Violence against Minority Women:

Tackling Domestic Violence, Forced Marriage and ‘Honour’ Based Violence

Covering documents submitted in part fulfilment for the degree of PhD by published works

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### Declaration

None of the material contained in this submission has been submitted for a degree, diploma or similar qualification at a University or similar institution.
Introduction

This commentary outlines how my published works have contributed to knowledge on violence against black and minority ethnic (BME) or minority women\(^1\) in the UK, particularly in relation to domestic violence, forced marriage and so-called ‘honour’ based violence (HBV). They help to define and enhance our understanding of these issues. In addition, they have critiqued multiculturalism and influenced, advocated and developed the former Home Office Minister, Mike O’Brien’s concept of ‘mature multiculturalism’ (Parliamentary Debates, 1999; also cited in Home Office, 2000:10), and utilised the theoretical framework of intersectionality (Crenshaw, 1989 and 1991) to address these problems. I have also located my works within the framework of violence against women and girls (VAWG), secularism, equalities and human rights. My publications have reflected upon and influenced policy, practice and research, and as such, contributed to documenting the history and achievements of black feminism.

These works are based on 30 years of experience of engaging with race, gender and class issues as related to BME women facing gender based violence, particularly as a member of a leading black and minority women’s

\(^{1}\) The terms ‘BME women’ and ‘minority women’ are used interchangeably in this commentary.
organisation, Southall Black Sisters (SBS). For 27 years my work at SBS has involved working with around 10,000 vulnerable and disadvantaged BME women and children. Most of these women face domestic violence, rape and sexual abuse, forced marriage, HBV and dowry abuse, often inter-related with problems of immigration, asylum, poverty and destitution, including no recourse to public funds (NRPFs), and mental health, suicide and self-harm. I have been involved in a number of high profile tragic cases of suicide, domestic homicide, so called ‘honour’ killings, forced marriage and battered women who kill. They mark key milestones in my professional life and activism, and in the history of the wider BME women’s movement. My publications are grounded in my black feminist activism, casework and policy advocacy which is inseparable from my theorising and research. My works therefore use a practitioner, participatory and action research approach (Maguire, 1987; Durham, 2002; Shaw, 2005; Somekh, 2006). They also use a black feminist standpoint (Collins, 2000 [1990]); ‘insider’ (Merton, 1972; Marriam et al, 2001) and anti-oppressive research (Humphries and Truman, 1994) perspective with the aim of greater empowerment and social justice for BME women facing gender based violence.

2 SBS, founded in 1979, has a nationally recognised expertise on black and minority ethnic women and gender based violence, especially domestic violence and harmful practices in South Asian communities. It provides frontline services, and undertakes policy advocacy, educational work, research and campaigning on these issues. I started work at SBS in 1987. Many of the references to the achievements of SBS incorporate my contribution.
The debates on forced marriage and HBV began in the late 1990s. They took place against a backdrop of black feminist activism and the growth of grassroots services for domestic violence led by Asian women’s groups like SBS, which emerged from the anti-racist movement of the 1970s (Shah, 1988; SBS, 1990; Brah, 1996; Dustin and Phillips, 2008).

State policy on race relations in the 1950s and 1960s took an ‘assimilationist’ approach to minority communities. From the mid 1960s, however, this gave way to a more liberal, but neo-colonial multicultural policy. For the anti-racist left, however, multiculturalism ignored structural racism and, as black feminists argued, also violence against BME women. The growing momentum of the BME women’s movement and arrival of New Labour liberalism in 1997 helped to develop a new ‘mature multiculturalism’ emphasising greater gender equality. Despite some major reforms, growing race discontent, the rise of religious fundamentalism and the post 9/11 ‘war on terror’ in the 2000s meant that government returned to the policies of assimilation, now dressed up as social cohesion or ‘social integration.’ Simultaneously, the state pursued policies of multi-faithism which respected religious difference, particularly as a way of diffusing Muslim extremism, but ignored gender equality. The tensions created by these developments have now heightened in a climate of austerity.

As black feminists struggled to hold onto the gains made, by the late 2000s alliance building proved increasingly difficult as the BME women’s movement
became divided on issues of religious identity, immigration and arguments about culture versus patriarchy as the cause of violence against BME women. Many on the left were uncomfortable with forced marriage and HBV being strongly linked to minority cultures and religions, particularly Islam, creating allegations of racism, Islamaphobia and western imperialism (Welchman and Hossain, 2005; Sen, 2005; Phillips, 2007; Gill and Anitha, 2011; Thiara et al, 2011).

While debates on VAWG have been dominated by gender equality, those on violence against BME women and girls have engaged with the vexed question of similarity and difference. The notion of the ‘collective victimhood’ (Thiara and Gill, 2010: 42) ignores differences between minority and white majority women, while pluralist or diversity arguments can equally fail to recognise commonalities (Sen, 2005). The politics of ‘transversalism’ (Yuval Davis, 1997: 125) has been advocated by some to help to build bridges or dialogue across cultures and political activism. These recognise common ground with white majority women, but also foreground the multiple discrimination faced by BME women subject to race, gender and class power differentials as encapsulated by the concept of intersectionality.

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3 The term ‘transversal politics’ was coined by Guattari (1974) and then developed by Yuval-Davis (1997 and 1999), Cockburn (1998 and 1999) and Cockburn and Hunter (1999). It aims to build women’s and feminist alliances across political and cultural boundaries/borders based on common objectives rather than identity politics.
In this wider context, prior to my work on minority women experiencing domestic violence and harmful practices of forced marriage and HBV, which began in the late 1980s, these issues remained hidden with little or no research, knowledge, policy development or practical understanding by agencies. They were tackled predominantly by Asian women’s groups. The establishment of the Home Office Working Group on Forced Marriage in 1999 was the watershed moment when the state first began to recognise harmful practices, and which was also a milestone in my theorising, practice and activism. This development led to heated debates on forced marriage and HBV at the discursive and policy levels focusing on definitional problems of consent and coercion in forced marriage, and the distinction between HBV and domestic violence. It also brought to the fore the tensions between race and gender, and responses based on community or state (in)action.

As a practitioner and activist working in the field, these developments compelled me to research issues of domestic violence, forced marriage and HBV in order to increase knowledge and understanding of the impact on BME women, and to develop appropriate and effective interventions to tackle them. This required a methodology which recognised my position as a practitioner working directly with BME women and children, and as a participant in the wider political black feminist movement. Therefore, in much
of my research I adopted a practitioner, participatory approach within a black
feminist and anti-oppressive framework of reference.

As a South Asian woman, I generally had an ‘insider’ status as most of the
service users at SBS are from this background. However, I was aware that in
some respects, I was an ‘outsider’ or only a ‘partial insider’ in cases of women
from other backgrounds due to differences in ethnicity, nationality, age,
immigration status etc. Nevertheless, my position as a practitioner and activist
at SBS usually helped to build trust. Problems with interpretation and
representation were reduced by conducting in-depth interviews.

