Forced Marriage of People with Learning Disabilities

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acting against abuse

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Project Steering Group

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Forced Marriage of People with Learning Disabilities: Final Report on the Research Project

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What is Forced Marriage?

A forced marriage is defined by the Home Office as “A marriage without the consent of one or both parties and where duress is a factor”.

There is a clear distinction between a forced marriage and an arranged marriage. In an arranged marriage the family of both spouses take a leading role in orchestrating the marriage but the decision to accept the arrangement or not remains with the prospective spouses. In forced marriage, one or both spouses do not, or due to lack of capacity cannot, consent to the marriage.

The definition of forced marriage stipulates that duress including physical, psychological, sexual, financial and emotional pressure is a factor. However, in relation to people with learning disabilities, duress may not be a factor or may manifest itself differently.

The giving of consent by both parties is a legal requirement for all marriages. There is no legal or religious basis for this not being the case. Children under the age of 16 cannot legally consent to marriage in the UK. Therefore, any marriage to a person under 16 must be deemed ‘forced’.

In addition to this, some people with learning disabilities do not have the capacity to consent to marriage. The Mental Capacity Act 2005 stipulates that all persons must be deemed as having capacity unless it can be demonstrated otherwise. The Act does not allow for anyone to decide on behalf of another in relation to sexual activity or marriage. The principles of this Act, however, can be used to assess whether or not a person has capacity to consent to marriage, remembering that under the Act ‘capacity’ is time and decision-specific.

If a person with a learning disability does not have the capacity to consent, the marriage must be deemed as forced. In some marriages involving a person with learning disabilities, the non-disabled spouse may not know they are marrying a person with a learning disability. It can therefore be questionable whether they have given informed consent themselves.

The consequences of speaking out about or trying to escape from a forced marriage or impending forced marriage cannot be underestimated. Victims and potential victims run the risk of being ostracised by family and community, being physically harmed, held against their will or even killed.

It is imperative that frontline professionals understand the concept of the ‘one chance rule’ – there may only be one chance to protect a victim/potential victim and this should not be ignored. The one chance rule becomes no less important when working with people with learning disabilities. Very often workers will look to family members to explain or clarify situations.
It is important to state that people with learning disabilities should be supported to enter into marriage where they are making a free choice, have the capacity to consent and are of a legal age to do so. However, for those forced into marriage this is not the case.

**Introduction: Reason for the research**

Forced marriage is an abuse of human rights, a form of domestic violence and completely unacceptable. It happens to boys and girls, men and women and people with and without disabilities. It is not to be viewed as a ‘cultural tradition’ or confused with arranged marriage, in which families play a role and both parties consent freely to marriage.

Forced marriage of children and adults with learning disabilities is an issue that has been highlighted by many frontline professionals including teachers, social workers, health professionals and police officers. It is, as with many other types of abuse, a largely hidden issue and likely to be vastly underreported.

Figures from the Home Office/Foreign and Commonwealth Office Forced Marriage Unit indicate that 53 of the 1,700 forced marriages reported to them in 2010 involved people with learning disabilities. This figure is likely to be the tip of the iceberg. Although it is most frequently seen to be an issue affecting young people from South Asian culture, it is important to recognise that forced marriage can affect anyone from any background.

The Ann Craft Trust provides training and consultancy on safeguarding disabled children and vulnerable adults to a wide range of agencies and professionals. Throughout the course of our work we were being offered anecdotal information regarding cases of forced marriage that professionals were involved in. We were informed that it was an issue largely ignored and little understood by agencies and communities alike.

A search for literature on the topic yielded no results specifically relating to people with learning disabilities. Anecdotal evidence from professionals suggested that current safeguarding policies may not be incorporating forced marriage as a definition of abuse. Where it is included, specific advice relating to people with learning disabilities is omitted.

Discussions with the Forced Marriage Unit revealed that they themselves had very little information on the prevalence of forced marriage of people with learning disabilities and that the guidance provided to professionals required improving and locating within evidence-based practice.

The Forced Marriage Unit was committed to building upon current knowledge and practice and hence funded this research project.
**Abuse of people with learning disabilities**

In undertaking this research project we set forced marriage within the wider context of the abuse of children and adults with learning disabilities.

