

‘Honour’-based abuse and forced marriage cases at Marac in Scotland

Research Report

**Safer,
Sooner**

Joining the dots
for an effective
multi-agency
response.



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Introduction

For the past 15+ years, since the first Scottish Marac (Multi-Agency Risk Assessment Conference) was set up, Maracs have transformed the multi-agency response to domestic abuse across Scotland. In Equally Safe, the Scottish Government committed to developing and building a national framework for Maracs in Scotland and SafeLives have been funded to support this through the Scottish Marac Development Programme (MDP) since 2015.¹

SafeLives is committed to supporting and optimising the operation and accessibility of Scottish Maracs, both through the MDP and latterly through our Delivering Equally Safe funded, *Safer, Sooner*² multi-agency programme.³ Our aim is to ensure that all victims at high-risk of serious harm because of domestic abuse in Scotland, regardless of who or where they are, can access support from their local Marac.

Through our engagements with Maracs and Marac professionals across Scotland we've been hearing about inconsistencies in the response to cases that involve so called 'honour'-based abuse, including where there is a threat of forced marriage, and in particular where the perpetrator(s) is not a partner or ex-partner.⁴ This has also been continuously highlighted by specialist services in other forums at local and national level, including during the Scottish Government Marac deep-dive events in 2021 following the consultation on the future of multi-agency risk assessment arrangements in Scotland.⁵

'Honour'-based abuse, including forced marriage or threat of forced marriage, is a form of violence against women and gender-based violence. As such it is appropriate for referral to Marac, and cases should be accepted for discussion at Scottish Maracs. Marac has been highlighted as effective in responding to these cases by the Scottish Government⁶. A multi-agency approach may be even more important for cases involving 'honour'-based abuse, due to the nature of risks and victims potentially being less likely to have reported the abuse to Police or be engaged with specialist services, making a coordinated response particularly important.

Through *Safer, Sooner* we have consulted with professionals from specialist services who support victims of domestic abuse and so called 'honour'-based abuse in Scotland and colleagues from Police Scotland, to explore how Scottish Maracs currently respond to these cases and how the response can be improved.⁷ We want to understand what the current response looks like and what guidance is needed to improve consistency across the country and ensure a consistent, safe, and robust response to all victims.

¹ [Equally Safe: Scotland's strategy to eradicate violence against women](#)

² [Marac in Scotland](#)

³ [Delivering Equally Safe](#)

⁴ For brevity, this report uses the acronym 'honour'-based abuse, and cases involving threats of forced marriage are included within this.

⁵ Scottish Government Marac deep-dive learning report (to be published)

⁶ ['What Works to Prevent Violence Against Women and Girls'](#) (Scottish Government, 2020)

⁷ The specialist services supporting this project are Shakti Women's Aid, Hemat Gryffe Women's Aid, and Amina Muslim Women's Resource Centre.



We set out to understand:

How many cases involving 'honour'-based abuse and threats of forced marriage are being referred to Maracs in Scotland?

How do Maracs across Scotland respond to referrals involving 'honour'-based abuse?

To what extent are referring agencies confident identifying and referring 'honour'-based abuse cases to Marac?

What guidance is needed so Maracs can offer a best practice response to 'honour'-based abuse cases?

This report outlines the findings from a survey of Scottish Maracs and themes from focus groups conducted with specialist practitioners in Scotland. Following this report and with further input from representatives of [Shakti Women's Aid](#), [Hemat Gryffe Women's Aid](#), [Amina Muslim Women's Resource Centre](#), [LGBT Youth Scotland](#), and [Police Scotland](#), we have also created a toolkit for Marac professionals to support them in responding to referrals involving 'honour'-based abuse.⁸

Definitions

There is currently no statutory definition of so called 'honour'-based violence or abuse in Scotland. Scottish Government includes 'honour'-based violence in the wider definition of violence against women and girls (VAWG):



So called 'honour based' violence, including dowry related violence, female genital mutilation, forced and child marriages, and 'honour' crimes.

(Equally Safe, 2016)



The terms honour-based abuse, honour crime, honour-based violence and Izzat embrace a variety of incidents or crimes of violence (mainly but not exclusively against women), including physical abuse, sexual violence, abduction, forced marriage, imprisonment, and murder where the person is being punished by their family or community. They are punished for actually, or allegedly, undermining what the family or community believes to be the correct code of behaviour. In transgressing this, the person shows that they have not been properly controlled to conform by their family and this is to the shame of the family. Honour crime may be considered by the perpetrators as justified to protect or restore the honour of the family.

(Scottish Government, 2014⁹)

⁸ HBA & FM Guidance.

⁹ Multi-agency practice guidelines: preventing and responding to forced marriage, Scottish Government (2014)

We have chosen to use the term 'honour'-based *abuse* rather than *violence* in this guidance in recognition of this encompassing a range of behaviours not limited to physical violence, and in line with the Scottish understanding of domestic abuse.

A forced marriage is different from an arranged marriage, where the marriage is arranged by one or both families, but both parties are free to accept the arrangements or not. Forced marriage is a form of 'honour'-based abuse and may be seen by a family as a route to restore 'honour'. Forced marriage involves one or both spouses being forced to marry without their consent.

“ A forced marriage is a marriage in which one or both spouses do not (or, in the case of children and some adults at risk, cannot) consent to the marriage and coercion is involved. Coercion can include verbal, physical, psychological, financial, sexual, and emotional pressure and taking advantage of a person’s inability to give consent.

(Scottish Government, 2014¹⁰)

'Force' in this context includes behaviours to:

“ (a) coerce by physical, verbal, or psychological means, threatening conduct, harassment, or other means, (b) knowingly take advantage of a person’s incapacity to consent to marriage or to understand the nature of the marriage.

