Tackling Domestic Violence: providing advocacy and support to survivors from Black and other minority ethnic communities
Tackling Domestic Violence: providing advocacy and support to survivors from Black and other minority ethnic communities

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The aim of this report is to provide concise guidance to those practitioners who directly work with female victims of domestic violence who are from Black and other minority ethnic communities. The role of these specialist practitioners is to provide advice and support to victims and their children to ultimately help them to move safely towards violence-free lives, and they are sometimes referred to as 'advocates'; 'support workers'; 'outreach workers'; 'victim workers'; or 'navigators'.

This report draws upon the independent evaluations of a number of multi-agency projects which aimed to support female victims of domestic violence, and which were funded under the remit of the Crime Reduction Programme (CRP) Violence Against Women Initiative (VAWI). More information about the evidence base for this guidance is detailed at the end of this report.

Readers should refer to a related report called: Tackling Domestic Violence: providing advocacy and support to survivors of domestic violence (2005) also by Alpa Parmar, Alice Sampson and Alana Diamond, for a fuller discussion about the role of advocacy and support, and for some general good practice recommendations.

Introduction

Research has shown that domestic violence is a problem in society. Findings from the 2001 national British Crime Survey (BCS) self-completion module on domestic violence indicated that one in five (21%) women and one in ten (10%) men have experienced at least one incident of non-sexual domestic threat or force since they were 16. If financial abuse is included, then 26 per cent of women and 17 per cent of men had experienced domestic violence since 16. (Walby and Allen, 2004).

Domestic violence affects all sections of society, regardless of age, gender, wealth, sexuality and geography. However, it is mainly women who suffer. The presence of children in the household is associated with nearly double the risk of domestic violence for women (Walby and Allen, 2004). There is little variation in the prevalence of domestic violence by ethnicity (Walby and Allen, 2004). However, survivors from Black and other minority ethnic communities are less likely to access statutory services, (Batsleer, et al., 2002; Rai and Thiara, 1997).

Intervention projects can assist women to access information and advice either to help them through the situation or to take legal action and/or leave their partner. Projects can also help women who are in a violent relationship and do not wish to leave their partner or take legal action.

As domestic violence is an issue that affects people from all ethnic groups, efforts must be made to ensure that all women regard support services as being accessible to them. Being sensitive to, and aware of, the specific issues that affect Black and other minority ethnic group (BME) women should be integrated into the delivery of all support services. Whether the services are aimed at BME women or not, the issue of ethnicity should not be marginalised. This report therefore highlights practices, which should be applied across all projects, that aim to support female victims of domestic violence.

The projects, which were funded and evaluated under the remit of the CRP VAWI mainly provided advocacy and support to South Asian, African and African-Caribbean women, so most of the points in this paper are relevant to these three groups. It is acknowledged that women from other groups may require variations on the following recommendations.

Home Office Development and Practice Reports draw out from research the messages for practice development, implementation and operation. They are intended as guidance for practitioners in specific fields. The recommendations explain how and why changes could be made, based on the findings from research, which would lead to better practice.
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Useful definitions

- Domestic violence can be physical, psychological, emotional, sexual or financial.
- Domestic violence can be inflicted by an intimate current or ex-partner, e.g. current or former husband or boyfriend and/or extended family e.g. mother-in-law.
- Domestic violence is often not an isolated problem for the woman. There are usually other issues that are linked to domestic violence. For example, there can be financial difficulties; housing problems; issues that affect the woman’s children; immigration uncertainty; issues about forced marriage.

What are advocacy and support?

Advocacy

‘Advocacy’ is a term that was used by most of the projects, which were funded and evaluated under the CRP VAWI, to describe the work they did. Others commonly called themselves ‘support workers’ or ‘outreach workers’.

For some, ‘advocacy’ was representing the interests of women, and negotiating on their behalf in a legal setting (criminal and/or civil); for others it was supporting and empowering women to secure their rights in a community context. It is the emphasis on rights and entitlements which distinguishes advocacy from other forms of support (Kelly and Humphreys, 2000).

Among the CRP VAWI projects the type of advocacy provided was usually a mixture of all of the above; this broad definition encapsulates the work which generally comes under the banner of advocacy within a domestic violence context.

