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Tallawah

**a briefing paper on black and 'minority ethnic' women
and girls organising to end violence against us.**

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This paper seeks to provide a framework for understanding the nature, and the importance of, specialist organisations which are led by Black and 'minority ethnic' (BME) women and which work to address all forms of violence against BME women and girls. We have deliberately chosen to speak in terms of 'us' and 'we', as recognition that violence against women and girls is widespread and devastating in its effects; and has direct and indirect impacts on the lives of all women and girls.

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Imkaan is a London based Black and 'minority ethnic' women's organisation. We are the only UK based, national second tier women's organisation dedicated to addressing violence against Black and 'minority ethnic' (BME) women and girls. The organisation holds nearly two decades of experience of working around issues such as domestic violence, forced marriage and 'honour-based' violence. We work at local, national and international level, and in partnership with a range of organisations, to improve policy and practice responses to BME women and girls.

Imkaan works with our members to represent the expertise and perspectives of frontline, specialist and dedicated BME women's organisations that work to prevent and respond to violence against women and girls. Imkaan also delivers a unique package of support which includes: quality assurance; accredited training and peer education; sustainability support to frontline BME organisations; and facilitation of space for community engagement and development. Our research activities support the ongoing development of a robust evidence base around the needs and aspirations of BME women and girls, as well as promising practice approaches to addressing violence. Imkaan is at the forefront of programmes and initiatives relating to forms of violence that disproportionately affect BME women and girls.

INTRODUCTION

Our approach draws on the collective expertise of minoritised¹ women and girls as survivors, practitioners, activists, advocates and academics. This is not new. This is simply a reconceptualisation of our work, that allows us to more clearly articulate what meaningful ending violence against women and girls practice is for us.

We offer this reconceptualisation, not as a prescriptive model which further essentialises BME women and girls, but as an opportunity for us to mark the boundaries of our own work. We are committed to developing and strengthening ways of working that reflect *who we are* as opposed to *who we have been told we are / should be*. Thus, this reconceptualisation is designed to frame and underpin our work, not as abstract concepts, but as critical points of analysis and practice.

We recognise that the expertise of specialist, dedicated BME ending violence against women's organisations is often undervalued and routinely overlooked within policy and programming priorities at both local and national levels. Yet these are the very organisations that are lifelines for so many BME girls, women and their children. The work of these organisations is specialist, diverse, innovative and responsive. As such, Tallawah does not present a fixed model of service provision. Instead, this is an **approach** and a **framework** which captures *how* organisations work rather than each element of *what* they do. Tallawah recognises that 'by and for' BME women's specialist organisations and the girls, women and children they serve, live and operate in an ever-changing landscape, and therefore, the framework provides space for movement and adaptation.

Our approach is rooted in intersectional² analysis and practice, which has its roots in Black feminist thinking, activism and practice. This goes beyond the dominant narratives of a single [male] perpetrator / groups of [mainly male] perpetrators causing harm to a single [female] victim in the context of sex / gender inequality, to one which takes into account that differently situated women encounter inequality in different ways. This analysis allows us to examine the

¹ While we recognise that the term Black and minority ethnic (BME) is commonly used in a policy and programming context, we note that the term is in itself problematic in that minoritisation is a process. As such, individuals and communities that are defined as minorities are likely to know themselves by their own identities e.g. African-Caribbean, Black British, British Asian etc.

² "Intersectionality refers to particular forms of intersecting oppressions, for example, intersections of race and gender, or of sexuality and nation. Intersectional paradigms remind us that oppression cannot be reduced to one fundamental type, and that oppressions work together in producing injustice." (Hill Collins, 1990:18).

different ways that violence is perpetrated and experienced, with recognition that BME girls and women's experience of gender inequality inevitably intersect with 'race' inequality and may also intersect with other sites of oppression which include class, sexuality, age, disability, caste, belief and religion. To ignore these intersections, is tantamount to prioritising a single aspect of a girl / woman's reality at the expense of others; or to render different elements of her life essentially problematic or indeed invisible.

Violence against women and girls

We take a survivor-centred approach to violence against women and girls; this is directly linked to the unequal status that women and girls hold in all of our societies. We recognise the connections between all forms of violence against women and girls, and draw on the following definitions of violence against women, while also taking into account the specific ways that a girl child may be subjected to violence.

'any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life'

(United Nations, 1994)

'Gender-based violence is violence that is directed against a woman because she is a woman or that affects women disproportionately³.