(Forced Marriage etc. (Protection and Jurisdiction) (Scotland) Act 2011)

¹⁰ Multi-agency practice guidelines: preventing and responding to forced marriage, Scottish Government (2014)

Methods

Data Collection

A survey was designed and disseminated to the Chairs and Coordinators of Maracs across Scotland which aimed to inform all four of the research questions. The survey consisted of questions asking for estimates of the number of 'honour'-based abuse referrals received by each Marac and on what basis these were usually referred, how the Marac responded to 'honour'-based abuse referrals where the perpetrator was not a partner or ex-partner, and whether the Maracs used any guidance when responding to these cases and what further support they may need to help them to respond more effectively in future.¹¹

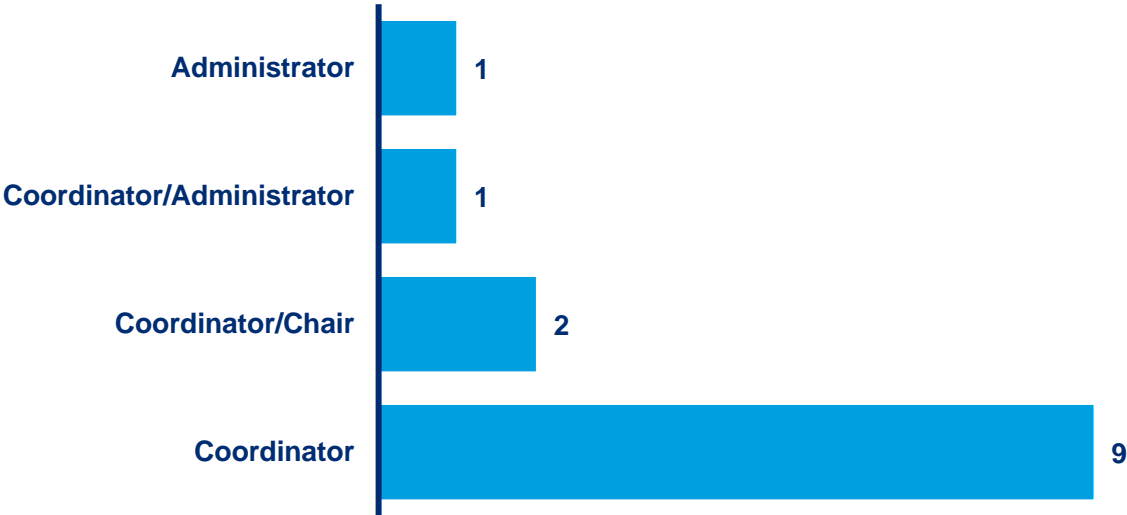
The survey was sent to all 32 operational Maracs in January 2022 and remained open until May 2022, primarily through Marac Coordinators.

In addition to the survey, two focus groups were carried out with practitioners from specialist services supporting victims/survivors of 'honour'-based abuse, to inform research questions 2, 3 and 4. Questions focused on the challenges in responding to 'honour'-based abuse cases, how Maracs have responded to any 'honour'-based abuse referrals to date and how the Marac process could be made more accessible to victims/survivors of 'honour'-based abuse. The full focus group schedule can be found in Appendix 2.

One individual was not able to attend either of the focus group sessions but was keen to contribute to the research, and so instead were sent a document with the focus group questions for written responses, which were then analysed in the same way as the focus group transcripts.

Participants ¹²

Number of responses to Survey by operational Maracs



¹¹ During the research phase of this project, we sometimes referred to this type of abuse as 'honour'-based violence or HBV, but for the sake of consistency this report will use the terms 'honour'-based abuse and 'honour'-based abuse throughout. Where HBV was used, it referred to the same definition as that given in the 'Definitions of Honour'-Based Abuse and Forced Marriage' section above. The survey questions and full focus group schedule can be found in the appendices with their original wording.

¹² 84% response rate based on the 32 Maracs operating across Scotland at the time of the survey

Representing 27 Marac areas

- Aberdeen City
- Aberdeenshire
- Angus
- Argyll & Bute
- Caithness & Sutherland
- Dumfries & Galloway
- Dundee
- East Dunbartonshire
- East Lothian
- East Renfrewshire
- Edinburgh
- Fife
- Greater Glasgow
- Inverness
- Lochaber
- Midlothian
- Moray
- North Lanarkshire
- Orkney
- Perth & Kinross
- Renfrewshire
- Ross-shire & Skye
- Scottish Borders
- Shetland Islands
- South Lanarkshire
- West Lothian
- Western Isles



Focus Groups



12 individuals attended the two focus groups



1 individual responded with a written submission

These 13 individuals in the focus group represented five organisations¹³:



Hemat Gryffe Women's Aid



The Daisy Project



**WOMEN'S
SUPPORT
PROJECT**

Women's Support Project







**Amina Muslim Women's Resource
Centre**



Shakti Women's Aid

¹³ All these organisations provide support to victims/survivors of domestic abuse, with most of them specialising in supporting Black, Asian, and racially minoritised women. Together, these organisations provide support across Scotland, although most support is concentrated around Edinburgh and Glasgow.

Key Findings

	<p>The number of 'honour'-based abuse cases estimated to have been referred to each Marac over 2021 is less than three for most Maracs surveyed.</p> <p>Of the Maracs surveyed, only one in ten (11%) record the numbers of 'honour'-based abuse cases that are referred to them.</p>
	<p>There is very little consistency in the way that Maracs across Scotland respond to 'honour'-based abuse referrals, with some accepting the referrals while others do not.</p> <p>For some Maracs, the decision on whether to accept a referral depends on the identity of the primary perpetrator. Some Maracs do not accept an 'Honour'-based abuse case if the primary perpetrator is a family member rather than a partner or ex-partner (as per the definition of domestic abuse in the Domestic Abuse (Scotland) Act 2018).</p> <p>Many of the focus group participants would like to see this aspect of the law changed to include family abuse as a form of domestic abuse.</p>
	<p>The specialist service practitioners who formed part of the focus groups were not confident in referring 'honour'-based abuse cases to Marac, usually because they did not believe they would be accepted.</p> <p>Focus group participants were concerned that staff in non-specialist services often lack the understanding of 'honour'-based abuse necessary to recognise this type of abuse as well as to adequately support victims/survivors.</p>
	<p>Staff in specialist services and almost all the Marac representatives felt that Maracs would benefit from more support in managing 'honour'-based abuse cases.</p> <p>Suggestions included:</p> <ul style="list-style-type: none"> • Standard guidance created for Maracs. • Greater involvement of specialist services in the Marac process. • Tools specifically designed for 'honour'-based abuse victims/survivors including specific referral tools and risk assessments. • Training on 'honour'-based abuse • Longer-term safety plans. • Family members and wider family members who are perpetrating abuse to be treated in the same way that perpetrators who were partners or ex-partners would be treated.¹⁴ • More robust safety plans for victims/survivors who have no recourse to public funds, are immigrants or asylum seekers, identify as trans or who are not confident English speakers.

¹⁴ For brevity, for the remainder of this report 'family members' will refer to extended family members, including family members of a person's partner or ex-partner, as well as their immediate family.

Findings

Challenges responding to 'honour'-based abuse cases

Focus group participants discussed the various challenges that arise when supporting victims/survivors of 'honour'-based abuse, including aspects of the abuse itself, reasons why victims/survivors find it difficult to disclose this type of abuse, and the lack of understanding that non-specialist services have of 'honour'-based abuse.

