK Government has now done this (Department for Education, 2019b).

Most interviewees thought that schools are well placed to safeguard children, by educating them about sex and relationships

⁵ See www.barnardosrealloverocks.org.uk

⁶ See www.oneinfour.org.uk/resources

7.2.2 Work with parents

Interviewees also discussed the centrality of raising awareness of these issues with parents:

“Maybe [there needs to be] some sort of education for the families, so that the parents have the right tools to talk to them about, even, the ideas of consent or understanding – that actually, if a Rabbi tells you to sit on his lap, that’s not an acceptable thing to do.”

“I think we’ve got to do a lot of groundwork with [South Asian] parents. That’s something we want to do ... We’ve been doing parenting classes. We’ve been doing parent-child activity. We try and work on communication because that’s another issue, that communication between ... children, young people and parents ... [It’s a matter of] getting appropriate messages out there, talking about CSA but also communication, sex education, safeguarding. There’s so many other layers to this but [it’s important] to just inform the community and parents.”

Such awareness-raising among adults carries the possibility that they will become aware of abuse in their own childhoods. The interviewee who ran counselling sessions for women from the Haredi Jewish community (see section 3.1) described the effect when attendees improved their understanding of consent and realised that they had been sexually abused as children:

“They realise that actually no one should be forcing them to have sex and then marriage ... People start to leave their husbands ... because they can’t cope with the sexual elements of the relationship ... They realise that it was an arranged marriage that they were coerced into and they can say ‘no’.”

Findings from published research

Gilligan and Akhtar (2005) argued that, for disclosure from South Asian communities to increase, professionals themselves need to understand the cultural imperatives that determine behaviour related to disclosure of CSA. They described an outreach and consultation exercise in Bradford with parents, groups and organisations to develop a booklet raising awareness of CSA and signposting to support services; this was translated into six languages and distributed through a range of organisations in Bradford.

‘Protecting Parents Across Communities’ – part of a larger CSA prevention initiative called ‘Parents Protect’, run by the Lucy Faithfull Foundation⁷ – was a project which aimed to develop a community engagement approach to preventing CSA in a Somali community in London (Williams, 2018a). After spending two years engaging with the community on how best to improve children’s safety, it delivered an educational workshop to more than 70 mothers, aimed at helping them to feel more comfortable talking about sexual abuse and to identify things that they could do to make home life safer. An evaluation of the project (Williams, 2018b) identified that the mothers had to take four steps before they were able to take action to reduce risks:

- ▶ Increasing understanding about abuse, how and where it happens.
- ▶ Accepting the possibility of abuse at home and in the family.
- ▶ Accurately assessing the risks posed to one’s own children.
- ▶ Lowering known risks by negotiating with family members.

It also highlighted issues including the need to persuade (rather than simply inform) mothers that their children may be at risk of abuse – for example, through personal accounts of abuse from people with whom mothers can identify.

⁷ See www.parentsprotect.co.uk

7.2.3 Involving women and men

One interviewee had run a ‘training for trainers programme’: a four-day course aimed at equipping women from a range of ethnic backgrounds to change the conversation within their communities and in other agencies about CSA, and to increase their capacity to engage in conversations about CSA in their social networks and workplaces:

“We did it with the Pakistani, Yemeni, Roma, Chinese and African groups. Every single group.”

However, it was also considered essential to involve men in discussions about safeguarding and CSA:

“One of the most desperate things that we need to do is work with the men ... because a lot of the mistakes that we’ve made in the past is that they haven’t been part of that conversation ... You know, whenever I go to events, or whenever I deliver training or whenever I do anything, guaranteed the audience is 95% women...”

7.2.4 Involving religious and community leaders

Some interviewees had held awareness-raising events with religious and community leaders, as part of efforts to gain their endorsement of discussions around safeguarding and CSA:

“If you can get all different kind of priests and whoever to be on board to help protect children and seek support when they need it, I think all those things would help. And I think it needs bigger campaigns.”

One emphasised the need to tailor such events to the audience’s understanding of the issues:

“I arrived [at the training] and within about three minutes I realised none of these rabbis understand consent. So, [I realised] I should stop speaking to them about how to minister to people in the congregation who might be disclosing. I spent an hour teaching them about consent.”

Findings from published research

The ‘Protecting Parents Across Communities’ project, described above, focused on working with Somali mothers because its first phase had identified them as most likely to be the principal carers for children. Williams (2018b) noted that this approach “was also the easy option”, because the project team perceived that men would be harder to engage with and might respond in a hostile and potentially aggressive way. Not all men will be opposed to prevention, however, and focusing on women alone places the responsibility for prevention of CSA in the community on women and mothers.