Advocacy can also be a way of taking issues forward with the purpose of making legislative and policy changes. However, this form of advocacy was not so common among those projects which were evaluated.

Support

For some projects, support meant providing information and advice, safety planning and an occasional listening ear. This work tended to be short-term, and was often provided in response to a crisis or a specific incident. However, for other projects, support was about the provision of tailored, proactive and often intensive individual work with women. This type of support, which incorporated the provision of emotional support, was usually provided on a medium to long-term basis. The aim was to build and establish a relationship of trust with the woman to help enable complex fears to be unlocked; to help enable the woman to make decisions and take steps that could lead to a violence-free life.

In practice the work of domestic violence practitioners was not so clearly defined, and was usually a mixture of advocacy, and both general and tailored emotional support.

Findings from the CRP VAWI evaluations suggest that it was the combination of both advocacy and tailored individual work with women, which included emotional support, that had the most positive impact on women. This combination of advocacy and support not only enabled them to access legal remedies, services and resources but also empowered them to ‘move on’ with their lives and ultimately to live violence-free lives (Hester and Westmarland, 2005).

What advocacy and support can involve

Providing advocacy and support will often mean dealing with a number of issues at the same time, and it is this skill which is an integral part of the job.

The box below details some of the tasks which may be included in the work of advocates and support workers.

Examples of tasks carried out by advocates and support workers

- Raising awareness of the issue of domestic violence in the local community.
- Raising awareness of the project amongst both statutory and voluntary agencies and committees. This can involve running regular workshops to agencies such as: the police, health visitors, GPs, midwives, social services, the Crown Prosecution Service (CPS), housing, solicitors, etc.
- Liaising with partner agencies and building good relationships with individuals who work in those agencies; to understand how they work and to enable women to gain access to a wide range of services.
- Building up a consistent and open relationship with the woman so that a feeling of trust is established.
- Conducting accurate risk assessments, and in response provide practical safety planning advice, ensuring that the immediate safety needs of the woman and her children are met.
- Understanding how assisting a woman’s children is important and that responses need to be appropriate according to their age.
- Assessing the strengths and weaknesses of a woman’s legal case and understanding how best to assist a woman within the criminal justice system.
- Understanding complex fears which the woman has developed.
- Encouraging women at times to reflect on their situation and, if necessary, challenge women’s understandings of their situation.
- Provide practical and emotional support concurrently and allow time to build a rapport with women.
- Assist women with developing vital life-skills, for example, household financial management.
Where can advocacy and support work take place?

Whilst advocates and support workers should be independent and act on behalf of women and for their benefit, they can be located in different places depending on the aims and intentions of their project. They can work from:

- a ‘one-stop-shop’;
- a police station;
- a voluntary organisation;
- a community centre;
- a court.

Research interviews suggest that survivors of domestic violence really appreciated the main sources of support and advice to be in the one place, for example, a ‘one-stop-shop’ (Hester and Westmarland, 2005).

Non-centre based advocacy and support

Outreach is a way of providing individual advocacy and support to a range of women, who may have difficulties in accessing centre-based resources and services. Outreach is particularly suitable for those women who can be hard to reach, e.g. ethnic minority communities; survivors who live in rural or isolated areas; survivors with physical or mental impairments; or those with mental health problems. Outreach workers support women in their own homes and communities with the aim of providing accessible support and advocacy.

Models of advocacy and support

The projects that were evaluated adopted different approaches to assisting women experiencing domestic violence. Interviews with the women suggested that they preferred longer-term support from an advocate or support worker rather than short-term crisis intervention, whereby the worker would support a woman for a limited period and then refer her to other agencies. The evaluations indicated that the provision of longer-term support enabled relationships of trust to develop between the woman and the worker and more positive legal outcomes were also achieved via this method.

Women also stated that part of what they liked about a long-term service was the consistent help and advice, and not having to repeat a story several times. It also reduced the feelings of loneliness and isolation a woman may experience when leaving her partner or taking legal action.

The box below summaries the key good practice points for providing advocacy and support to survivors of domestic violence.