Working with and researching victims of abuse required an approach which
was ethically sensitive with a high degree of reflexivity and backed up with on-
going counselling and support. I recognised and found ways of overcoming
imbalances of power produced by my status as a researcher and practitioner at
SBS by, for example, inviting participants to make any concerns clear from the
beginning of the interview/focus group. I also asked if they wanted to raise
issues on areas which my questioning did not cover enabling them to
participate in knowledge production as well as influence the recommendations
of the research.

I also had an ‘insider’ role as a black feminist activist and practitioner. I was
aware that this too would bring challenges in relation to research with other
activists and professionals with different perspectives and positions. Again, my
approach aimed to minimise problems with interpretation through a process of reflexivity and cross referencing data.

I largely utilised holistic qualitative methods involving often in-depth, semi-structured or unstructured interviews, focus groups and discussions with victim-survivors, activists, practitioners and policy makers as well as case studies or life histories obtained from interviews, SBS case files and/or those available publically. I also examined public reports and policies as well as articles, publications and media reports. In addition, I referenced this information with statistical and survey data from SBS and/or from other agencies and research.


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4 Although this policy has changed recently, it was normal practice within SBS that policy based publications were not credited to individuals. Please see attached a statement from SBS which confirms that I researched and authored this report.

5 To avoid repetition, I have outlined the general methodologies used in each publication only once in this commentary.
My research sought to define and locate forced marriage and HBV within domestic violence, child abuse and VAWG as well as theoretical frameworks which recognise intersectional discrimination. While my early writings in the 1990s challenged the acceptability of ‘arranged marriages’ and multicultural sensitivities which ignored the rights of minority women, by the early 2000s I was the first to support, define and develop the notion of mature multiculturalism. I consistently raised these issues in my publications, locating these concepts and debates within the wider secular, equalities and human rights framework. This position recognises similarity and difference between BME and white majority women, avoiding both the constructs of the collective victimhood, which denies the specificity of BME women’s experiences, and the ‘diversity’ argument which does not recognise the commonalities. This ensures that alliances are made possible and orientalism (Said, 2003: xvii [1978]) is challenged. As such, my position aimed to build alliances among black feminist as well as with the wider progressive anti-racist, feminist, secularist and human rights movements. It also aimed to ensure that social policy and practice on violence against BME women reflected a greater understanding of BME women’s experiences with improved responses to address their specific needs based on recognition of intersectional discrimination.
Although my observations and analysis is contained in many of my publications, I have focused this commentary on 12 key articles and publications produced from 1996 to 2013.

The main argument of my commentary is divided into five sections, covering distinct but inter-related areas of works. These are as follows:

**Section 1** refers to my contribution to knowledge on the critique of multiculturalism and the concept of mature multiculturalism, which was initially developed in relation to forced marriage, and resolves the tension between feminism and multiculturalism by tackling gender inequality without essentialising minority cultures or religions.

**Section 2** examines my critique of religious fundamentalism, and contradictory social cohesion and multi-faith policies, and how these have led to a regression in responses to BME women facing gendered violence. I argue for a secular and human rights approach to prevent the loss of the gains made by mature multiculturalism.

**Section 3** discusses how my works contribute to knowledge on the application of the theory of intersectionality in relation to domestic violence, forced marriage and HBV. My works have helped to increase an understanding of overlapping discrimination experienced by BME women facing these problems, thus improving policy and practice responses and enhancing political unity.
Section 4 highlights my contribution to critical knowledge on the definitions of forced marriage and how my works enhanced the understanding of the problem which led to improved state responses.

Section 5 shows my contribution in developing the definition of HBV and what it constitutes, particularly in relation to the dynamics of domestic violence and the debates on culture versus gender as causative factors. It also examines the positive impact this work has had on policy and practice.

The published works that form the basis of this submission are presented in Appendix 1. Where they are cited in the text, they are numbered and signified in bold.

A full bibliography of all my published work is provided in Appendix 2.
Knowledge on Forced Marriage, Multiculturalism and ‘Mature Multiculturalism’

The arrival of economic migrants or refugees to the UK in the 1960s and 1970s from the Indian Sub-Continent, Africa and the Caribbean created fears of being ‘swamped’ by racist and fascist forces in the UK. Although initially the state policy took a ‘colour blind’ approach to minority communities, by the mid 1960s minimalistic multiculturalism was evident (Wadia and Allwood, 2012).

In the 1970s the state adopted a more liberal multicultural approach, first articulated in education (Anthias and Yuval-Davis, 1992). This policy was borrowed from the British Raj in India, which accommodated differences through personal religious laws (Sahgal, 1992). There was also a realisation that racial justice had not been achieved (Anthias and Yuval-Davis, 1992; Brah, 1996). However, the interpretation of these policies reduced fighting racism to that of preserving the ‘traditions and cultures’ of different ethnic minorities (Sahgal and Yuval-Davis, 1992:15). They promoted a stereotypical notion of their ‘culture,’ (Phillips, 2007), which took on as much reverence as religion (Barry, 2002). The more different these cultures were from the mainstream, the more ‘authentic’ they were considered (Yuval-Davis, 1997: 57). This view of multiculturalism depoliticised ‘race’ by treating minorities as the ‘target of

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social policy rather than actors in the democratic system’ (Ali, 1992:103), and multiculturalism and anti-racism became seriously polarised in the 1980s (Brah, 1996). In this context, a growing black feminist movement led by groups like SBS complained of the failure of both the anti-racist movement and multiculturalism to address BME women’s human rights.

The tension between feminism and multiculturalism has also taxed the minds of several theorists. Although most scholars allow for the right to exit in cases involving gender based violence, the degree to which the state can be interventionist in minority groups is seen to be on a continuum. Minimalists (Kymlicka, 1995; Kukathas, 2003) place the burden on the individual and often ignore barriers to exit, including the social and psychological costs of family separation and social isolation. Women in particular find it difficult to exit due to barriers of socialisation and lower socio-economic status (Okin, 2002). The basic difference with this approach and feminism is that of priority of cultural group rights over gender (Okin, 1999). Others have argued for greater deliberative democracy and inter-cultural dialogue based solutions to the paradox. This view generally allowed for self-determination by minority groups provided that they share some ‘operative public values’ (Parekh, 2000:269) with the majority, even where some outcomes may be illiberal. Subgroups within minorities, such as women, however should be consulted and their consent more actively sought with a realistic right to exit for those who dissent.
(Parekh, 2000; Shachar, 2001; Benhabib, 2002; Deveaux, 2005; Spinner-Halve, 2005; Philips, 2007; Cantle, 2012).