Research and evidence from practice tells us that children and adults with learning disabilities are both subjected to more abuse and less likely to be protected by safeguarding systems than their non-disabled peers (Cooke 1999, Sullivan and Knutson 2000, Cooke and Standon, 2002, NSPCC 2003). It has also been wrongly assumed that the impact of abuse is somehow physically or emotionally less painful due to the victim having a learning disability.

European and International Human Rights law and the Human Rights Act (1998) apply equally to disabled and non-disabled people. All too often people with learning disabilities are seen or treated by others in ways which contravene their rights, for example in not being given choices or having their views listened to.

The impact of this can be that people with learning disabilities do not have the opportunity to develop fulfilling relationships, do not participate fully in decisions affecting their lives and have their participation in many activities limited.

Children and adults with learning disabilities are subjected to more abuse than their non-disabled peers for a range of reasons including:

- Increased likelihood of social isolation
- Dependency on parents/family members and carers for practical assistance in daily living including intimate and personal care
- Impaired capacity to resist or avoid abuse or understand that a situation is abusive
- Speech, language and communication needs
- Lack of access to a trusted person if wanting to disclose
- Children and adults living in residential care have an additional dependency on staff for daily care and may not have access to an independent person who can advocate on their behalf
- More easily coerced/eager to please
- Human rights not recognised/respected
- Unaware of right to and route to complain

Children and adults with learning disabilities are less likely to be safeguarded from harm than non-disabled people. Professionals are sometimes unable to recognise that abuse is taking place for a range of reasons including:
• Over identifying with parent/carer – this can lead to reluctance in accepting abuse is taking place or seeing it as being attributed to the stress of caring for a disabled person
• Lack of knowledge about the impact of the learning disability on the child or adult
• Lack of knowledge of the child or adult’s usual behaviour
• Confusing behaviours that indicate a person might be being abused with those associated with disability e.g. behaviour that challenges
• Accepting what are perceived to be “cultural norms”
• Lack of clear guidance in safeguarding policies and procedures
• Forced marriage not recognised/acknowledged as such
• Physical injuries explained by their disability rather than abuse e.g. bruising
• Reliance on parents to speak for their child or explain behaviour or symptoms
• It may be difficult for professionals to remain confident about their own expertise when challenged by a parent/carer
• Belief that a child or adult with a learning disability cannot communicate their wishes and feelings, or it is thought too difficult to obtain their views
• Confusion surrounding issues of capacity to consent

(adapted from NSPCC 2003)

An individual’s capacity to consent can change. For example, with the right support and knowledge, a person with a learning disability may move from a position of lacking capacity to consent to marriage, to having capacity.

However, some children and adults with learning disabilities are given no choice and/or will not ever have the capacity to give informed consent to marriage and all it entails. This may include engaging in a sexual relationship, having children and deciding where to live.

About the research

The research upon which this report is based was funded by the Forced Marriage Unit and carried out during Spring 2010 by the Ann Craft Trust with the Judith Trust.

The research project and writing of the Practice Guidance was overseen by a Steering Group comprising of the project lead, learning disability researcher/academic, CEO of ACT, representatives from the Judith Trust and the Forced Marriage Unit and others active in forced marriage and working with Black and Minority Ethnic groups and Refugee’s (BAMER) groups.

The aims of the research project were discussed in depth by the Project Steering Group. It was agreed that the scale of this project would not allow for attempting to uncover the prevalence of forced marriage of people with learning disabilities in the UK.
The aims agreed were:

1. To obtain an in-depth understanding of the motivations for and consequences of forced marriage of children and adults with learning disabilities.
2. To gather information from frontline professionals on cases known to them.
3. To highlight best practice.
4. To inform the formulation of national multi-agency practice guidance.

The results of this study do not seek or claim to be representative of forced marriage in the UK. However, they reveal a picture of the issues that have been raised for people with learning disabilities and the frontline professionals who have been working with them.

Methodology

In seeking to gain insight into the issues relating to forced marriage of people with learning disabilities a qualitative methodology seemed most appropriate and most likely to yield valid and useful data. A decision was taken to gather data in a number of ways in order to capture as wide an audience as possible, including people with learning disabilities and their families.