It was considered essential for men as well as women to be ‘part of the conversation’ around safeguarding children and CSA

Findings from published research

Dhaliwal et al (2015) noted that, while the importance of raising community awareness about safeguarding is widely acknowledged, there is limited information available on how this should be undertaken. They argued that it is essential to understand what ‘community’ means and identify individuals who can help make inroads into targeted populations; however, they advised caution in choosing who these individuals should be, and highlighted the perils of working with unrepresentative ‘community leaders’. They suggested that professionals working in the field need clear aims and objectives, targeted messages and nuanced approaches if they are to be effective in raising awareness in communities, although they did not detail what these approaches should be.

Gohir (2013) also voiced the need for caution when choosing community leaders to talk to, observing that religious and faith leaders can also be perpetrators and that faith leaders sometimes “turned a blind eye” to abuse within their community.

In relation to abuse related to faith and belief, Briggs et al (2011) found that training had helped to improve knowledge of child protection principles and practice among many African faith leaders in London – and that focusing on child safeguarding, rather than directly on witchcraft and spirit possession, was key to engaging communities and churches. They added:

“Faith leaders have a pivotal role to play in developing children’s rights within African communities. A shared faith has been critical to engaging these leaders – cutting across ethnic and national boundaries.” (Briggs et al, 2011:9)

7.2.5 Including the voices of victims and survivors of CSA

One interviewee pointed out that their organisation’s outreach to raise awareness of CSA among a Tamil community was focused on the experience of victims rather than “coming in from an older angle of debating what’s right and wrong”.

Interviewees identified the power of ‘survivor accounts’ in the outreach they had carried out with Black, Asian and minority ethnic communities. One described the effect of letting people hear about CSA from people in their own cultures and communities who had experienced it:

“[Our community event] got such great [feedback], it had a huge impact, we had a few people crying in the audience and even some of the volunteers – you could tell it is very deeply emotional and a big topic. And they had survivor ... speakers, a male and a female. So, this was a huge thing that happened within the Muslim community, and we’re so pleased to be [able] to help them through it.”



Interviewees identified the power of ‘survivor accounts’ in the outreach they had carried out with Black, Asian and minority ethnic communities



7.3 Challenging ideas that prevent disclosure and encourage victim-blaming

Interviewees highlighted the importance of challenging gender roles and concepts such as honour and shame:

“I’m always saying, ‘What about the parents and what about their reactions and this blaming of the victim that [there will be] until we start to have those dialogues and start challenging that and start to make it safer?’ We are not going to get the victims coming forward – and even when the victims are, they are then being ostracised.”

One had held a variety of events with parents and children:

“We’ve had informal coffee mornings and we held a consultation event where we invited mums and dads. And children as well ... We talk about honour and shame, and we talk about the issues and what that means to a child – that is, if a child is acting up, do we just take that at face value or do we try and look underneath and see what’s going on underneath as well?”

Rather than focusing directly on CSA, some awareness-raising activities had looked at the health implications for the child or young person:

“It may be explaining more about the impact. So if a child doesn’t disclose, they [don’t receive support so they] live with their [experiences.] Then it could be the self-harming, the physiological ... PTSD and other health impacts – there’s a lot. We have a slide that we normally talk about, which is quite surprising for many parents ... It sort of takes away from the shame and the stigma attached.”

Another example of outreach work included a showing in Manchester and London of a film about CSA within an Orthodox Jewish community:

“We put on a film night recently – a documentary from Israel called, in English, *One of Us*.⁸ [The audience] was a mixture of donors and activists, concerned parents from the more mainstream part of the community, and then about two solid rows from the very conservative end of the community, and the question and answer session at the end ...”

Describing a fortnightly peer-to-peer support group for CSA survivors, run by a qualified counsellor, one interviewee considered that the group went some way towards reducing the shame associated with CSA.

Findings from published research

Gill and Harrison (2019) argued that addressing CSA (and domestic violence) in South Asian communities relies on challenging embedded cultural ideas such as ‘honour’ and ‘shame’ that lead to victim-blaming and prevent disclosure. They suggested that services can do this by:

- ▶ holding pre-marriage meetings with couples
- ▶ seeking invitations to speak at *Jumma* (Friday) prayers, which include sermons to the congregation (of majority men)
- ▶ offering specific support pathways for British South Asian women, which include involving the victims and their communities to combat CSA (and domestic violence).