‘Moral Blindness’ and ‘Mature Multiculturalism’

Gender inequality within BME communities was only fully recognised by the British state in relation to the debates on forced marriage, which emerged in the late 1990s in the wake of the death of Rukhsana Naz. In 1999, the then junior Home Office Minister, Mike O’Brien broke from the multicultural consensus by advocating the notion of ‘mature multiculturalism’ and argued that ‘multi-cultural sensitivity is not an excuse for moral blindness’ (Parliamentary Debates, 1999; also cited in Home Office, 2000:10). Since then, my works have consistently promoted and developed the concept of ‘mature multiculturalism’ to resolve the tension between feminism and multiculturalism. Mature multiculturalism not only challenges racial stereotypes and the ‘assimilationist’ agenda, but also allows for state intervention within minority communities to protect victims of abuse and human rights violations, particularly women.

In the 1990s, I worked with Mike O’Brien to introduce reforms to immigration and domestic violence law during which he became familiar with my criticism of multiculturalism in discussion and through my early publication ([5] Siddiqui, 1996). This article was based on interviews and discussions with survivors and professionals as well as campaigners, and conducted with the
aim of raising awareness of and creating reform on domestic violence within minority communities. This set the scene for 1999 when I presented a paper at a joint SBS and Institute of Public Policy and Research seminar on forced marriage organised on the request of the Home Office. In this paper, which became the basis for further research, I critiqued the failings of multiculturalism and called for a public inquiry and greater state intervention to protect victims of forced marriage within a human rights framework. Soon after this, in 1999 Mike O’Brien established the Home Office Working Group on Forced Marriage of which I was invited to be a member.

In my publications, a report for SBS ([12] SBS, 2001) and a further article ([7] Siddiqui, 2003a), I researched the issue of forced marriage. The article ([6] Siddiqui, 2000b) drew on early data gathered for these publications as well as previous research on domestic violence. The forced marriage research involved interviews and focus groups with service users/survivors\(^7\) at SBS, analysis of SBS case files and public cases. It also included interviews with professionals and activists as well examination of public policies. The work with survivors in particular required careful handling due to the sensitive nature of the questions and because most of them were young and vulnerable. Although conscious of the need to avoid exploitation due to my more powerful position, my experience as a practitioner helped to build trust and dialogue. For

\(^7\) I am using the terms ‘service users,’ ‘survivors’ and ‘victims’ interchangeably in this commentary.
example, when asked what reform they wanted, the service users were very forthcoming about the need for improved responses which did not place them under pressure to return home. They also wanted more help with their economic and housing situation as well as counselling, advocacy and support services.

As a researcher, practitioner and activist, I was acutely aware of my ‘insider’ role in the research, particularly as one of the imperatives for producing the report was to challenge government support for mediation. I had resigned from the Working Group just before it produced its report, *A Choice by Right* (Home Office, 2000), due to my opposition to mediation being advocated as a legitimate solution to the problem of forced marriage. Based on my experience with victims, I argued that mediation was a dangerous practice as it increased pressure on BME women to reconcile with abusive families. The need to raise awareness about the these dangers, however, was confirmed in case studies I examined and in my interviews with survivors and practitioners, who complained of the practice within the community and by some professional agencies, particularly social services. This was primarily because agencies conflated arranged marriages with forced marriages, and either did not regard them as a form of domestic violence or child abuse, or because they wanted to be culturally sensitive and feared allegations of racism. Even where individual professionals wanted to intervene, they often found that management or the
institution prevented them. Also, many professionals were concerned that even if they could intervene, they did not know how to deal with the problem in a sensitive and anti-oppressive way. There had been no training or guidance on the subject and the debate was new even to government and policy makers, who had no specific polices and strategies to address the problem. Although the Working Group had supported mature multiculturalism and recognised forced marriage as an abuse of human rights, its position was contradicted by its support for mediation and education initiatives led by community and religious leaders. This confused many professionals and policy makers, and angered survivors and black feminist activists.

In this context, my research in the SBS report and article ([12] SBS, 2001; [7] Siddiqui, 2003a) was critical to improving an understanding of the dynamics of forced marriage and the shortcomings of policies and practice rooted in multiculturalism. To tackle the problem, it recommended the alternative approaches of mature multicultural and human rights. This was based on a critique of multiculturalism and its tension with feminism, and advocated, defined and developed the concept of mature multiculturalism to resolve this tension.

I argued that under multiculturalism, different cultures were expected to co-exist peacefully, which required a respect for cultural difference. Minority communities were considered self-governing and cast as monolithic, static,
and bounded entities with no internal power divisions. Self-styled male community and religious leaders became the ‘gatekeepers’ and represented the interests of the community. The state consulted and negotiated with these leaders about the level and type of acceptable outside interference. Any criticism of minority cultures or outside interference were regarded as intolerant or even racist.

The failure of multiculturalism to recognise power divisions within communities meant that the needs and interests of oppressed subgroups, such as women, were not addressed, particularly as the conservative patriarchal leadership did not want to threaten their own power base. This meant that issues such as domestic violence and forced marriage were ignored as cultural practices which had to be either respected or resolved through self-policing. Women were pressured to use informal mechanisms where male community and religious leaders or family elders would mediate and reconcile women back to abusive situations. The violence itself was rarely challenged. Women were blamed for provoking violence by failing to live up to traditional expectations, and reminded that, according to their culture and religion, it was their duty and fate to tolerate abuse and suffer in silence so that they could save their marriage and/or uphold the honour of their parents and families.

This policy translated into agencies such as the police and social services pursuing a policy of non-intervention, including becoming involved in formal or
informal mediation to reconcile women with their husbands and families rather than providing safe exit options.

Multiculturalism, therefore, aimed to promote harmony \textit{between} rather than \textit{within} communities. As such, the state colluded with the oppression of women through a policy of appeasement with the male leadership, often nurtured to obtain the black vote. Even when these leaders were under pressure to tackle issues like forced marriage, they rarely gave more than ‘lip service’ ([12] SBS, 2001:7) to the problem. As such, under multiculturalism black feminists’ demands for freedom and equality were considered outside ‘cultural traditions’ (Narayan, 1998:95) and a westernised force, and therefore illegitimate.