### Good practice points

- A tailored, proactive and intensive approach
  
  In-depth research into case files showed that those women who the practitioner worked with intensively (i.e. many meetings or phone calls, and the worker assisting a woman with a number of issues concurrently) felt the most satisfied with the progress of their case. They were also more likely to report incidents to the police and to pursue legal remedies (both criminal and civil) to an outcome. Also, key to this was bolstering the emotional support with practical assistance and advice so that the woman did not feel isolated.

- A relationship built on trust and empathy
  
  Workers who had built a relationship of trust with the woman and showed empathy towards her situation were more likely to enable a woman to pursue her case to an end – whether it was legal or situational in circumstance.

- Understanding agencies’ structures, ways of working and developing close working links with key agencies
  
  Workers who adopted a specific style of working with other agencies and who showed understanding of their structures and policies, rather than resistance to them, were more likely to achieve better co-operation from statutory agencies and consequently a positive outcome in their client’s cases. These workers were also more able to persuade and challenge agencies to work in the best interests of a woman.

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Providing a service accessible to all

There are certain issues that advocates should take into consideration when a Black or Asian woman approaches the project or is referred. It is important to note that BME women may face an increased number of barriers (and perhaps different ones) to reaching their social and economic independence, and so advocates should work with an understanding of these issues. Women can also face barriers, such as racism and prejudice, in actually accessing services and resources.
Culture

Although all women experience cultural barriers, research has suggested that for Asian women to leave their partner, or to seek help and actually inform other people of violence they are experiencing, may be more difficult than for other women. This is because when Asian women marry they implicitly represent their family. As a consequence, if a marriage fails it is often seen as being the woman’s fault and she is also blamed for letting down the family’s honour. It is usually regarded as the woman’s duty in the family to maintain the family’s ‘izzat’ (honour) (Shah-Kazemi, 2001; Rai and Thiara, 1997).

Religion

The advocate should be aware of issues which may add to the reasons why some BME women may be more hesitant to leave their partners, get divorced or take legal action. For example, when women marry according to Islamic principles they enter into a contract with their husband. This contract is known as nikah1. This contract can be terminated by the husband and only he has the unilateral right to divorce his wife. If the husband does not want to comply with this, he can prevent giving a religious divorce to his wife. Interviews suggested that there were some women who had obtained a legal divorce, but their partner was refusing to give a religious divorce. Women found this particularly upsetting, as it went against their own religious beliefs and left them in a state of limbo.

I thought that if I went through with the legal divorce everything would then sort itself out but now he refuses to give me a talaq (an Islamic divorce) and I feel lost. That’s why I was not sure whether to take the action in the first place. Now my family won’t speak to me. My advocate understands what I am going through and is there to listen at any time. This is a real comfort to me.

(CRP VAWI Asian project user)

Immigration

Sometimes a BME woman may face the added pressure of an uncertain immigration status which may prevent her from accessing services, and also, she may be more hesitant to take action against her partner for fear of losing her right to remain in the UK. Often a woman’s partner and/or extended family have threatened her by saying that if she discloses information about the violence, they will arrange to have her deported. There were also many cases whereby a woman’s passport had been taken from her – a practical and symbolic expression of control over her life and future.

A linked issue is that if a woman has come to the United Kingdom (UK) specifically as a result of her marriage, there is usually an increased pressure from her family for the marriage to be successful. Also, if a woman is in a country she is unfamiliar with, it may be harder for her to understand systems of support or agencies that are able to assist women. Therefore a trusting relationship between the advocate or support worker and woman is essential. The following case study shows how immigration uncertainty impacts on a woman suffering domestic violence. The name has been changed in order to protect confidentiality.

Case Study: Chiara

Chiara is a 35-year-old Black Caribbean woman who came to England as a student, so only had the right to remain in the UK for a limited period. She met her partner and had two boys. Throughout the relationship she regularly experienced physical, emotional, mental and financial abuse, and felt that she experienced ‘irrational acts of violence and threatening behaviour’. She stayed in the relationship, as she wanted her children to have a father and ‘did not want to perpetuate stereotypes of being a Black single mother’. The police referred Chiara to the project after she had been cut across the face so badly that she had to go into hospital for two weeks. On her first visit to the project, her advocate took her to a local solicitor and applied for an injunction, which was successful.