One challenge that was mentioned by several participants was that these cases often involve multiple perpetrators as 'honour'-based abuse is often perpetrated or exacerbated by the extended family. Some participants said that the partner of the victim/survivor may be 'absorbed into the rest of the family' therefore unable or unwilling to act against them, even if they are 'very loving and caring' to the victim/survivor themselves. There was widespread agreement that these are often very high-risk cases, but that they can also be very complex because what is viewed as 'honourable' differs between families. One participant commented that these cases see a high level of coercion and control and the victim is often highly isolated. Many participants also commented on how the intersectional identities of some victims/survivors makes them more vulnerable to abuse. This is the case particularly for people who identify as trans, immigrants and asylum seekers, and those who are not confident English speakers.

Many participants agreed that 'honour'-based abuse victims/survivors face many challenges when it comes to disclosing abuse. For some, this is because they do not recognise 'honour'-based abuse as abuse because it is normalised and seen as a way of life, both by them as individuals and by their community. For those who do recognise that they are being abused, feelings of guilt, shame, and the worry that they would be deceiving their family can make them reluctant to disclose, along with a lack of knowledge about who to reach out to. Several participants talked about victims/survivors having a lack of confidence in services, particularly non-specialist services. One participant said that most victims/survivors they have supported have requested that they only speak to a staff member who shares their Muslim faith as they will better understand the victim/survivor's thoughts and experiences. Even when they are talking to someone from the same religious background, participants said that it can take victims/survivors a long time to disclose, often presenting their experience in the form of a story rather than through directly answering questions, or else focusing first on other concerns like housing or benefit issues before they talk about the 'honour'-based abuse that is at the root of these problems. This will have implications for professionals carrying out risk assessments with victims.

When it came to identifying challenges that victims/survivors face when they *do* disclose 'honour'-based abuse to (non-specialist) services, participants agreed that in general many services do not have a good understanding of what 'honour'-based abuse looks like and how it is different from domestic abuse, and so are less able to recognise it when approached by a victim/survivor. This is compounded by the fact that staff members in these services might not have the experience necessary to adequately explore a client's relationship with their family. Several participants also commented that there is a lack of research into these women's experiences and statistics on the prevalence of these cases in Scotland which hinders a broader understanding throughout support agencies.

Another key theme that emerged was how racial and ethnic stereotypes and prejudices can present as a significant barrier in mainstream services providing adequate support. One participant talked about the fact that:



Many services do not recognise that a person's culture may give them as much as it takes away and assume that if a woman does not want to leave her religion or her family behind that she does not want to help herself.

(Focus Group Participant)

Another participant said that it is important for services to start to broaden the concept of 'honour'-based abuse in line with coercive control, for example by classing a mother-in-law keeping their daughter-in-law's passport and jewellery as a form of 'honour'-based abuse, and that:



Waiting for women to have to be getting death threats' before being considered 'honour'-based abuse victims feeds into the 'racialised trope of the fact that women from ... racially minoritised communities will just have to go through a lot more pain and a lot more harm to be considered as being in pain and being in harm's way.

(Focus group participant)

Finally, a few participants commented on the fact that there is a false idea that 'honour'-based abuse only occurs in Black and Brown families, and this leads firstly to a segregation of the experiences of these groups of people as being considered as different and outside of the "norm", and in addition this reluctance of practitioners to examine their own (White, Scottish) culture means that even more victims/survivors of 'honour'-based abuse will miss out on support.

Several participants mentioned that one problem faced by many victims/survivors is that some services are not supportive if the abuse is not being perpetrated by a partner, which is exacerbated by the fact that the law does not recognise abuse when it is perpetrated by family members. This is explored in more detail below.

A final key theme that emerged around challenges responding to 'honour'-based abuse cases in general, was that victims/survivors are often very dependent on others as they have never been taught to be independent and may need ongoing support from services for a long time after they have first disclosed the abuse. This can pose difficulties for agencies when assessing risk since victims/survivors may have none or limited experience of independence which can make it difficult to judge whether they are safe. In addition, one participant said that services can find it irritating when victims/survivors continue to depend on them, and they do not consider how they may have never managed their own money or lived on their own in this country before so need additional support with understanding the system. They also commented that these attitudes can be exacerbated by racism.

'Honour'-based abuse cases being referred to Marac in Scotland

The extent to which 'honour'-based abuse cases are referred to Maracs and how confident specialist services feel referring these cases was a key theme in both the interviews and the focus groups. There was very little confidence from focus group participants around referring cases involving 'honour'-based abuse to Marac in Scotland. When talking about lack of confidence, participants discussed reasons why they believed there would be a negative outcome if they were to refer an 'honour'-based abuse case to a Marac. Some participants talked about how they were less likely to refer 'honour'-based abuse cases to Marac, or had stopped referring cases altogether, because they knew that their local Marac was very unlikely to accept them if the perpetrator was not a partner or ex-partner.

Several reasons were suggested as to why Maracs may be less likely to accept 'honour'-based abuse cases. For example, some participants talked about how Marac misses intersections of abuse' and does not understand Black, Asian, and racially minoritised related issues well. For example, one participant commented that in some communities:



You're not married to the man; you are married to the family.

(Focus group participant)

This suggests that the partner/non-partner distinction that Maracs draw when looking at perpetrators in abuse cases is not always appropriate.

Another participant said that Maracs restrict themselves to:



A typical description of domestic abuse' given in the Domestic Abuse (Scotland) Act 2018 (DASA), but that 'doesn't help us because DASA is not inclusive in its description either

(Focus group participant)

In relation to this, one participant suggested that the cause of this distinction between 'the normal kind' of domestic abuse and 'honour'-based abuse is 'fear of the unknown'. They went on to say that:



Maracs are probably reluctant to accept 'honour'-based abuse cases because they do not know what to do with them, they do not want to 'get something wrong', or they are afraid of being 'racially offensive.


(Focus Group Participant)

This lack of confidence in referring cases could help explain why the Maracs surveyed estimated that the number of 'honour'-based abuse cases that have been referred to them is very low. Three respondents commented that they had no experience of these cases being referred. Only one respondent, representing three Maracs, said that they recorded when referrals to their Maracs involved 'honour'-based abuse and forced marriage.

Maracs that did not record this information were asked to give estimates of how many of these cases were referred to them during 2021.



Numbers or estimates for 'honour'-based abuse cases were given for 18 Maracs in total. Of these, there were eight Maracs where no 'honour'-based abuse cases were referred at all during 2021, and only three Maracs that had received five or more 'honour'-based abuse referrals.

Between **0.4%**  **4.2%** of cases referred to Marac during 2021 were 'honour'-based abuse cases.