Although several scholars and activists have also critiqued multiculturalism in the UK or British colonial regimes on similar lines (Mohanty, 1988; Sahgal, 1990; Ali, 1992; Brah, 1996; Yuval-Davis, 1997; Narayan, 1998; Okin, 1999; Patel, 2003; Thiara, 2003; Wilson, 2006; Phillips, 2007; Erturk, 2007), none have done it so extensively and consistently or at such an early stage in the debates on forced marriage in the UK and later, also those on HBV as highlighted in my articles ([8, 9, 10, 11] Siddiqui, 2005; 2008; 2011b and 2013a). Some were also influenced by my works, which I used in my activism and policy advocacy.
My publications not only influenced the formation of the concept of mature multiculturalism, they were also the first to support it as a progressive response to tackling forced marriage. In the publications ([6] Siddiqui, 2000b [12] SBS, 2001; [7] Siddiqui, 2003a; [1] Patel and Siddiqui, 2010), I argued that the concept empowered BME women using the human rights framework. It accepted that we live in a multicultural society where minority groups should be free of racial injustice and entitled to a degree of respect to pursue positive aspects of their cultural and religious values and practices. However, it also recognised power divisions and illiberal practices within minority communities demanded greater state intervention to protect the vulnerable such as women experiencing gendered violence. This allowed for agency and voice for those who dissented, but did not require full or permanent exit. My consistent promotion of mature multiculturalism, which was reflected in all my subsequent publications, was later extended and applied as a solution to HBV ([8, 9, 10, 11] Siddiqui, 2005, 2008, 2011b and 2013a) and domestic violence and mental health problems ([3, 4] Siddiqui and Patel, 2010a and b). This helped to both define the concept more clearly and consolidate its usage to other forms of violence against BME women.

I disseminated these works widely and their impact was evident in a range of ways. Both publications ([12] SBS, 2001; [7] Siddiqui, 2003a) had launch events attended by over 100 people and included survivors, practitioners,
policy makers, senior management, and leading figures from government and statutory agencies. I issued a press release, which attracted interest from national and local media and journals and newsletters. I have also raised the findings of the report at numerous working groups, conferences, seminars and meetings with statutory and voluntary sector agencies, and with campaigning and activists groups. Many policy makers and professionals used these, and later publications on HBV ([8, 9] Siddiqui, 2005 and 2008), also widely distributed, as their evidence base for reform. This is reflected in the government’s forced marriage guidelines (HM Government, 2009 and 2010b [2008]), Association of Chief Police Officers (ACPO) HBV strategies (2010 [2008]) and Crown Prosecution Service (CPS) guidance on forced marriage and HBV.8 They all reject non-intervention or mediation as an option, and support mature multicultural and human rights based interventions. Several scholars and activists also supported my views (for example, see Reddy, 2008; Patel, 2012 and 2013).

Knowledge on Violence against Minority Women, Social Cohesion and Religion

In recent years, my work has extended to developing a critique of social cohesion, religious fundamentalism and multi-faithism. Following the race riots of 2001, and particularly post 9/11 and 7/7 (the London bombings), government and social commentators became highly critical of multiculturalism for breeding segregation and terrorism. This led to the development of social cohesion policies aimed at tackling terrorism and especially Muslim extremism. These policies demanded reduced migration into the UK so that minority communities could integrate by adopting core ‘British’ values. Social cohesion abandoned policies to combat institutionalised racism (Wilson and Roy, 2011) and eroded mature multiculturalism.

Forced Marriage and Social Cohesion

Under social cohesion, policies on forced marriage were increasingly marked by a greater focus on exit and regulation, such as legal remedies like criminalisation and immigration controls (Phillips and Dustin, 2004) rather than ‘victim-friendly’ human rights approaches (Gill and Mitra-Khan, 2010: 128). 

In my articles ([8, 9] Siddiqui, 2005 and 2008), research (see details in section on HBV) highlighted how, under social cohesion policies, migrant communities were blamed for segregation and terrorism. They were accused of importing
‘barbaric’ value systems which justified practices such as forced marriage, which undermined social integration. This assumed that all practices within Britain were liberal, despite the existence of domestic violence, and viewed minority cultures as illiberal, and thereby justifying more immigration controls. Participants, which included service users and professionals, interviewed in the research expressed concerns about the discriminatory effects of a new age related immigration policy introduced in two stages during 2003-4 on the pretext of tackling forced marriage. It banned overseas spouses from joining their British partner unless both parties were over eighteen on the assumption that victims who were being used to sponsor their spouse into the UK would, as they matured, find it easier to escape a forced marriage. The policy ignored the fact that the primary cause of forced marriage is the control of female sexuality and autonomy. To follow this logic, as the participants confirmed, would result in such policies simply entrapping victims in forced marriage for longer, and at the same time, undermine the right to family life to migrant communities. The joint article ([1] Patel and Siddiqui, 2010) reinforced these arguments based on further research (see below for details) after the age limit had increased to twenty-one. I used this evidence to raise concerns with the Home Affairs Select Committee (HASC, 2011), and in the same year, using my evidence submitted to the HASC, the Supreme Court overturned the policy in
the cases of *Quila and Bibi*\(^9\) in which SBS had also intervened armed with evidence from my publications.

While agreeing on immigration, my views on the use of civil law differed from those of some black feminists. In the publications ([12] SBS, 2001; [7] Siddiqui, 2003a), based on the research evidence, I advocated civil law remedies to give victims more choice and legal protection. In 2002 the SBS report helped to introduce reforms in nullity case law. This research also improved case handling in the UK and overseas, such as applications for injunctions and *habeas corpus*, which later influenced the principles underlying the Forced Marriage (Civil Protection) Act 2007.

However, in the latter publication, based on research conducted for the SBS report, I opposed growing calls for criminalisation on the grounds that it could lead to racist policing. Instead, I advocated better enforcement of existing generic criminal and civil law, and more services and prevention work. In a later article ([11] Siddiqui, 2013a), however, my position had shifted as a result of the views expressed during the research (see details in HBV section). SBS service users and young people who I consulted and interviewed said that, although criminalisation gives the right message, they would personally refuse to go to the police, not due to fears of racism, but for fear of criminalising and

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cutting all ties with their parents and families - criminalisation created a problem of permanent exit. In interviews and discussions, many practitioners were also concerned that criminalisation would drive the problem underground and reduce their ability to help victims, particularly in a context of cuts in housing and welfare support. While these publications prevented criminalisation under Labour in 2005, in 2012 the coalition Government announced its intention to introduce an offence as a populist measure.

*Religious Fundamentalism, ‘Moral Blindness’ and Multi-faithism*

While the state promoted social cohesion polices to combat religious extremism, it simultaneously supported multi-faithism, which is increasingly becoming the new approach to race relations in the UK. It forms part of the ‘carrot’ and ‘stick’ approach against Muslim extremism which imposes punitive measures like immigration control and detention without trial, and gives concessions to moderates such as funding for faith based organisations (Patel, 2008) and the regeneration of communities in a form of ‘social engineering’ (Sahgal, 2004: 57).