(CEDAW, 1992)

Further,

'violence against women and girls is rooted in historical and structural inequality in power relations between women and men, and persists in every country in the world as a pervasive violation of the enjoyment of human rights'

(UN Women, 2013)

³ CEDAW, General Recommendation No. 19 (1992) on Violence Against Women

'Violence against women and girls is both a cause and consequence of gender inequality'

(HM Government, 2016)

This includes, but is not limited to, sexual harassment, domestic violence, sexual violence, female genital mutilation, forced marriage, child sexual abuse, sexual exploitation and 'honour-based' violence. This also includes violence perpetrated by, or condoned by the State including the incarceration of vulnerable women in immigration detention centres.

Tallawah⁴

Tallawah has four overlapping, inter-connected core elements, and it is impossible to consider one of these without engaging with the other. In many ways, Tallawah reflects this extract from the Combahee River Collective,

'we are actively committed to struggling against racial, sexual, heterosexual, and class oppression, and see as our particular task the development of integrated analysis and practice based upon the fact that the major systems of oppression are interlocking.'

(Combahee River Collective, 1977)

The four elements of Tallawah are **safety**, **support**, **space** and **social justice**. The following sections offer a brief summary of each element, along with an example of how this might present in practice.

Safety

'99% said that the BMER service had made them feel **safer** and protected overall'

(Vital Statistics 2012)

⁴ Tallawah is a Jamaican word which means strength. It is commonly used when this strength is not immediately obvious, for example when someone is small, and assumed to be 'weak'.

'The state of being protected from or guarded against hurt or injury; freedom from danger'

(Oxford English Dictionary, 2017)

Safety will mean different things for different girls, women and their children. However, we assert that, at a fundamental level, safety involves a disruption of systems of harm. In practice, this could mean a range of things including individual work with a girl / young woman struggling with the impact of child sexual abuse / exploitation; it could also mean provision of appropriate places of safety available for young women at risk of forced marriage, or adult women and their children who are fleeing abusive situations e.g. in specialist, dedicated refuges.

In the UK, much of the work around violence against women and girls is dominated by ideas of safety which are focused on risk reduction and management. While for some women and girls this is incredibly important, particularly at crisis points, this (sometimes linear approach) often ignores the broader context in which a girl / woman is being harmed.

On the other hand, work around safety which engages with the different systems of harm that BME girls, women and their children encounter, is likely to be relevant to our lived experiences. This work is also more likely to be transformative and meaningful. Thus, safety in this sense also disrupts the harms of racism and other forms of oppression, and also engages beyond the realm of the immediate and the physical. An effective intersectional practice approach to safety is therefore likely to engage with a woman's experiences of her own well-being, her sense of 'place' and belonging, how she 'feels', and critically what makes *her* feel safe.

For example, although religion and spirituality have operated as points of contestation within and outside of various feminist thinking and practice, some women relate to their faith as a core part of who they are. Thus an environment which is hostile to any engagement with faith is likely to be experienced as unsafe. Similarly, for women who have experienced religion and faith as oppressive and problematic, an environment which is dominated by faith-based narratives is unlikely to feel safe. Ensuring a mature, anti-oppressive, secular space which is able to support women through their different beliefs is therefore critical.

Support

'The action or an act of helping a person or thing to hold firm or not to give way; provision of assistance or backing'

(Oxford English Dictionary, 2017)

'The action or fact of holding up, keeping from falling or giving way, or bearing the weight of something'

(Oxford English Dictionary, 2017)

As work which responds to issues such as domestic and sexual violence has become more mainstreamed, ideas of what constitutes 'support' have become increasingly driven by State ideas of what good 'outcomes' and outputs are. These ideas do not always connect with what good outcomes may be, as defined by survivors of violence; or what impact may look like as defined by an organisation delivering survivor-centred services.

An effective, intersectional practice approach recognises and responds to the needs of survivors. We know that for many BME girls and women, it is critical that we are supported in ways that acknowledge the various ways in which violence is enacted against us. It is not sufficient to speak about violence against women and girls as only a gendered phenomenon, while ignoring the damage that is done to us through other systems of inequality. For example, we know that experiences of racism can silence women and girls. Survivors can be forced to balance their need for support, against concerns about how their 'communities' are perceived. Narratives which portray BME communities as more dangerous, patriarchal, inclined towards extremism etc. have a direct impact on where survivors feel able to access support and how they engage with agencies. A failure to recognise and address this, effectively limits the support that is provided to survivors of violence.