Data collection was planned to be undertaken in three phases and to use three different methods.

The first phase used semi-structured interviews with a range of practitioners with the aim of gaining in-depth qualitative data from practitioners who had been involved in cases of forced marriage of people with learning disabilities.

The questions for the interviews were developed in order to obtain data on the motivations for and consequences of forced marriage of people with a learning disability, while capturing best practice and knowledge gaps in protecting vulnerable adults from forced marriage (see Appendix 1).

The sample for the interviews was small, comprising nine frontline practitioners drawn from the police, the legal system, adult and children’s social services, health and the third sector. The small size of the sample was partly as a result of the restricted scale of the research and partly because identifying practitioners who were or had been involved in cases involving people with learning disabilities proved difficult. The sample was selected by using our own networks and those of organisations involved in supported victims of forced marriage.

The second phase of gathering data used an online survey designed to capture a mixture of quantitative and qualitative responses from both practitioners who had encountered forced marriage cases and/or those who had not.
This technique sought to gather an overview of the experience of professionals, the types of cases they had encountered, and whether or not they felt they had sufficient knowledge and skills to deal with such work.

We do not have an accurate record of the number of recipients of the online survey. As the aim was to yield as much data as possible, we asked recipients to send the survey out to their own networks. However, the survey yielded a good response rate with 287 responses.

The survey was structured in two parts. Respondents could choose to complete sections 1 and 2, or section 2 only depending on their practice experience.

Section 1 was designed to obtain information on specific cases of forced marriage. Section 2 was designed to obtain the views of practitioners on levels of knowledge and skill in relation to forced marriage of people with learning disabilities, and their views on what is required in policy and practice to adequately safeguard those at risk.

All questions were multiple choice, and some provided space for additional information to be added (see Appendix 2). The data provided gave an overview of demographics of the cases known to practitioners (71 in total) and also provided summary statistics on professionals’ experience of the issue.

The purpose of the research was not to gather information on prevalence of forced marriage; hence no checks were possible to ascertain whether any of the 71 cases could be one particular case reported by two separate practitioners.

Following receipt of the online survey, three professionals contacted the project lead by telephone asking if they could provide additional data on both cases and their views regarding good practice. Their backgrounds included a Child and Adolescent Mental Health Service social worker, an Adult Services manager and a specialist consultant in forced marriage and honour-based violence. This data was included in order to further enrich the survey findings.

The third phase of gathering evidence was planned to involve interviewing people with learning disabilities and their families. The Ann Craft Trust and Judith Trust used their own networks and those of learning disability and forced marriage Non-Governmental Organisations (NGOs) in order to recruit a sample of victims/potential victims. This proved unsuccessful, as people were understandably unwilling to talk about their experiences.

We then sought people with learning disabilities willing to be interviewed about the topic, but this also proved problematic. Reasons provided included fear of talking out, fear of upsetting the community, and a refusal to acknowledge that forced marriage of people with learning disabilities occurred.
We then reviewed the method of obtaining data from interviews to focus groups. We thought that people, both with and without learning disabilities, may be more willing to discuss forced marriage as an issue in a group setting. We attempted to recruit through similar means as above, but were again unable to do so. Unfortunately at this stage a decision was taken not to continue with this third stage due to the problematic nature of recruiting participants.

The research yielded a large amount of data, which we analysed in two ways. The online survey produced both quantitative and qualitative data which was analysed using a quantitative analysis package to produce summary statistics. The semi-structured interviews produced a large amount of rich, qualitative data. The interviews were transcribed and then analysed using a thematic system to draw out the dominant thematic priorities from the data. Dominant themes were contrasted with any other themes present in the research. Transcripts were then compared for consistency with these themes or the emergence of other themes within the data. This analysis was then cross-checked by another researcher for continuity and validity.

**Research results**

287 people responded to the online survey. Of these 71 completed the first part of the survey and all 287 completed the second part. In addition to this, 10 professionals were interviewed face-to-face and 3 provided additional information following the online survey over the phone.

Percentages are used in reporting the findings from this research in relation to each answer given in multiple choice questions. Many questions contained an ‘other’ option and, where appropriate, answers given in relation to this are explained.