While the growth of strong religious identities and its negative consequences for women’s rights as symbolised by the *Rushdie Affair* were discussed in my earlier articles ([5, 6, ] Siddiqui, 1996 and 2000b), its full impact became more evident in the 2000s. The publications ([6] Siddiqui, 2000b; [12] SBS, 2001; [7] Siddiqui, 2003a) raised concerns about the ‘bounty hunter’ ([6] Siddiqui,
2000b:92) and gangs and networks of men who hunt down women to harass them or force them to conform. This, I argued, was a sign of more organised ways to control women by orthodox and fundamentalist forces within BME communities. I also discussed the increasing pressure to implement Shar’ia law. In my articles ([6, 9] Siddiqui, 2000b and 2008), I argue more subtle ways included the establishment of faith based services on domestic violence and forced marriage, and the increasing use of religious arbitration. I gave these publications to government officials, who later amended the Government’s forced marriage guidelines so that arbitration is explicitly not recommended (HM Government, 2009).

In my articles ([1, 2] Patel and Siddiqui, 2010 and 2011) on which I collaborated with my colleague at SBS, Pragna Patel, I developed these arguments further. These articles used evidence gathered through interviews and discussions with BME survivors, practitioners and activists. We also used information gathered from SBS casework, and public cases, reports and publications. It arose out of a need to engage with the debates on social cohesion, immigration, religious fundamentalism and multi-faithism to highlight their negative impact on BME women which we witnessed in our day-to-day work at SBS, and to argue for reform. In analysis of the data, I brought my unique insight and knowledge on forced marriage and HBV. The participants in the research raised concerns about growing pressures by
religious forces, including by young men with strong orthodox views and identities, to conform to traditional gender roles and suffer gender based violence in silence. Practitioners reported that more BME women were, unofficially, being diverted into using alternative dispute resolution by agencies and even by the family courts. There were also concerns that there was increasing pressure on women to resolve problems of domestic violence and forced marriage through religious arbitration tribunals or Shar’ia Councils, the rulings of which are enforcable through the Arbitration Act. These tribunals often discriminated against women by encouraging dangerous practices of mediation and reconciliation. Our research concluded that the state had contradictory social cohesion and multi-faith policies. The former called for greater social integration, while the latter increasingly recognised and respected difference on the grounds of religion. Multi-faithism was reminiscent of the ‘moral blindness’ of multiculturalism by increasing pressures on agencies to ignore violence against BME women in the name of ‘religious sensitivity.’

The research with activists and the work of scholars show that these issues are highly contested and unresolved. Some have argued that some Muslim women exercise agency when using religious arbitration (Bano, 2011) and that black feminism has ignored Muslim women who challenge male power within the religious framework (Ahmed, 2003; Takhar, 2003). Loenen (2002) argues
that legal pluralism needs to be strengthened without overstepping the limits set by human rights standards. In order to counter these views and to reflect the concerns uncovered in the research, my articles ([1, 2] Patel and Siddiqui, 2010 and 2011) build on arguments which promoted secularism as well as mature multiculturalism and the human rights framework to end communal divisions and protect BME women’s rights. In particular, the research showed a need to oppose state accommodation of parallel religious laws, which were supported by powerful religious leaders, but strongly opposed by many survivors and black feminists.
Knowledge on 'Intersectionality' and Violence against Minority Women

Notions of ‘double’ and ‘triple’ discrimination of the 1970s and 1980s gave way, in the 1990s, to an understanding of intersectional discrimination.

Although others had also been developing the concept, Crenshaw (1989:141 and 1991:1241) coined the term ‘intersectionality’ to highlight the overlapping strands of discrimination BME women face, which, when combined, have a multiplicative effect.

Intersectionality has been interpreted in various ways, which has created some inconsistency and ambiguity (Phoenix and Pattynama, 2006). Yuval-Davis (2006:195) distinguishes between an ‘additive’ model, which is limited by experiential social identity politics, and a ‘constitutive’ model where social divisions cannot be experienced separately. Intersectionality recognises hierarchies of power where a person is simultaneously advantaged by some identities and disadvantaged by others, which intersect at all levels of social life and are both historicised and contextualised (Thiara and Gill, 2010: 38).

While in the early days my activism did not articulate the ‘theory of intersectionality,’ at its heart is the tension between race, gender and social class, and the needs of BME women who do not fit neatly into any one category. My early publications discussed these intersections in relation to domestic violence, which also argued for a ‘third way’ to resolve these tensions.
My works were among the first to apply the concept of intersectional discrimination (based on race, gender and class) to the analysis of forced marriage ([6] Siddiqui, 2000b; [12] SBS 2001 and [7] Siddiqui, 2003a), HBV ([8, 9, 10, 11] Siddiqui, 2005, 2008, 2011b, 2013a) and domestic violence and mental health (see below). All of these are inter-related with immigration/asylum and NRPFs/poverty issues. Although the intersections between religion and gendered violence were raised in my early works ([5, 6, 7] Siddiqui, 1996; 2000b and 2003a), stronger connections were made in recent publications ([1, 2] Patel and Siddiqui, 2010 and 2011).

My latest article ([11] Siddiqui, 2013a), using previous and new research (see section on HBV for details), brought many of these arguments together. I examined the tension between race and gender in the ‘hierarchy of oppression’ arguments of the anti-racist left, which made fighting racism and more recently Islamaphobia its primary struggle at the expense of women’s rights within BME communities. I also examined how cultural relativism, religious fundamentalism and multi-faithism deny minority women protection from gendered violence in the name of cultural or religious sensitivity, as well as the continuing conflict between racist immigration laws and gender equality.
An action research study on domestic violence and mental health, *Safe and Sane* ([3] Siddiqui and Patel, 2010a), and an article based on this research ([4] Siddiqui and Patel, 2010b) applies the concept of intersectionality to examine how intersectional discrimination is experienced by BME women faced with this overlapping problem. I produced this article based on research collected jointly with my colleague at SBS, Meena Patel, who undertook some of the domestic violence and mental health related casework in the organisation, and helped to provide group counselling with the psychotherapist. Meena Patel completed a survey based on SBS case files, gathering statistical data, while I conducted interviews with service users. When conducting these interviews, I was aware of the need to be ethical and sensitive to the needs and concerns of the survivors, particularly as many of them were undergoing or had recently completed counselling. In order to prevent further trauma, I ensured that the SBS psychotherapist also assessed them and provided any additional counselling required after the interview. I also examined SBS files on suicide cases, which I was very familiar with as I had conducted the casework on many of them by supporting bereaved families and friends through the inquest process and giving evidence in serious case reviews. I also investigated various relevant health and social care policies and strategies. In addition, we commissioned a researcher to conduct a survey with agencies to establish their views and levels of engagement on domestic violence and mental health within BME communities, and the SBS psychotherapist wrote a chapter on her
counselling model. I led the research and co-ordinated all of the different components. I wrote the overarching analysis and edited the works of others involved in the project.