In terms of support from her advocate, she was given practical advice on how to cope with paying the rent, how to get new housing and her advocate also wrote a letter to the Home Office regarding her immigration status. Chiara decided to take criminal action and her partner was found guilty and put in prison for six months. Her advocate accompanied her to court, and she also obtained her the right to remain in the UK. Her partner had continuously threatened that he could have her deported. He also told her that he could kill her and no one would know as she was not an UK citizen, and therefore none of the authorities would care whether she was alive. He had written suicide notes for her and embedded a sense of fear in her ‘I always walked on eggshells to avoid a confrontation’.

Due to the fact that she had lost her confidence, and that she was not in her own country, she did not feel as though she could approach outside agencies, as she thought her passport would be taken away. She also did not understand the systems or policies on domestic violence by agencies such as GPs, social services, housing, Social Security, etc.

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1 This word literally translates as meaning a ‘knot’ or a ‘tie’.
Advocacy and support in practice

Awareness of the issues outlined above may mean projects and advocates adopting certain practices.

Matching

Interviews with women suggested that Asian women, in particular, preferred it if their advocate was also Asian and could speak their language. This was especially important when the woman could not speak English and if there were immigration issues as well. The following quote illustrates the point:

It really helped that I could talk to my advocate in my language, I could explain my feelings to her with ease and I knew that she understood the things I was experiencing.

(CRP VAWI Asian project user)

However, this practice should not be applied automatically as other interviews suggested that some Asian women preferred an advocate who was from a different background to them, as they were afraid the advocate may know or be related to someone who knows them. Some Asian women also found it difficult to disclose sexual violence to advocates who were not married.

Assessing a woman’s situation

Advocates should be trained to skilfully and sensitively assess the different factors surrounding a woman, such as cultural beliefs and the sense of loss a woman may feel if she has left her country of origin.

Her worker helped her to access advice and information. Chiara was also very scared when her ex-partner’s release date was imminent. The advocate helped her to obtain information from the police about exactly when he was going to be released, so that Chiara could be re-housed and contact proceedings with the children could be organised. Chiara was very scared and called her advocate regularly for emotional support. She was also depressed as she was physically scarred on her face and neck and felt this was a constant reminder of her ex-partner. On one occasion, her advocate arranged for Chiara to have a professional makeover and learn techniques of disguising her scar so that she felt more confident in public.

Chiara had also begun to go to college again and counselling had been arranged for her children as she was concerned that they were going to be violent as well, as a result of the violence they had witnessed.

Assessing a woman’s immigration status

Advocates should establish the immigration status of a woman. Persons without Indefinite Leave to Remain (ILR) in the UK do not have recourse to public funds. This can prevent them from leaving a violent partner and makes it harder for an advocate or support worker to offer some types of assistance to a woman.

Applications for ILR from women who are survivors of domestic violence

Non-European Economic Area (EEA) spouses or unmarried partners of British citizens and persons settled here may apply for two year’s leave to enter or remain in the UK on that basis. At the end of this two-year period an application for ILR may be made. Where the non-EEA partner is a victim of domestic violence and the marriage breaks down as a result of this, an application for settlement may be made. Where granted, ILR removes all conditions from a person’s stay in the UK. More details about applications for ILR on the basis of domestic violence can be found on the Home Office’s Immigration and Nationality website (the contact details are provided in the Resources section of this report).

Safety

Often there are further safety issues for BME women which advocates should take into account. For example, if a project refers an Asian woman to a local Asian women’s refuge, it is easier for the perpetrator to trace the woman should he wish to. Advocates should take account of this when making risk assessments and safety plans, and if possible, place a woman in an appropriate refuge in light of this. This should be discussed with each woman, rather than assumptions being made by professionals, as it is noted that some women may wish to stay in an area that is familiar to them.