A holistic approach to support for BME women and girls therefore requires attending to the impact of issues such as racism; and being able to address this in an environment which not only acknowledges the presence of racism, but also offers an antidote through i) the type of the support, ii) the way(s) that support is provided and iii) who provides the support. For example, young BME women [speaking](#) about their experiences of harassment in public spaces, note that this harassment is *racialised* sexual harassment⁵. Support for BME women and girls around sexual harassment and other forms of violence must therefore engage with the impact of

⁵ 'I'd just like to be free' - a film by Imkaan and the EAW coalition

<https://www.youtube.com/watch?v=Ij-qpvibpdU>

phenomenon such as racism, xenophobia and other oppressions - whether this work is casework, group work or online support. In our experience, this type of holistic, intersectional approach is best understood and delivered by BME women, with BME women and girls, for BME women and girls. An organisation which is designed to address violence against BME women and girls, and which is committed to challenging structural inequality rather than reproducing State discourses around BME communities, is also much more able to develop, manage and expand this support, than a single BME worker in a non-BME organisation. Crucially, organisations which employ a single specialist BME worker, to 'tick equality boxes', or which offer a BME service as an add-on (too often to win contracts and expand their portfolio), rarely engage in the critical work and reflection that is required to transform the organisation's practice more broadly.

A holistic approach may also include practical support that responds to the impact of economic inequality, immigration control, inequality in education systems and so forth. This survivor-centred approach aims to not only address the immediate impact of violence on a survivor's life, but also to ensure that she has the tools to take full control of her life.

Space

'Safe spaces are "social spaces where Black women speak freely". These safe spaces are of course common occurrences for all oppressed groups. In order for an oppressed group to continue to exist as a viable social group, the members must have spaces where they can express themselves apart from the hegemonic or ruling ideology.'

(Patricia Hill-Collins, 1990)

'Extent or area sufficient for a purpose, action, etc.; room to contain or do something.'

(Oxford English Dictionary, 2017)

We understand the importance of 'by and for' spaces, where BME women and girls are able to connect with other BME women and girls. 'By and for' spaces enable opportunity for self-expression, self-definition and self-determination. This is critical, as women and girls who are

at risk of, or who have experienced violence, should be afforded the opportunity to 'recover' from that violence in environments that are safe from discrimination and marginalisation.

People who have been minoritised often find that speaking 'freely' in wider environments is simply not possible. From the classroom to social media, there can be a hostility and even chastisement that comes with expressing views and perspectives that fall outside of the dominant discourse. For example, there are countless examples of Black feminists being shunned, silenced or marginalised for critiquing power structures in wider feminist spaces. As a survival strategy, BME people, of all ages, often engage in a kind of self-censorship which filters through to support services. We know through our own practice, that many BME staff working in non-BME organisations will also silence themselves, in fear of challenging the power structures, especially once they have experienced the negative consequences that can come with 'speaking up'. Thus they continue to provide services within organisations that fail to transform their (the organisation's) own relationship with power, while working with survivors to redress the impact of the abuse of power. We also know from our practice, that many BME survivors routinely silence themselves in non-BME specialist spaces, not feeling able to speak about aspects of their experiences for i) fear of their entire 'communities' being judged, ii) not feeling 'at home' with non-BME practitioners or in non-BME organisations. Given the silencing and stigmatising effect that violence has on women and girls, and the shame that survivors of any backgrounds will often feel with respect to their own experiences, no survivor should be further silenced. In contrast, sometimes BME survivors speak of interacting with workers in a specialist BME organisation with a confidence that they will 'understand', 'know where I am coming from' and 'get it'. This sometimes refers to a drawing on shared experiences of inequality, but can also relate to the highly contested role of 'culture'. Despite the contestations and challenges around culture as a concept, shared cultural contexts can offer connection, knowledge and nuance. Thus while we are hesitant to speak about culture in ways that are fixed and linear, the importance of culture should not be underestimated, as it can be a powerful tool in support work and providing space.

Where BME women and girls are able to 'speak freely', the effect can be empowering and liberating. Women sometimes describe this as finding their 'voice'. Space is critical if BME women and girls who have been subjected to violence are to retrieve a sense of self, and one of autonomy and independence. Space is also necessary if we are to make decisions about action we need to take. For example, women and girls experiencing violence are too often

pushed into responses that are focussed on criminal justice processes or those which have been designed around those processes. While this can be useful for some women and girls, many more women and girls seek respite, ways out, affirmation that 'I am not the only one' and so forth. For those women and girls that choose to pursue criminal justice pathways, space is also essential. The reflection, decision-making and support required to engage with what can be a difficult and traumatising process, requires on-going, appropriate space.

Space therefore can be: coming together, sharing, decision-making, rebuilding, recovering, healing, challenging, speaking, listening, learning, studying, growing, working 'knowing' and more.