Where the total number of percentages does not add up to 100, the remaining percent is of the number of participants who did not fully complete all information. For example, where the gender or age of the victim, or where the geographical location of the marriage, was not known. Themes emerging from interview data will be included and made specific.

**Demographics of research respondents**

One of the aims of the research was to elicit views from a variety of frontline professionals.

A range of professionals completed the survey, including social workers (24%), police officers (8%), health workers (16%), Non-Government Organisation workers (7%) and others (26%). 19% of participants did not stipulate their professional background.

Those citing ‘other’ included clinical psychologists, speech and language therapists, solicitors, advocates, housing workers, Crown Prosecution Service staff, counsellors, domestic abuse workers, and transitions workers.
The majority of participants were from England, the highest percentage being from the South East (22%), followed by East Midlands (15%), North East (11%), North West (9%), West Midlands (7%), and South West (6%). 7% identified themselves as working nationally, 3% internationally and 1% in Wales. 20% did not identify their geographical area of work.

As the survey was sent out widely by email, and practitioners were asked to forward to others who might be interested in taking part, the information obtained cannot be seen as representative or indicative of any geographical area having more involvement in forced marriage of people with a learning disability than another. In addition, interview participants were principally from the South East and Midlands.

The cases of actual or potential forced marriage identified by interviewees and survey respondents all came to the attention of professionals between the late 1990s and 2010 in a range of ways. This includes adult protection referrals, the person with the learning disability raising their own concerns with staff at school/in counselling/to a social worker, parents or family seeking help, concerns raised by staff in school/day centre/residential centre/social work team, concerns reported to police, referral from the Forced Marriage Unit and concerns reported by a GP. One case reported was discovered when the non-disabled spouse fled the family home. By far the majority of cases reported to professional services involved a third party raising the concern (91%).

Participants were asked a range of questions relating to forced marriage cases that either they or a colleague had been involved in. Of those responding to the survey, 22% identified that they themselves or a colleague had dealt with a case of forced marriage of a person with a learning disability. 43% had not and 11% were not sure. All those interviewed face-to-face or over the telephone had personally had experience of working with cases. All of those taking part in interviews had themselves worked with one or more person with a learning disability forced to marry.

Demographics of victims/potential victims of forced marriage

71 participants chose to answer a range of questions relating to demographics of the case/s they were aware of.

The first question related to capacity to consent to marriage. The survey revealed that while 13% of the people with a learning disability did have the capacity to consent to marriage, 39% did not, and in 31% of the cases it was not clear. This shows a significant number were either married or going to be married without giving informed consent.
Similar issues arose from interview participants who stated that in the majority of cases they had worked with people who either did not have capacity or their capacity was not clear and required assessing.

The age of the person with the learning disability forced into marriage varied. There were no cases of children under 13 reported, 11% were aged 14-17, 23% were 18-21, 23% were aged 22-25, and 18% were over 25 years of age. 8% of participants were not sure of the person’s age.

This information highlights that the transition period between child and adult services for young people with learning disabilities is key.

The gender of the person with a learning disability was revealed as female in 45% of cases and male in 38%. In 17% of the cases the gender was not known. These figures are very different to those forced marriages reported to the FMU for the general population (85% female: 15% male).

It may be that more males with learning disabilities are forced into marriage than those without, or the figures may reflect the fact that more cases of people with a learning disability are reported by a third party. The figures of men without a learning disability could well be vastly underreported for similar reasons as the underreporting of male rape or male victims of domestic abuse.

The findings also revealed that 18% of those either forced into marriage or at risk of being so were still in school. 55% had finished school, and in 10% of the cases the participant was not sure. Of the 18% who were still in school, participants revealed that while the majority were not sure of the type of school, 15% were in special schools and 4% in ‘mainstream’ schools, thus highlighting
the importance of all schools needing to be aware of issues relating to forced marriage. Staff in schools may be ideally placed to use the ‘one chance’ rule to act to prevent the forced marriage taking place.

The survey results identified the people with learning disabilities were from a range of ethnic backgrounds. 42% were Pakistani, 17% Bangladeshi, 8% Indian, 4% White British, 1% were identified as White and 1% Asian, 1% Other Asian or Other Black, 18% did not answer and 6% did not know the ethnic origin.