The need for this research arose from many years of work with BME women experiencing high rates of domestic violence and mental health, suicide and self-harm in SBS casework, and the lack of appropriate and effective interventions by health and other statutory and voluntary sector agencies. In particular, we were concerned, later confirmed by the research, that while some agencies attempted to address race or gender issues, they rarely did so where the two intersected. In effect, there was little or no understanding of intersectional discrimination. SBS also had bereaved families and friends approach it to help them to understand and uncover the cause of suicide committed by BME women. This was in the context of national research studies which had found disproportionate rates of suicide and self-harm among Asian women. The aim of the research was, therefore, to develop effective models of intervention to tackle domestic violence and mental health problems in BME communities. It also aimed to influence health and social care policies and practice to improve professional understanding of the nature of intersectional discrimination and to develop appropriate responses to the specialist needs of BME women.
The research found that BME women faced a number of complex problems when experiencing domestic violence and mental health problems. Women related or case studies highlighted how experiences of domestic violence, which often overlapped with forced marriage and HBV, were ignored by medical and social care agencies seeking to be culturally sensitive. Young Asian women refusing to marry or tolerate excessive restrictions imposed upon them by their families were labelled as ‘mad’ or ‘bad’ rather than angry or rebellious because they did not fit racial stereotypes or multicultural assumptions about ‘passive’ Asian women. These problems were compounded for women facing deportation and destitution. Inappropriate responses included the medicalisation of BME women, mediation and reconciliation by elders or professionals, the use of witchcraft within communities and the engagement of religious leaders by agencies to provide counselling interventions. The research participants, supported by other evidence, indicated an urgent need for a greater understanding by the state and professional agencies to improve their response to these complex problems and tackle the intersectional discrimination BME women faced on the grounds of race, gender and class.

This study had a major impact on policy and practice. I wrote about the findings of the research in various journals and it received some media coverage. It was partly funded by the Department of Health (DoH), and so it was distributed nationally to all statutory health bodies. The Health Minister
spoke at its launch as did the medical director of the West London Mental Health Trust, who arranged for SBS to provide training on issues raised in the report to consultants and senior managers. I also gave a presentation to the Trust’s Board on the findings of the report with a view to developing joint local initiatives. An earlier draft of the report was also examined by the DoH Taskforce on the Health Aspects of Violence against Women and Children. Its sub-group for survivors (Women’s National Commission, 2010) and harmful practices (Taskforce, 2010) recommended the SBS model of intervention as did the National Suicide Prevention Strategy (HM Government, 2012). The National Institute for Health and Care Excellence (NICE) consulted the report when developing its best practice guidance on domestic violence and asked me to give oral evidence to their committee. This evidence included a presentation of the research findings, and a copy of the report was placed on the NICE website.10 Subsequently, I was co-opted onto the committee and influenced the final guidance (NICE, 2014).

In 2011, a post publication survey of the SBS report distributed to 200 agencies showed that 84.6% of respondents felt the report was ‘well argued’ and 45.5% said they would be taking more action at a strategic level on the issues it raised. 92.3% said it was ‘practical’ and 84.6% said it was ‘inspiring’. Overall, 10

practitioners recognised the need to develop services tackling intersectional discrimination on domestic violence and mental health in local areas. An example of this recognition was the adoption of the SBS model by the Angelou Centre in Newcastle in 2012.
Knowledge on the Definition and Understanding of Forced Marriage

The government distinguishes between ‘forced marriage,’ which indicates lack of free and valid consent, and ‘arranged marriages’ which it is unwilling to criticise (Home Office, 2000; HASC, 2008) due to a fear of allegations of racism and Islamaphobia. The notion of ‘consent’ is often regarded as a western concept which assumes the right to individual choice and autonomy, while for many minority communities or cultures, choice is often more about the rights of the collective (Chantler and Gangoli, 2011).

Much of my work argues that the binary distinction between arranged and forced marriage overlooks the ‘fine line’ ([7] Siddiqui, 2003a: 69) between the two, and minimises the abusive effects of ‘arranged marriages.’ In the publications ([6] Siddiqui, 2000b; [12] SBS, 2001; [7] Siddiqui, 2003a), young Asian women discussed the range of pressures when facing a forced marriage, from social and emotional pressure, which were the most common, to physical duress. My publications brought out the subtle pressures, such as emotional coercion and social castigation and disownment, which re-framed many ‘arranged marriages’ as ‘forced marriages.’ This ‘slippage’ (Gangoli et al, 2006:10) was largely recognised in the UK subsequent to my early publications, and has also been referred to as the continuum between coercion and consent (Phillips and Dustin, 2004; Anitha and Gill, 2011). This concept of the continuum has always been implicit in my work as highlighted by the range of
pressures described in my works above, which has been recognised or utilised by academics and practitioners (see Werbner, 2007; HM Government, 2009 and 2010b [2008]).

Government has also been insistent that no religion condones forced marriage (Home Office, 2000), which has created a consensus that culture is the culprit (Phillips and Dustin, 2004; Sahgal, 2004). However, in the publications ([12] SBS, 2001; [7] Siddiqui, 2003a) I challenged the Home Office’s position by showing how some interpretations of religion are used to justify forced marriage by powerful orthodox patriarchal and religious forces within minority communities. In my articles ([1, 2] Patel and Siddiqui, 2010 and 2011), I discuss how the role of religious leaders with conservative interpretations of religious law in relation to the family and marriage have gained in power and prominence.

The research evidence in my works also highlights interconnecting issues with forced marriage. The SBS report ([12] SBS, 2001) and article ([7] Siddiqui, 2003a) argue that forced marriage is another form of domestic violence, child abuse and VAWG, and highlights its links with issues such as dowry abuse and sexual slavery. Although also mentioned in these publications, my article ([8] Siddiqui, 2005) makes stronger connections between forced marriage and HBV. Similarly, although mentioned, the intersections with mental health,
suicide and self-harm are more prominent in my publications ([3, 4] Siddiqui and Patel, 2010a and b).

All these works have influenced policy and practice. Indeed, I gave evidence to the United Nations Working Group on Contemporary Forms of Slavery based on the evidence gathered for the SBS report. In 2001, the Working Group recognised forced marriage as a form of sexual slavery. The SBS report ([12] SBS, 2001) and my article ([7] Siddiqui, 2003a) made several recommendations which influenced the introduction of the Government’s forced marriage guidelines and survivors’ handbook, improved consulate guidance for mono and dual nationals (the latter had initially received a more limited response from the Foreign Office) and the establishment of the Foreign Office Community Liaison Unit in the early 2000s. This later became the joint Home Office and Foreign Office Forced Marriage Unit after I argued that insufficient action was being taken to deal with the domestic dimensions of the problem, an issue first raised in the report ([12] SBS, 2001).
Knowledge on the Definition and Constitution of ‘Honour’ Based Violence

HBV became a prominent part of public debates in 2002 following the death of Heshu Yonis as it was the first case to be labelled as a so called ‘honour’ killing by the police. Soon after this, honour killings became part of a wider debate which collapsed domestic violence, forced marriage and other forms of violence against BME women into HBV. I was commissioned by the Centre for Islamic and Middle Eastern Law at the School of Oriental and African Studies and INTERIGHTS\(^\text{11}\) to prepare a conference paper on HBV, which became the basis for further research.