Regarding forced marriage, 16 Maracs provided figures for 2021 referrals of which only four had received any referrals, with three of these only having received one forced marriage case throughout the year.

Between **0.7%**  **1.0%** of cases referred to Marac during 2021 involved forced marriage.

There was widespread agreement in the focus groups that, for Maracs, the involvement of Police or social services is seen as ‘authenticating’ a case, whereas cases that are not reported to these services are viewed as being lower risk and therefore are less likely to be accepted by Maracs. Connected with this, many participants talked about how important professional judgement is in these cases because they are often not reported to statutory organisations and because standard risk assessments do not always pick up the nuances and subtleties of this type of abuse. However, when case workers use their professional judgement to advise on the urgency of a case they are not always listened to. One participant commented that:



If the case does not fit the criteria of having been perpetrated by a partner or ex- partner or having been reported to the police or a social worker, it is difficult for cases to be accepted by Maracs on professional judgement and usually these cases are not accepted at all.

(Focus Group Participant)

The Maracs surveyed were asked the basis on which ‘honour’-based abuse cases were usually referred:

4	respondents said referrals were usually made on professional judgement via third party reporting from parties such as Police Scotland and health visitors. While this suggests that referrals are being received through professional judgement, the fact that the examples of third parties given did not include specialist services may support the lack of confidence that the focus group participants had in referring these cases themselves based on their own professional judgement.
2	respondents said referrals were usually made on visible high-risk, one said that referrals were usually made on escalation in frequency or severity, and one said that cases were referred through Marac transfers.
1	respondent said ‘honour’-based abuse cases were referred if these also involved domestic abuse as defined by the Scottish Government, supporting the concerns of the focus group participants that some Maracs are less likely to accept referrals where the perpetrator is not a partner or ex-partner.

Marac responses to ‘honour’-based abuse referrals

Much of the lack of confidence from focus group participants in referring ‘honour’-based abuse cases to Maracs stemmed from experiences of receiving negative responses from Maracs when they had referred these cases in the past. Many participants said that they knew from experience that their local Marac will not take ‘honour’-based abuse cases, especially when the perpetrator is not a partner or ex-partner.

The Maracs surveyed were asked how Maracs respond to referrals involving ‘honour’-based abuse where the primary perpetrator is not a partner or ex-partner:

2	<p>respondents said that they would accept the referral, one of whom said they had not had experience of this since being in post. The other respondent who said they would accept the referral said that this sometimes ‘raises questions’ since these cases are ‘not technically a domestic’, but that they would still sit with them because their local Domestic Abuse Unit has the remit for ‘honour’-based abuse in all forms.</p>
1	<p>respondent said that they would refer ‘honour’-based abuse cases where the primary perpetrator is not deemed to be a partner or ex-partner to another agency, specifically Hemat Gryffe in Glasgow, and another respondent said that they would return these referrals to the referring agency.</p>
7	<p>respondents said that how they responded to this type of referral would be dependent on circumstances. One of these respondents said that these cases would be ‘assessed and discussed with the Marac Chair’. Another said they would only accept the referral if one of the perpetrators was a partner or ex-partner since Marac was a forum to discuss domestic abuse and so they only accept referrals that fall under the Scottish Government’s definition of domestic abuse. They did however say that they are in the process of setting up an ‘honour’-based abuse-specific multi-agency meeting to look at how they can better respond to ‘honour’-based abuse cases where the perpetrator is not a partner or ex-partner.</p>
2	<p>respondents did not state what they would do if this type of case were referred to them, commenting that they did not have any experience of this.</p> <p>However, one of them did say that:</p> <div style="display: flex; align-items: center; justify-content: center;">  <p style="text-align: center;">In general a Marac referral is only appropriate if the perpetrator is the partner or ex-partner of the victim</p> </div> <p style="text-align: right;">(Survey Respondent)</p>

Other negative experiences that the focus group participants have had when referring 'honour'-based abuse cases to Maracs included Maracs not accepting referrals when the victim/survivor is abroad even when the service intended to develop a safety plan for when they returned, which one participant was 'quite shocked' about. One participant also talked about an incident in which they referred a woman with extremely high-risk, but it 'didn't lead to any sort of proactive ... response' until the husband threatened a social worker, whereupon he was arrested immediately.

A small number of participants had 'honour'-based abuse referrals accepted by Maracs, but in general these were not managed well since the Marac focused only on 'the domestic abuse stuff' but did not investigate anything related to the 'honour'-based abuse since they assumed that specialist organisations would support the victim/survivor around this. One participant addressed the separate multi-agency meeting to focus on 'honour'-based abuse cases that is going to be piloted in a LA Marac area. This separate meeting was agreed by this Marac in response to the survey (above), but the focus group participant added that 'it took a lot of ... pestering' for the Marac to agree to this. No participant in either focus group was able to give an example of a good response they had from Marac after referring an 'honour'-based abuse case where the perpetrator was not a partner or ex-partner.

There were however a few participants who had experienced more positive responses when they referred cases of 'honour'-based abuse. One participant pointed out that if an 'honour'-based abuse case fits into a 'more standard domestic abuse' mould then Marac response is good and actions are given to police and social work, although specialist services find that they often have more work to do. Another case worker had recently made their first referral to Marac and were allowed to attend the Marac even though it was in a different area of Scotland, and they found the experience 'really interesting'. In this case, the partner and the partner's family were both perpetrators.

Survey respondents were asked whether their Maracs draw on any specific guidance when responding to cases involving 'honour'-based abuse, including threats of forced marriage:

4	respondents mentioned having links with specialist services, with two saying that they would seek advice from these agencies and one saying that all staff members had taken part in specialist training. Shakti Women's Aid was mentioned by three of these four respondents as being the service they have or would seek support from.
3	respondents said that they used 'honour'-based abuse-specific tools including Standard Operating Procedures, a toolkit and a local protocol which includes a section on responding to forced marriage. Two respondents said they used more general tools such as local authority protocols, SafeLives resources and information from the mygov.scot website.
1	respondent said that they respond to any 'honour'-based abuse referrals as an emergency Marac and have it stand alone with no other cases discussed.

Suggestions for improvements

When asked how Maracs could improve their response to 'honour'-based abuse cases and better support victims/survivors of 'honour'-based abuse, focus group participants offered several different suggestions. A particularly prominent theme on which there was widespread agreement was that specialist organisations supporting Black, Asian, and racially minoritised groups need to play a much more prominent role when 'honour'-based abuse cases are referred to Marac. Listening to and respecting the views of these specialist organisations was seen as important both in deciding whether to accept a referral and when discussing accepted cases due to the complexity and listening to a specialist is the only way to gain a better understanding of the experiences of the victim/survivor. Linked to this was one participant's comment that:



Maracs must trust the judgement of specialist services because not all these cases will be reported to the police.