Previously, Harrison and Gill (2018) identified a number of successful initiatives, such as community debates, which were operating in British South Asian communities to raise awareness of sexual violence, challenge victim-blaming attitudes and encourage women and children to report crimes. They acknowledged that best practice is offered on a localised basis and concluded that there is a need for more innovative and effective approaches to outreach.

Gill and Brah (2014) argued for a new way of thinking about ‘honour’-based violence, with interventions that challenge traditional gender roles and the victimisation of women and girls in relation to honour-based beliefs and practices.

⁸ Available at: www.netflix.com/gb/title/80118101

8. Implications of the study's findings

In this final chapter we identify actions that could improve the identification of and response to the sexually abuse of children and young people from Black, Asian and minority ethnic communities, and encourage the use of CSA support services by members of those communities.

Support for agencies and service providers

There is a need for support so that services can improve their responses to children and young people from Black, Asian and minority ethnic backgrounds:

- ▶ Statutory and voluntary organisations that respond to diverse communities – such as sexual assault services, children's social care and sexual health clinics, as well as specialist CSA services – should allocate resources to reflection and action in order to improve their responses to CSA, both for children and young people and for adult survivors.
- ▶ Community-based organisations that currently work in related areas, such as violence against women or youth work, require support to provide services tailored to children and young people experiencing or at risk of CSA, and to undertake wider awareness-raising outreach with the communities they serve.

The CSA Centre is developing a new 'CSA Pathway' and will seek to ensure that it incorporates learning from this study and provides guidance in responding appropriately to sexually abused children and young people from Black, Asian and minority ethnic backgrounds.

Outreach to communities

Outreach interventions should be piloted, communicating in appropriate languages and dialects in order to engage with different ethnic communities (parents, community organisations, faith-based organisations and networks), with the aims of:

- ▶ raising awareness of CSA
- ▶ breaking down barriers to disclosure (especially cultural and religious concerns)
- ▶ improving understanding of processes for disclosure
- ▶ signposting suitable therapeutic support.

Pilot interventions could include 'survivor accounts' and should be developed in consultation and collaboration with parents, children and young people from the relevant communities.

Voluntary organisations in Black, Asian and minority ethnic communities perform a vital role by providing capacity-building and staff training, and by undertaking community development and prevention work with parents, children and young people, and community and religious organisations and networks. These organisations should therefore co-produce any pilot interventions.

Services would need to be ready to respond to increased demand as a result of such initiatives.



Outreach interventions should be piloted, using appropriate languages and dialects, with services ready to respond to any resulting rise in demand



Training programmes for professionals

Training programmes on CSA for professionals should embed anti-racist approaches, to help practitioners better support the communities they serve. They should also enable greater understanding of the priorities for, and issues which may additionally affect, children, young people and families from Black, Asian and minority ethnic backgrounds who are affected by CSA.

Under-identification of CSA in some communities, especially South Asian communities (according to published data), is a particular priority. Professionals in direct contact with children, such as teachers and healthcare staff, could receive training to increase their awareness of cultural barriers to disclosure of CSA and help them respond appropriately to concerns they may have.

In addition, interviewees identified the need for a resource/toolkit specifically for work with Black, Asian and minority ethnic communities. This would identify and build on:

- ▶ recommendations from research, policy and practice on preventing CSA
- ▶ approaches to working with internal and external barriers to identification and disclosure of CSA, drawing on best-practice examples
- ▶ strategies for supporting victims in negotiating the legal and court systems
- ▶ identifying therapeutic resources.

This resource/toolkit, which would need to recognise the heterogeneity of different ethnic communities, should be piloted and evaluated. It would represent a significant way forward in developing the knowledge and skills of practitioners of all ethnic backgrounds who work with children and young people.

Research into the needs of children and young people from Black, Asian and minority ethnic backgrounds who experience CSA

Further research is required with children, young people and adult survivors – boys and men as well as girls and women – from a wide range of ethnic backgrounds, to better understand their needs in relation to their experiences of CSA, including CSE, and services' response to these.

This research could identify areas of promising practice and set up evaluation studies to increase understanding of what constitutes effective services for this group.



Training should embed anti-racist approaches and improve understanding of the priorities for children and families from different ethnic backgrounds



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The logo features a vertical rectangular background with a geometric, low-poly pattern. The colors transition from dark blue at the top to green at the bottom. The text is white and positioned on the left side of the rectangle.

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