My article ([8] Siddiqui, 2005) was the one of the first publications to discuss HBV in the UK. It defined the concept and discussed its constitution and dynamics. The research arose out of the need to define HBV and address the confusion evident in public debates and among practitioners and policy makers about its meaning and relationship to domestic violence and forced marriage. Service users at SBS, who we interviewed, showed great interest in voicing their experiences and needs. Some activists expressed concerns about the essentialising nature of the debates which could promote racist responses from the state, while others wanted to use the opportunity to demand reform.

\(^{11}\) INTERIGHTS was an international centre for the legal protection of human rights. It undertook strategic litigation and policy advocacy, and one of its projects involved addressing ‘honour crimes’ with the Centre for Islamic and Middle Eastern Law.
Interviews with practitioners revealed confusion and concern about their lack of understanding and ability to deal with the problem. My article ([9] Siddiqui, 2008) updated this research. This involved interviews and focus groups with service users, and meetings and discussions with professionals and campaigners.

My last two articles on HBV ([10, 11] Siddiqui 2011b and 2013a) adopted a life history/case study approach using interviews with service users at SBS. This approach helped to locate their experiences within the continuum of sexual violence (Kelly, 1987; Radford, 1992). The research grew out of a need to highlight BME women’s interconnected and routine experiences of gendered violence, particularly as the media often focuses on the more high profile dramatic cases which skew the picture. The latter publication focused on two cases - one of Banaz Mahood, who had been killed in a so called ‘honour’ killing and that of her sister, who I interviewed. It aimed at looking at the dichotomy of victim/survivor situations and attempted to examine what went wrong for Banaz, who died, and what went right for her sister, who survived. Both publications also used data collected in literature and from discussions and interviews with practitioners and campaigners, who expressed continued confusion over the nature of HBV and conflicted about how to tackle it.
**Terminology and Definition of HBV**

While there is general consensus about the definition of forced marriage, there is less agreement about what constitutes HBV and its definition. In the early 2000s the debate centred on terminology - should HBV be called ‘honour crimes’ or ‘honour related violence.’ In my article ([8] Siddiqui, 2005) I raised concerns that using the word ‘honour’ was legitimising murder and violence in the name of honour and, as such, these crimes were highly ‘dishonourable’ ([8] Siddiqui, 2005:266). So the phrase ‘so called honour’ was introduced as being more appropriate (Chantler and Gangoli, 2011). Importantly, I argued that since honour crimes were not a ‘form’ of violence, but rather a ‘motive’ for violence, that ‘honour based violence’ may be a better term. Moreover, referring to honour ‘crimes’ rather than ‘violence’ appeared to create a false ‘dichotomy between violence and crime’ (Connors, 2005:35). I first raised the debate on the term HBV in this article and consolidated its use in my article ([9] Siddiqui, 2008). I distributed these publications widely, including in working groups with government, the police and the CPS. As a result, HBV has become a more commonly utilised term than honour crimes in policy and practice - see for example ACPO (2010 [2008]), CPS,12 Home Office (HM Government, 2010a) and HASC (2008).

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12 The CPS terminology changed over time from ‘honour’ based crimes to HBV. This website link uses HBV - see
My articles ([8, 10, 11] Siddiqui 2005, 2011b and 2013a) in particular help to define HBV. I argued that HBV and VAWG form two sides of the same coin. On the one side, there is the act of violence such as domestic violence or forced marriage, and on the flip side, there are codes of ‘honour’ which form the motive, justification, mitigation or excuse for the violence. Thus, HBV is the motive for a range of violent and abusive acts justified by the perpetrators in the name of family and/or community honour. HBV primarily aims to control female sexuality and autonomy, and uses conservative, patriarchal interpretations of cultural and religious value systems to justify it. As women are the carriers of collective identity and honour (Yuval-Davis, 1997), the ‘honour’ of the family and community is seen to rest on women’s behaviour, particularly their sexual conduct. It requires that they conform to traditional gender roles as submissive and obedient wives, sisters, mothers, daughters and daughters-in-laws. Transgression (whether actual or perceived) means that women are ‘punished’ through HBV, which includes social ostracism (which is the most common), sexual harassment, threatening behaviour, assault, imprisonment, abduction, forced marriage, and in the more extreme cases, attempted murder and murder itself. It can drive many to suicide and self-harm. Both ‘punishment’ and socialisation mean that many women do not leave abusive situations for fear of bringing shame and dishonour.

The Constitution of HBV

In my articles ([8, 9] Siddiqui, 2005 and 2008), I first argued that HBV overlaps with or is predominantly domestic violence as it is often perpetrated or instigated by the extended family, even if it involves community members colluding in or perpetrating HBV. This argument counters the view of HBV as a parallel discourse and serves to place it centrally within, rather than separate from, domestic violence. The characteristics of HBV mirror the dynamics of domestic violence within BME communities, which also defines domestic violence itself. Indeed, as a result of my lobbying using research prepared for this publication, the Home Office revised its definition of domestic violence in 2004 to include the extended family, forced marriage and HBV, and this remains intact after further revisions in 2012 (Home Office, 2012). The HASC (2008) also incorporated HBV within domestic violence. In my articles ([8, 9] Siddiqui, 2005 and 2008), I also argued that forced marriage is a form of VAWG with HBV being a cross cutting issue, which has been accepted by the Home Office (HM Government, 2010a) and other bodies, such as the CPS.13

This conceptualisation of HBV continues to be contested by some women’s groups and scholars who argue that HBV is a specific form of violence. It is different from domestic violence because it involves the ‘honour community’ (Bradby, 1999: 153), which shares common value systems about honour, and

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can be more pre-mediated (Sen, 2005; Dustin and Phillips, 2008; Gill, 2009; Payton, 2011). In my articles ([8, 10, 11] Siddiqui, 2005, 2011b and 2013a), I argue this definition of HBV marginalises domestic violence within BME communities and prevents professionals using established procedures on domestic violence more effectively.