(Survey Respondent)

There was also agreement that Marac professionals from non-specialist services need to be trained in what signs to look out for when identifying 'honour'-based abuse cases since standard risk assessments will not necessarily pick up all the relevant information.

2	participants suggested that in these 'honour'-based abuse cases, Maracs should look at the family or the wider community in a similar way to how they look at a domestic abuse perpetrator, including identifying any previous charges or identifying general patterns of coercive behaviour.
1	participant also said that it is important for those who sit on Maracs to have a better understanding of the structures within communities that enable 'honour'-based abuse.

In addition, several participants said that safety plans for 'honour'-based abuse victims/survivors should be more robust and longer-term as the needs of the women and their children are 'considerably more complicated', and that the safety planning needs to involve the perpetrator(s) as well. One participant suggested that this could include a continuation of the multi-agency response so that different agencies could check in with each other about how their part of the safety plan was progressing, particularly for high-risk 'honour'-based abuse cases.

Many participants pointed out how women with no recourse to public funds would need more action points within a more detailed safety plan since they would need even more support. There was acknowledgement that longer-term safety planning would necessitate more resources being made available for these cases.

Some participants suggested specific actions that would be important for many 'honour'-based abuse victims/survivors who were referred to Marac, such as providing safer accommodation as 'that kind of accommodation is not available' for Black, Asian, and racially minoritised women, and providing more protection in terms of child contact arrangements and child residency arrangements. More generally, participants highlighted that Maracs should listen to the victim, be open minded and not make assumptions. Finally, one participant highlighted the need to lower Marac referral waiting times so that these high-risk cases can be fast tracked, and another participant suggested that Maracs do a ratio analysis of the number of 'honour'-based abuse cases referred to them and the number of these cases they accept, which they believed would 'make it very clear to them that there is a problem'.

Survey respondents were asked what would make it easier for their Maracs to respond effectively to cases involving 'honour'-based abuse:

5	respondents said that they would benefit from clearer guidance, with one saying that they find it particularly difficult to assess cases where family members pose the main threat to the victim/survivor.
4	respondents supported the views expressed by the focus group participants by saying that they would like to have specialist services be more involved, specifically by acting as the Idaa and/or be present at meetings, with Hemat Gryffe and Shakti Women's Aid both being mentioned as examples of specialist services they would want to work with. One respondent also said they would want better communication with specialist services.
2	respondents said that they thought they needed tools that are designed specifically for 'honour'-based abuse cases, suggesting a referral form with a section for 'honour'-based abuse and an additional safety planning tool that can be used when 'honour'-based abuse cases are referred to Marac. One respondent suggested they would benefit from local 'honour'-based abuse training for Marac Coordinators and representatives, and another said that they would like to start recording 'honour'-based abuse cases separately.
1	respondent used this space to reiterate that they did not believe that Marac is the appropriate forum for 'honour'-based abuse and forced marriage cases because these cases would need different risk assessments and different partners at the table than those that are currently present, and because they do not sit under the current Scottish Government definition of domestic abuse. They also believe that there are already clear protocols for forced marriage cases in Scotland and that actions to support victims/survivors would be slowed down if their cases were to be heard at Marac.

Experiences with Other Supporting Agencies

While the primary discussion points in the focus groups were intended to centre around the specialist services' experiences with and views on Marac involvement in 'honour'-based abuse cases, participants in both focus groups also talked about the experiences that they had had with other supporting agencies, both positive and negative.

Some participants had experiences of agencies, including the police and local domestic abuse units, regularly supporting 'honour'-based abuse cases, and working closely with their specialist organisations to ensure that they were able to provide good support to victims/survivors. One participant said that in their experience of working with other agencies, they did equally treat cases of 'honour'-based abuse where the perpetrator was a family member and cases where the perpetrator was a partner or ex-partner. Another participant also pointed out that in cases of forced marriage where the child is under 16, social work and other agencies will always get involved. If the child is over 16 however, they said that a case 'doesn't go to Marac at all'.

Negative experiences with other agencies included women's support services and other services deliberately ignoring disclosures of 'honour'-based abuse perpetrated by family members and saying that they would only support the aspects of the case where the perpetrator was a partner or ex-partner. Some participants also gave examples of instances where the lack of cultural or religious understanding from staff in other agencies led a victim/survivor to feel unsupported or to disengage. In one instance, a practitioner in one support service referred to the person the victim/survivor wanted to be in a relationship with as their 'boyfriend', which did not reflect how she viewed the situation and led her to not engage with that service any further. Another participant said they had supported a victim/survivor who, when being questioned by police about the abuse perpetrated by their family, heard a police officer say, 'can I just deport them already', which led to the victim/survivor shutting down and not giving the police all the information, they needed.

Suggestions for Improvement outside Maracs

Equally, while one of the key purposes of the focus groups was to hear suggestions on how Maracs could improve their responses to 'honour'-based abuse cases, participants also put forward their thoughts on ways in which 'honour'-based abuse victims/survivors could receive better support outside of the Marac process.

Some of these suggestions linked very closely with suggestions for improvements to Maracs, including staff in agencies making a greater effort to understand different cultures and working closely with specialist services to benefit from their expertise. One participant pointed out however that specialist organisations need more funding to be able to provide adequate support to all the organisations that require it.

Many participants agreed that it is also important for organisations to ensure that their body of staff is more diverse. This would help Black, Asian, and racially minoritised women feel more comfortable approaching these services and mean that staff would be more likely to recognise signs of abuse that might otherwise have been missed.





Another suggestion that was widely agreed upon in both focus groups was the need to change the legal definition of domestic abuse in Scotland so that other forms of abuse, particularly family abuse, is recognised. This would mean that there would be clearer guidance for services when supporting victims/survivors of 'honour'-based abuse. Related to this, participants also suggested that other frontline services amend how they carry out their risk assessments so that family members can also be considered perpetrators and so 'honour'-based abuse questions are asked as a standard to all potential victims/survivors, and not just those from Black, Asian, or racially minoritised backgrounds. Finally, one participant highlighted issues like 'honour'-based abuse are often only considered problems for Black, Asian, and racially minoritised communities and organisations, but that all services need to realise that supporting 'honour'-based abuse victims/survivors is the 'responsibility of everybody. To keep them safe.'