Awareness raising

Approaches in awareness raising may need to take into account any special or different needs if there is a BME population in the location of the project. There is a need to explain to all cultures, firstly, that domestic violence is a crime and unacceptable, and secondly, that intervention services can assist women. Methods of raising awareness should also be appropriate. For example, one of the evaluated projects chose to have a radio phone-in about domestic violence on a local Asian radio station. Another project was represented at an Asian women’s day. Posters/information cards can be placed in mosques and temples, doctors’ surgeries, on television adverts on local channels, in local grocery stores, etc. Women who have accessed the service could also be encouraged to talk to other women who may be experiencing domestic violence.
Interviews with Asian women suggested that some of them were self-referrals because their friend had told them about the project. ‘Word of mouth’ is a powerful tool for awareness raising especially amongst tight-knit BME communities. All advocates need to think about where women go, meet, shop and socialise, and if there are any ways to reach them to communicate key messages and raise awareness about services.

**Racism**

Advocates may find that the situation of women is compounded by experiences of racism and that the experiences of women vary. Being a victim of racist violence exacerbates women’s fears for their safety, and their concern about racial harassment reinforces their general sense of vulnerability. ‘Institutionalised’ racism makes it harder for advocates to enable BME women to receive a quality service and adds to women’s feelings of marginalisation. It is important that advocates explore the possible effects of racism with women and respond to their concerns.

**Types of information**

Different women have varied needs and it is important not to homogenise all BME women by assuming that they will all require the same assistance. It is important for advocates to listen to what individual women want. The type of information offered to women by advocates may also need to be different for some BME women who are in a particular situation, for example, if English is not their first language, if they have recently moved to this country or have not been allowed to integrate beyond a very close knit community.

Interviews with women showed that some of the information often taken for granted was, at times, not well known by BME women. Some of the women, who were in situations such as those described above, often needed training in vital life skills, which are outlined in the following box.

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**Life skills that can be transferred to some women**

- How to use public transport such as the underground, buses, trains and trams.
- How to use banks, cash points, etc. to access money.
- How systems and agencies work, for example, what the police, GPs, social services, housing departments do.

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The following quotes from women substantiate the above point:

> When I managed to escape from my husband I had no idea of life outside and didn’t know how to shop, how the currency worked, how to get to the children’s school, what and when there were school holidays, what day of the week it was, how to use public transport, and how to communicate in English. I was completely helpless.

(CRP VAWI Asian project user)

> I didn’t even know how to use the bus but the workers helped me.

(CRP VAWI Asian project user)

The following box summarises some of the ways in which domestic violence support services may be made more accessible to BME women.

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**Good practice points**

- Advertising in different languages means women who cannot read/speak English are not excluded. Pictorial information has also been found to be useful.
- Providing information on discreet cards can enable women to carry them around easily e.g. credit card style information cards.
- Tailoring services and responses to individual women is at times better than a blanket response to all.
- Creative ideas often make a woman feel special, less isolated and more understood. For example, in the earlier case study where a woman was given a makeover. Another case was where an Asian woman had to leave her home without a change of clothes. The refuge she went to gave her dresses and trousers to wear but she did not say anything, as she did not want to cause trouble or seem ungrateful. Her advocate could see she was unhappy and took her shopping to buy some sarees.
- When re-housed, women should be placed in areas that are less isolated, for example, some Muslim women appreciated being relocated in places with

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2 It is important to note that not all of the minority ethnic group women required assistance with life skills – only some, and particularly those who had recently moved to this country, did not speak English and those who had not been allowed to access external agencies, etc.
Clear policies

There could be a clearer understanding of the issues surrounding the law on immigration and asylum and what the implications are for women and children. The projects should have clear policies about how to provide support to asylum seekers, refugees, and non-EEA spouses or unmarried partners of British citizens and persons settled here. They should be aware of any local solicitors who specialise in immigration, asylum and family law issues or any other sources of advice which can be accessed locally. Interviews suggested that with many women who had an uncertain immigration status, the advocates could only ‘work with them to an extent’ because women who were seeking asylum were not granted legal aid and consequently their cases could not be pursued fully.

Summing up

Projects should be aware of the needs of BME women and the cost for these when the project is being developed. The following quotes from BME women sum up the difference that advocates who are aware of the issues related to ethnicity can make.

I spoke to the worker and she was really kind. I spoke to her totally, and she did the same with me. She wrote a letter and she understood my situation. I felt like she really knew me.