**HBV and the ‘Parallel Universe’**

Although specificity of experience should be recognised (Sen, 2005), my articles ([8, 9] Siddiqui, 2005 and 2008) were the first to highlight how segregating HBV from domestic violence creates the problem of a ‘parallel universe’ ([9] Siddiqui, 2008:45) where all forms of violence against BME women are collapsed into HBV or seen through the lens of HBV. The articles ([10, 11] Siddiqui, 2011b and 2013a) reinforce these points. HBV is the only form of gender based violence defined by cultural motivations. This serves to exoticise and stereotype BME women and communities, and ignore that cultural justifications for VAWG also exist in British and other societies. As such, it undermines our understanding of gender inequality as the cause and consequence of VAWG. It also leads to differential or ‘race’ and ‘culture’ based solutions such as more immigration controls and social integration (or assimilation) rather than the promotion of race and gender equality, and empowerment of BME women.
My examination of public cases in these publications showed this in relation to
domestic homicides of Asian or Middle Eastern women. Labelling of these
cases in the media and policy documents shifted as the debates developed
from domestic murders, at first to forced marriage related homicides, and then
to ‘honour’ killings. Others have subsequently utilised this argument
elaborated in my work – that HBV can become the shorthand for all forms of
domestic violence and child abuse (Dustin and Phillips, 2008; Chantler and
Gangoli, 2011; Thiara et al, 2011), and that this re-framing has ‘ethnocised’
(Meetoo and Mirza, 2007: 188) minority women.

While concerned about this re-framing of VAWG within BME communities, my
nevertheless, foreground the reality of how dominate interpretations of
culture and religion justified gendered violence in minority communities in the
name of honour. With data obtained from SBS homicide cases and a review of
public cases, I highlighted this in relation to the use of cultural defences in
which Asian and Middle Eastern men used notions of family honour to justify
the murder of women who brought shame and dishonour by refusing to marry
or by having a boyfriend. These works, which I made available to the police and
the CPS in working groups and joint casework, helped to improve conviction
rates for such murders by challenging ‘cultural defences’ in court hearings,
which although largely unsuccessful in the UK (Phillips, 2007), were
nevertheless implicit or attempted in many defence cases. Equally, as my analysis of public cases suggested, I was careful not to give the impression that similar cultural expectations did not exist in the white majority community, and although no longer explicitly based on ‘honour,’ traditional notions of male ownership of women was often used to justify or mitigate such killings. The importance of balancing similarity and difference was critical in recognising specificity and preventing essentialism.

As a result of pressure created by these publications, the police acknowledged ‘murder is murder’ ([8] Siddiqui, 2005: 277). They were keen to avoid criticism of promoting culturalist interpretations of femicide in BME communities, although one prosecutor has made problematic comparisons of ‘hotspots’ of terrorism as being the same as those for HBV (Wilson, 2010). The impact of these works has led to some practical developments. The Metropolitan police conducted some research with the aim of improving risk assessment and concluded there were an estimated 12 cases of honour killings per year (HASC, 2008). In 2008 the police used my research evidence to inform their HBV strategy (ACPO, 2010, [2008]). The CPS responded by setting up a flagging system and specialist prosecutors to whom I provided training based on the evidence of my research (CPS, 2008).
Conclusion

My publications have and continue to influence policy and practice as well as research and theory. This is highlighted by the frequent reference to my works in other publications or the use of my concepts in on-going debates on issues of race and gender, particularly in relation to harmful practices, among the media, activists, scholars, practitioners and policy makers alike. This represents the cumulative effect of my works which have helped to transform the understanding of and responses to the problem of violence against BME women.

*True Honour* ([11] Siddiqui, 2013a) is a culmination of the major concepts and arguments I have consistently developed in my publications over a period of 23 years on domestic violence, forced marriage and HBV, and black feminist struggles for human rights. My works were the first to advocate and develop or extend the concept of mature multiculturalism, giving it greater definition and consolidation. I also helped to shape this concept through my critique of multiculturalism and its failure to address the human rights of minority women. The concept resolves the tension between feminism and multiculturalism, avoiding the ‘othering’ (Brah, 1996:230) of minority cultures and religions while protecting minority women from gender based violence.

My works have also helped to define and explain the nature of forced marriage and HBV. They were the first to apply the concept of intersectionality to
analyse these, and together with domestic violence, illustrate the inter-relations with mental health, immigration and NRPFs, exposing widespread overlapping discrimination based on race, gender and class. My works have also contributed to the examination of the rise of religious fundamentalism, and recently, also contradictory multi-faith and social cohesion policies, and the ways in which these have increased both racism and pressures on minority women to return to abusive situations in the name of ‘religious sensitivity,’ often accommodated by the state. My work continues to develop and contribute to on-going policy debates in this area, and notably, I have increasingly argued that perhaps the tension between feminism and multi-faithism can be resolved by a ‘mature multi-faithism.’

To tackle intersectional discrimination, I have located my research and activism within the VAWG, equalities, secularist and human rights frameworks. As such, I have also contributed to the development of ‘intersectional feminists’ (Cochrane, 2013), and stronger alliances building bridges within and between the anti-racist, feminist and the secularist left engaged in simultaneous struggles to win our freedoms and human rights for all.

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14 The concept of ‘mature multi-faithism’ is an equivalent concept to mature multiculturalism where the right to observe religious practices is respected, but not at the expense of BME women’ rights. The burden is not on the individual to exit (which does not have to be fully or permanent) to escape abuse, but on the state which operates within the wider framework of secularism and human rights. I begin this debate in a forthcoming publication entitled ‘My life as an activist’ written for Women Against Fundamentalism- see bibliography under Siddiqui (p.76).
## Abbreviations

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<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tr>
<td>ACPO</td>
<td>Association of Chief Police Officers</td>
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<td>BME</td>
<td>Black and Minority Ethnic</td>
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<td>CPS</td>
<td>Crown Prosecution Service</td>
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<td>DoH</td>
<td>Department of Health</td>
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<td>HASC</td>
<td>Home Affairs Select Committee</td>
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<td>HBV</td>
<td>Honour based violence</td>
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<td>NICE</td>
<td>National Institute of Health and Care Excellence</td>
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<td>NRPFs</td>
<td>No recourse to public funds</td>
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<td>SBS</td>
<td>Southall Black Sisters</td>
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<td>UK</td>
<td>United Kingdom</td>
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<tr>
<td>VAWG</td>
<td>Violence against women and girls</td>
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References


Forced Marriage. Introducing a Social Justice and Human Rights Perspective,


National Institute for Health and Care Excellence (2014) *Domestic Violence and Abuse: How Health Services, Social Care and the Organisations They Work with can*


Regards Croisés sur l’immigration, la Citoyenneté, la Diversité et le Pouvoir,
Montréal: Presses de l’Université du Québec.


Appendix 1

Published work on which the submission is based


Appendix 2

Full bibliography of published works


Women’s Human Rights in G-7 Countries: Organising Strategies, Family Violence Prevention Fund and Centre for Women’s Global Leadership.


[Online]: Available from

Appendix 3

Statements from co-author and Southall Black Sisters