Recommendations

Our engagements with Maracs and specialist practitioners across Scotland suggest there is a lack of confidence from Marac professionals in responding to cases involving so called 'honour'-based abuse. Our survey of Scottish Maracs suggest referral levels for 'honour'-based abuse cases are low, and there is both a lack of accurate data recording for these cases and inconsistencies across Marac areas in how these referrals are dealt with. One of the main barriers for cases involving so called 'honour'-based abuse being referred to Scottish Maracs is a lack of clarity over whether cases where the primary perpetrator(s) is not a partner or ex-partner are appropriate for Marac to consider, in line with the Scottish definition of domestic abuse.

It is SafeLives view that cases involving 'honour'-based abuse, as a form of gender-based violence and violence against women, including where perpetrated by wider family members, are appropriate for referral to Marac and cases should be accepted for discussion at Scottish Maracs.

For Marac professionals





	Embed guidance for Marac professionals locally on responding effectively to cases involving 'honour'-based abuse, including when perpetrated by wider family members.
	Training and awareness raising for multi-agency partners to increase confidence in identifying 'honour'-based abuse and refer to Marac and specialist services.
	Upskilling professionals to be able to complete risk assessments, including using professional judgement to assess risk of 'honour'-based abuse from extended family members.
	Increase links to specialist services supporting victims of 'honour'-based abuse, including LGBT victims, to ensure victims can access the right support at the earliest opportunity.







Having a specialist organisation is so important because if it was as easy as 'oh can you just can you give me a list of things so I can identify this better?' We would have done that ages ago.

(Focus group participant)

For Maracs

	<p>Recognise wider family members perpetrating abuse in a similar way to partner or ex-partners perpetrators and held responsible for their abusive behaviour.</p>
	<p>Better data collection and analysis of cases involving 'honour'-based abuse being referred to Marac in Scotland, including identifying where the perpetrator(s) is not a partner or ex-partner. Use data analysis to identify potential gaps in service provision and inform ongoing quality assurance of response.</p>
	<p>Specialist services supporting 'honour'-based abuse victims included and recognised as experts in the Marac process, including bringing the voice of the victim and informing safe multi-agency action plans.</p>
	<p>Action plans recognise and address unique needs of victims with no recourse to public funds, LGBT+ (including trans) victims, and victims who are not confident or proficient in English, Maracs should ensure action plans take these additional needs into consideration and attempt as far as possible to address them.</p>

For decision and policy makers

	<p>Develop tools & guidance specifically for honour'-based abuse, including risk assessments that capture and recognise the unique risks and dynamics of 'honour'-based abuse and support professionals to make appropriate referrals.</p>
	<p>Ensure appropriate responses and services are available for all victims of 'honour'-based abuse, regardless of their relationship to the perpetrator, e.g., abuse perpetrated by wider family or community members.</p>
	<p>Consider appropriateness of legal responses to 'honour'-based abuse, especially in relation to abuse perpetrated by wider family members.</p>
	<p>Develop appropriate 'Whole Family' responses, which respond effectively to all individuals involved and are sensitive to the nuances and nature of risk for victims of 'honour'-based abuse.</p>

A Whole Family response recognises the impact of domestic abuse on the whole family, and responds appropriately to all individuals, including children and the person causing harm

Conclusion

Research question 1: How many cases involving 'honour'-based abuse and threats of forced marriage are being referred to Maracs in Scotland?

Only a very small number of Maracs record the numbers of 'honour'-based abuse cases that are referred to their Marac. Despite not having definite numbers, generally the number of cases referred is very low, with most Maracs who gave estimates of numbers judging that fewer than three 'honour'-based abuse cases had been referred to them throughout 2021, with many saying they had no referrals and some respondents saying they had never come across a single 'honour'-based abuse case throughout their time as Marac Chair/Coordinator.

For Maracs that had received 'honour'-based abuse referrals, these comprised between 0.4% and 4.2% of all the cases referred during 2021, and the proportion of referred cases that involved forced marriage was between 0.7% and 1.0%. These figures reflect those seen in the SafeLives Insights dataset, which is an outcome measurement tool for frontline domestic abuse services. During 2021 it received data from 12 services in England and Wales, which comprised 6,501 Idva¹⁵ and Outreach cases in total. A third of these cases (35%) had been seen at Marac, and of these only 4% of clients were recorded as having experienced 'honour'-based abuse and 1% of clients were recorded as having experienced forced marriage. This suggests that the recorded and estimated figures given by Scottish Maracs are in line with figures for 'honour'-based abuse cases in Maracs in England and Wales.

Given some of the findings from the focus groups as well as the fact that several respondents in the survey said that their Maracs do not accept 'honour'-based abuse cases, these low referral numbers are likely to reflect a lack of confidence in Marac support of these cases rather than a low prevalence rate of this type of abuse throughout Scotland.

Research question 2: How do Maracs across Scotland respond to referrals involving 'honour'-based abuse?

Findings from the survey indicate that there is very little consistency in the way that Maracs across Scotland respond to referrals of cases of 'honour'-based abuse and forced marriage, with some accepting the referrals while others do not as they believe that Maracs are not the appropriate spaces in which these cases should be heard. The primary barrier that seemed to be preventing some Maracs from accepting referrals was the fact that 'honour'-based abuse perpetrated by family or extended family members does not fall under the definition of domestic abuse in the Domestic Abuse (Scotland) Act 2018, which defines domestic abuse as only abuse that is perpetrated by a partner or ex-partner. However, despite this some Maracs were still accepting 'honour'-based abuse cases while others were looking to alternative solutions to ensure that 'honour'-based abuse victims/survivors were supported.

Many of the focus group participants said they would like to see a change in the law, along with updated referral and risk assessment tools, that would allow 'honour'-based abuse to be recognised alongside domestic abuse and provide clearer guidance for Maracs and supporting agencies in general.

Research question 3: To what extent are referring agencies confident identifying and referring 'honour'-based abuse cases to Marac?

Staff from specialist agencies identified several challenges that make it difficult for victims/survivors to disclose 'honour'-based abuse, but they felt that they had a good understanding of how to treat potential victims/survivors to make them feel more comfortable and were generally confident that they would be able to identify cases of 'honour'-based abuse. However, they felt that other referring agencies that did not have a good understanding of the relevant issues within victims/survivors' cultures and religions would find it much more difficult to identify this type of abuse.

They also pointed to the many different challenges that they face when supporting victims/survivors of 'honour'-based abuse, including victims/survivors often take a long time to disclose their abuse and usually prefer to disclose to a professional from the same religious/cultural background as they are.

¹⁵ Independent domestic violence advocate (Idva) term used in England and Wales is the equivalent to an Independent domestic abuse advocate (Idaa) term used in Scotland.

Participants also pointed out that staff in non-specialist services often lack the understanding of 'honour'-based abuse necessary to recognise this type of abuse as well as to adequately support victims/survivors, and that cultural and ethnic prejudices sometimes exhibited by agencies were having negative impacts on victims/survivors.