(CRP VAWI Asian project user)

I was told repeatedly that I didn’t have a legal right to stay here by my husband. The project told me the truth and gave me the correct information. They showed me that I could stay here and that I didn’t have to be scared of the authorities tracking me down if I left him.

(CRP VAWI Ghanaian project user)

I know there’s a lot of family pressure in this kind of situation…you don’t have to put up with it….I understand the family pressures as I come from an Asian background.

(CRP VAWI Asian advocate)
References


Resources

Support and advice for those who have experienced domestic violence

BAWSO (Welsh organisation for Black women who are victims of domestic violence)
029 2043 7390

Broken Rainbow (Pan-London Lesbian, Gay, Bisexual And Transgender Domestic Violence Forum)
0781 2644914
dv.org/html/rainbow.htm

Careline  (Counselling services)
020 8514 1177

Community Legal Service Directory Line
0845 608 1122
http://www.justask.org.uk/index.jsp

Foreign & Commonwealth Office (Advice on forced marriage)
020 7008 0135/0230

Home Office Immigration and Nationality Directorate (Advice on immigration and nationality issues)
0870 6067766.
http://www.ind.homeoffice.gov.uk.

Language Line
Translations: 0800 917 6564
Face-to-face interpreting: 0845 310 9900
National Child Protection Helpline (NSPCC)
0800 800 500
https://www.nspcc.org.uk/nspcc/helpline

National 24-hour Domestic Violence Helpline
0808 2000 247 (minicom available)
Support, help and information wherever you are in the country. Run jointly by Women’s Aid and Refuge, the new Freephone helpline provides access to 24-hour emergency information to thousands of women who suffer at the hands of an abusive partner. It builds on the charities’ support services for women and children experiencing domestic violence.

Office of the Deputy Prime Minister (Information and guidance on funding for domestic violence services via the Supporting People programme)
www.spkweb.org.uk
http://www.odpm.gov.uk/stellent/groups/odpm_homelessness/documents/page/odpm_home_027994.hcsp

Rape Crisis (For information about rape and sexual abuse, and details about rape crisis support groups)
http://www.rapecrisis.org.uk

Refuge (Refuge operates a network of safe houses and provides outreach services for women from minority ethnic groups)
http://www.refuge.org.uk/

Renuite (UK charity specialising in international parental child abduction)
0016 2556 234

Shelterline - National 24-hour Housing Helpline
0808 800 4444
http://www.shelter.org.uk/housingadvice/shelterline/index.asp

Southall Black Sisters (Advice and support for women from Black and minority ethnic communities)
020 8571 9595

The Samaritans
0345 90 90 90
http://www.samaritans.org/

Victim Support
0845 30 30 900
http://www.victimsupport.org.uk/

Welsh Women’s Aid
029 20 39 0874
http://www.welshwomensaid.org/

Women’s Aid
The website has information in languages other than English.
01117 944 4411
http://womensaid.org.uk

It is a good idea to remind women that they need to be cautious when accessing any of the above websites from a computer that their abuser has access to. The Women’s Aid website contains information on action that women can take to minimise the chance of an abuser detecting that they have accessed a site.
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Crime Reduction Programme: Violence Against Women Initiative – other reports in the series

**Domestic Violence**


**Rape and sexual assault**


**Evidence base for this report**

The Crime Reduction Programme (CRP) Violence Against Women Initiative (VAWI) was an evidence-led programme, which aimed to find out which approaches and practices were effective in supporting victims and tackling domestic violence, rape and sexual assault. In July 2000, 34 multi-agency victim-focused projects were funded, and they developed a range of interventions in various settings and among different population groups. This report is specifically based upon the findings from the independent evaluation of three projects, which were all funded under the CRP VAWI. Although all three employed advocates to advise, support and enable women to move towards living violence-free lives they all had a different emphasis and operated in varying contexts. All three projects specifically targeted victims from Black and other minority groups, particularly the South Asian, African and African-Caribbean communities. This report also draws upon the findings from all the domestic violence projects, which were funded and evaluated under the CRP VAWI. These findings are presented in an overview report called: *Tackling Domestic Violence: effective interventions and approaches*. Hester, M. and Westmarland, N. (2005). Home Office Research Study No. 290. London: Home Office.
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