Social Justice⁶

'Social justice is concerned not in the narrow focus of what is just for the individual alone, but what is just for the social whole.'

(Capeheart & Milovanic, 2007)

'...meaning of social justice centred on the ideas of disrupting and subverting arrangements that promote marginalization and exclusionary processes.'

(Theoharris, 2007)

The work that we do as BME women, with BME women and girls, cannot be de-linked from a broader commitment to, and struggle for, social justice. Social justice movements and work have been at the forefront of creating change in all our societies. This can be change in a range of spheres, from obtaining policy and legislative shifts to creating broader societal changes; and we know from longitudinal research⁷ that "autonomous mobilization of feminists" has been at

⁶ Theoharris (2007) notes that, '*Social justice supports a process built on respect, care, recognition, and empathy. Goldfarb and Grinberg define social justice "as the exercise of altering these [institutional and organizational] arrangements by actively engaging in reclaiming, appropriating, sustaining, and advancing inherent human rights of equity, equality, and fairness in social, economic, educational, and personal dimensions"* (p. 162).'

⁷ Htun, Mala, and S. Laurel Weldon. "Civic Origins of Progressive Policy Change: Combating Violence against Women in Global Perspective, 1975–2005—CORRIGENDUM." *American Political Science Review* 109.01 (2015): 201

the heart of the strategic, legislative and policy changes that have occurred with respect to addressing violence against women and girls nationally and transnationally. BME women have not only been a part of broader feminist mobilisation in the UK, but as a movement and a sector, we have our own social justice legacy. This includes impacts on legislation, policy and programming in areas such as services, media regulation, immigration and specific manifestations of violence e.g forced marriage. It is important therefore to recognise that the services that many organisations provide, have emerged out of the feminist and anti-racist movements, and that this positioning is a core aspect of the sector's ability to influence, innovate and evolve. BME women's organisations are constantly creating connections between one woman's journey, the organisation, their 'communities' and society.

While a connection between service delivery and social change is not unique to specialist, BME women's organisations, the specific ways that our sector routinely engages across intersecting inequalities is different from the wider ending violence against women sector. For example, 'race' is not an add-on in our work, it is a core priority. BME women's organisations are also in a unique position to challenge, build trust, and drive change within our communities. Shifts in attitudes at community level around any form of violence against women and girls, have occurred because of the leadership and activism of BME women. This leadership is routinely connected to practical ending violence work.

One of the reasons we critique models of work which focus simply on employing a single BME worker, or setting up a BME service without a shift in the organisation's structure, is the resulting disconnect that occurs between service delivery and wider social change. This disconnect can mean that individual workers may deliver good services, drawing on cultural connection, individual social justice work etc. but this takes place in a vacuum; which in turn places pressure on individual workers, who are then required to be sole experts on 'BME issues', and often to do work 'at community level'. Workers who are based in specialist, BME organisations working within an anti-oppressive framework, are rooted in organisations that are part of a wider BME women and girls sector and movement. As such, 'by and for' organisations do not include BME women as caseworkers only, BME women are responsible for governance, management, service delivery, organisational development, community work, strategic advocacy and more. 'By and for' organisations are engaged in leadership and transformation which is rooted in, but goes beyond, an individual woman's journey; and individual women are able to draw on this as a source of safety, support, space and justice.

Conclusion

The struggle for the preservation of specialist, BME led ending VAWG provision has continued over decades. We find ourselves constantly having to justify our very right to exist as organisations. In many ways, this distracts us from the critical work of organising to address all forms of violence against us. This has had a particularly damaging effect on how we organise as diverse BME women. For example, there is a dearth of specialist provision which is 'by and for' [British] African-Caribbean women and girls. In addition, organisations led 'by and for' [British] African women and girls are often assumed to be able to work only around 'harmful practices' and especially female genital mutilation. The result is that there are groups of women and girls that are under-represented even within the BME women's sector, and this needs to be addressed as a matter of urgency. Our sector, like any other, needs to continue to reflect, respond and evolve. We know that we have to continue to find ways to survive and thrive in a context of economic, social and political uncertainty. We also know that there are critical conversations that are urgently needed that deal with issues such as caste, class, sexuality and disability and that there is work which needs to be done to ensure continuous improvement and the best outcomes for BME survivors.

Violence against women and girls is a human rights issue. It is also a cause and consequence of gender inequality. As BME women and girls' experience of gender inequality intersects with issues such as 'race', it is essential that strategies to address this violence recognise and respond to these intersections. BME women are best placed to understand, respond, resist and prevent violence against us, and are an essential component of broader work to ensure that BME women and girls are able to realise our rights including safety, freedom, dignity and autonomy.

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