Perhaps unsurprisingly given the inconsistency of support across Maracs, the specialist service practitioners who formed part of the focus groups were not confident in referring 'honour'-based abuse cases to Marac, in many cases because they did not believe they would be accepted. Even where cases were accepted, they found that the Maracs separated what was domestic abuse and what was 'honour'-based abuse and only concentrated on actions relating to the former, placing all the responsibility on the specialist services to take any actions relating to the 'honour'-based abuse.

Research question 4: What guidance is needed so Maracs can offer a best practice response to 'honour'-based abuse cases?

The challenges outlined above highlight the importance of having specialist staff involved with these cases when they are heard at Marac, something that both the Marac representatives in the survey responses and the specialist staff who participated in the focus groups said they would like to become more common. Marac representatives also need to give more weight to the professional judgement of these organisations when they refer cases to help them understand the risk for the victim/survivor. However, this increased participation from specialist services would need to be matched by increased resources to enable them to manage these extra responsibilities.

Other suggestions made by the survey respondents and the focus group participants to allow Maracs to better support victims/survivors of 'honour'-based abuse were clearer guidance, especially in cases where the primary perpetrator is a family member, as well as training on 'honour'-based abuse. Specific actions to consider when discussing 'honour'-based abuse cases at Marac that were suggested by focus group participants were for safety plans to be longer-term to reflect the complexity of the needs of the victim/survivor and for Maracs to include the perpetrator in these safety plans, treating family members who are perpetrating abuse in the same way that they would treat perpetrators who were partners or ex-partners. Finally, support needs to be even more robust for victims/survivors who have no recourse to public funds such as immigrants or asylum seekers, those that identify as trans or those who are not confident English speakers, as they face even greater risks.

Appendices

Appendix 1: Survey sent to Marac Chairs/Coordinators

Introduction

SafeLives is conducting this short survey as part of the Safer, Sooner project in Scotland.

To inform the development of new and updated guidance for Maracs, we are gathering data on referrals that involve so called 'honour'-based violence (HBV), including threats of forced marriage. We want to understand more about the prevalence of these cases at Marac, referral routes, and any support Maracs need to respond.

The survey will take 5-10 minutes to complete.

The survey has been distributed to Marac Chairs, Deputy Chairs and Marac Coordinators, however if you believe a colleague would be better placed to answer the survey, please do forward it on.

If you have technical problems completing the survey, please email scotland@safelives.org.uk.

About You

Name

Marac Role

Which Marac(s) are you responding on behalf of? (Tick all that apply)

HBV Referrals to Marac

- 1) **Do you record when referrals to your Marac involve so called 'honour'-based violence?**
(Yes or no)

If you answered no and you are able to, please provide an estimate to the following. If you answered yes, we would really appreciate you sharing this information with us.

- 2) **How many cases involving so called 'honour'-based violence were referred to your Marac in 2021?**
- 3) **Of these, how many involved threats of forced marriage?**
- 4) **On what basis were HBV cases usually referred?**
(Visible high-risk, escalation (in frequency/severity), professional judgement, repeat. Comment box for detail)
- 5) **How does your Marac respond to referrals involving HBV where the primary perpetrator is not deemed to be a partner or ex-partner?**
(Single-select: accept, refer on, not accepted/go back to referrer, dependent on circumstances. Comment box for detail.)

HBV Cases at Marac

- 6) **Do you draw on any specific guidance when responding to cases involving HBV, including threats of forced marriage? Please list anything here.**
(Free-text box to establish awareness of available resources)
- 7) **What would make it easier for your Marac to respond more effectively to cases involving HBV?**
(Free-text comment box)

Appendix 2: Focus group schedule

Introduction

Welcome

Thanks for agreeing to be part of the focus group. We appreciate your willingness to participate.

Introductions and consent

Introduce facilitators and go through consent (forms should have been returned in advance, but go over principles again):

- Participants can withdraw at any time before or during the focus group and will be able to withdraw consent for anonymised quotes to be used in follow up reports up to 2 weeks afterwards.
- Participants will not be able to withdraw consent for data to be used in the analysis after the focus group has taken place.
- The focus group will be recorded, and that recording will be transcribed. The recording and transcription will be made available to the team working on this project and the transcriber until the transcript has been received.
- Images and the names you share with us will be shared with the transcriber. If you are not happy with this, you can change the name that shows on your account and turn your video off before we start recording.
- Anonymised views can be shared to inform this research and future research on this topic.
- The team will keep all information safe and secure, and all information will be confidential to the research team. The only exception to this is if researchers are told that a person is at risk of serious harm. In this case they would have a duty to inform a third party.

Purpose of focus group

We are conducting the focus groups as part of the Safer, Sooner programme in Scotland. As you know, this programme is about providing support to Maracs and developing the Marac response to victims of abuse. We will be focussing on different topics that relate to Marac and the wider sector, and HBV/threats of FM is our first spotlight area. We are gathering data about HBV referrals to Marac and the response, and working with specialist practitioners like yourselves, as well as Maracs, to find out what guidance Maracs need to deliver the best response they can to victims of HBV in Scotland.

We are really interested to hear your experiences of referring victims of HBV to Marac and what you see the challenges as being. Your opinions on the multi-agency response to these victims will help us understand the best ways of working together to make victims/survivors in Scotland and supported to safety at the earliest opportunity.

Topics for discussion

- Experiences of the Marac response to HBV referrals
- Referral criteria for HBV cases at Marac
- Developing the best practice Marac response to HBV/FM

Anonymity and ground rules

1. We will be recording the discussion for accuracy. You will remain anonymous. We won't identify anyone by name in our report. We may mention job sectors and roles as this will be relevant to the analysis of multi-agency processes. The recording itself will not be made available to other people and will be destroyed once we have a fully typed up version of the conversations.
2. You are free to leave the focus group at any time.
3. We want to hear from you and for everyone to have the opportunity to share their view. There are no right or wrong answers; everyone's experiences and opinions are important.
4. As we are recording this conversation, please try to speak one at a time so we can pick everything up on the recorder.
5. What is said in this space stays here; we want everyone to feel comfortable in sharing their opinions. This is the case unless someone raises a safeguarding issue.

Clarify terminology

For brevity, we will use the acronym HBV when asking you questions. We include cases involving threats of forced marriage within this.

Questions

Topic area	Question
Introduction	<p>Let's start with introductions. Please tell us your name, a bit about your work role, and your experience supporting victims of HBV/FM in Scotland. (Participants can opt to not mention their name if they do not want this to be shared with the transcriber.)</p>
Experiences with HBV/FM cases	<p>We are interested in your experiences working with cases of HBV/FM. What are the biggest challenges responding to cases involving HBV/FM? Prompt: Ensuring safety of the victim? Securing professional support from other agencies?</p> <p>How does this differ from cases involving domestic abuse where HBV is not present? Prompt: Does this differ from cases involving domestic abuse that aren't intimate partner violence?</p> <p>What elements do you consider when carrying out risk assessments in these cases? Probe: Do you conduct a formal risk assessment? If so, what do you use?</p> <p>What forums or processes have you used or referred into, to support these victims?</p>
Experiences referring to Marac	<p>Have you ever referred a case of HBV/FM to Marac? If so, have you attended Marac meetings where these cases are discussed?</p> <p>When you have referred victims of HBV to Marac, how have Maracs responded? Prompt: Is there a difference in Marac response when referring cases where the primary perpetrator is a partner or ex-partner, and when they're not?</p> <p>What are the challenges when referring these cases to Marac? Probe: Have you ever had a referral for a cases involving HBV refused? If so, what reasons were given for this?</p>
	<p>What are your experiences of using the professional judgement criteria to refer victims of HBV to Marac? Probe: How have Maracs responded?</p> <p>How confident are frontline staff applying the professional judgement criteria for HBV cases?</p> <p>What are the difficulties in applying the professional judgement criteria for HBV cases? Probe: Are there particular challenges around recognising risks in relation to, for example, coercive control in these cases compared to others involving domestic abuse?</p>
	<p>Does anyone have an example of a good response? What did the Marac do well?</p> <p>How has the Marac process impacted on the victims you have referred? Prompt: Are there any examples of positive/negative impacts? What could be improved?</p>
Best practice guidance	<p>What would need to change to make the Marac process more accessible to victims of HBV?</p> <p>What are the most important things Maracs need to consider in HBV cases?</p> <p>What are good outcomes for victims of HBV at Marac? Prompt: What would be a good outcome for a victim's safety? What would be a good outcome for their wellbeing?</p>

	When it comes to cases involving HBV, what information do services need to consider in order to apply the professional judgement criteria?
Close	Is there anything else you would like to say about this topic that we haven't covered already today?

Useful probes <ul style="list-style-type: none"> • Can you give me an example? • What do others think about that? • Who has a different perspective? • Can anyone else add to that? 	<ul style="list-style-type: none"> • What effect did that have? • Why do you think that is? • What were the advantages/disadvantages?
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Appendix 3: Codebook used to analyse focus group transcripts

Code	Description	Abbreviation
Positive Marac responses to HBV referrals	Maracs responding to HBV referrals in a way that the speaker supported, that had positive outcomes for the victim and/or positive outcomes for the referring agency	Res-pos
Negative Marac responses to HBV referrals	Maracs responding to HBV referrals in a way that the speaker did not agree with, that had negative outcomes for the victim and/or referring agency	Res-neg
Examples of supporting agency good practice in HBV cases	Examples outside of the Marac process of any service providing support to HBV victims or managing HBV cases in a way that the speaker supported	Case-pos
Examples of supporting agency bad practice in HBV cases	Examples outside of the Marac process of any service failing to provide support to HBV victims or managing HBV cases in a way that the speaker supported	Case-neg
Challenges with HBV cases	Any aspect of HBV cases that make them particularly challenging to identify or support.	Case-chal
Confidence in referring HBV cases to Marac	Suggestions that there would be positive outcomes if an HBV case were to be referred to Marac	Ref-conf
Lack of confidence in referring HBV cases to Marac	Suggestions that there would be negative outcomes if an HBV case were to be referred to Marac	Ref-lack
Guidance for Maracs	Direct suggestions of how Maracs can improve outcomes for HBV victims or general suggestions of how HBV victims can be better supported that Maracs can implement.	Impr-Mar
Desires for improvements outside of Maracs	General suggestions of how HBV victims can be better supported that would be implemented outside of Marac.	Impr-oth

Appendix 4: Numbers and Proportions of ‘honour’-based abuse and Forced Marriage Referrals by Marac

Marac	Total number of ‘Honour’-Based Violence Cases	Total Number of Forced Marriage Cases	All Cases	Percentage of Cases that are ‘Honour’-Based Violence	Percentage of Cases that are Forced Marriage
Aberdeen City	2	0	459	0.4%	0%
Aberdeenshire	1	0	227	0.4%	0%
Angus	0	0	81	0%	0%
Argyll & Bute	0	0	137	0%	0%
Caithness & Sutherland	-	-	60	-	-
Dumfries & Galloway	2	1	138	1.4%	0.7%
Dundee	5	1	153	3.3%	0.7%
East Dunbartonshire	2	0	85	2.4%	0%
East Lothian	0	-	129	0%	-
East Renfrewshire	3	1	138	2.2%	0.7%
Edinburgh	-	-	231	-	-
Fife	-	-	317	-	-
Greater Glasgow	30	10	1051	2.9%	1.0%
Inverness	-	-	217	-	-
Lochaber	-	-	42	-	-
Midlothian	1	-	107	0.9%	-
Moray	0	0	147	0%	0%
North Lanarkshire	0	0	524	0%	0%
Orkney	-	-	28	-	-
Perthshire	0	0	81	0%	0%
Renfrewshire	2	0	122	1.6%	0%
Ross-shire & Skye	-	-	101	-	-
Scottish Borders	0	0	123	0%	0%
Shetlands	-	-	23	-	-
South Lanarkshire	0	0	369	0%	0%
West Lothian	6	0	143	4.2%	0%
Western Isles	-	-	28	-	-

About SafeLives

We are SafeLives, a UK-wide charity dedicated to ending domestic abuse, for everyone and for good.

We work with organisations across the UK to transform the response to domestic abuse. We listen to survivors, putting their voices at the heart of our thinking. We look at the whole picture for each individual and family to get the right help at the right time to make families everywhere safe and well. And we challenge perpetrators to change, asking 'why doesn't he stop?' rather than 'why doesn't she leave?' This applies whatever the gender of the victim or perpetrator and whatever the nature of their relationship.

Our Scottish publication **Whole Lives** highlighted that every year, nearly 130,000 people in Scotland experience domestic abuse. There are over 9,000 people at risk of being murdered or seriously harmed; over 12,000 children live in these households. For every person being abused, there is someone else responsible for that abuse: the perpetrator. And all too often, children are in the home and living with the impact. Domestic abuse affects us all; it thrives on being hidden behind closed doors.

We must make it everybody's business

Contact

Please contact Scotland@SafeLives.org.uk for further information or questions in relation to this guidance