No cases were reported of people who were White Irish, White Other, White and Black Caribbean, White and Black African, Caribbean, African, Chinese or ‘other’ ethnic group in either the interviews or online survey.

Many of the cases reported anecdotally and to the Forced Marriage Unit involve people from South Asian communities. There may be a number of reasons for this. For example, these communities have a strong tradition of arranged marriage, and marriage and ‘honour’ are both held in high regard. However, we may reflect upon the fact that we think ‘we know where to look’ in order to find cases and there may be many more cases in other communities/ethnic groups not being recorded or recognised.

The survey demonstrated that 48% of those forced or at risk of being forced into marriage were living with their parents, 13% with extended family, 11% were living in a residential setting, and 3% were living with their spouse. A further 3% were living with their spouse and children, and 4% in other settings (such as in supported living).
31% were in receipt of day care services, 18% were receiving health care services and 6% some form of home care. 22% were not accessing any support care services and 23% were receiving other types of support including services for deaf people, direct payments and GP services.

In summary, 22% had no contact with people who may have been able to see the warning signs and take the appropriate action to safeguard the individual, signifying their increased vulnerability.

**Legislation used**

Participants were asked about the use of different types of legislation and safeguarding procedures used in the cases they were aware of.

In 20% of cases discussions relating to the capacity of the person with a learning disability to consent to marriage had taken place prior to the marriage. 54% were not aware of a discussion taking place.

32% of participants reported that the Mental Capacity Act 2005 was used to assess the capacity of the person to consent to marriage, and 39% said it was not. It is important to note that some of the cases were reported to have been before the implementation of the Mental Capacity Act 2005 on 1st October 2007.

Of those who said it was used, 11% said it was helpful, as it provided a way of demonstrating a person did not have capacity to consent to marriage. It clarified the decision-making process.
and bought out into the open the issue of the person’s capacity. It was also reportedly used to implement the best interest decision making process.

One participant stated that in one case involving a young Pakistani man, the family were involved in the process of assessing capacity of their son and agreed he did not have capacity to consent to marry, despite the fact that they had previously stated that it was not necessary in their culture for him to have capacity. They reported that what was important was that he would be found a wife to care for him and that he and his wife would live with his parents.

Another participant raised the issue of a lack of interpreters that led to people not having an assessment of their capacity to consent.

**Outcome of involvement**

In 37% of cases the survey respondent had become involved before a marriage took place and 43% after the marriage took place. This resulted in a range of outcomes, including the marriage being prevented; the person with the learning disability remaining in the marriage and receiving support, or remaining in the marriage and withdrawn from services (isolated from outside world); the person being supported to leave the marriage and ongoing support provided (there were some reports of family members then trying to track down the person/living under threat of being found/living with new identity); safeguarding procedures being initiated; capacity assessments undertaken; best interests discussions; court proceedings; criminal proceedings for assault; and a Forced Marriage Protection Order granted. In two cases the husband returned to their country of origin in South Asia.

Of those reportedly knowing where the marriage ceremony took place, 80% said the marriage took place in Pakistan, Bangladesh or India. However, a proportion also took place in UK (20%).

Of the 71 cases reported, children were born as a result of 15%. In 15% of cases it was not known whether children had been born, and in 45% of cases they had not.

In 91% of cases additional frontline workers other than the survey respondent were involved, including social workers, police, health professionals and staff from voluntary agencies. In only 9% of cases were there no other professionals involved.

This informs us that the lives of people with learning disabilities are often complex, requiring support from a range of sources. It also highlights the need for agencies to work together to protect everyone from harm as necessary, including children born into forced marriages.

However, as will be discussed in the following section, it cannot be assumed that ending the marriage is always the best option for all.
Motivators for forcing someone to marry

Understanding the motivators for forcing someone into marriage plays a key role in developing adequate safeguards.

114 survey respondents replied to a question relating to what they thought the underlying reasons for the forced marriage were. Their responses mirrored the data obtained in the interviews.

The two main reasons were seen as obtaining a carer for the person with a learning disability (22%) and pressure from extended family/community/faith group (20%). 18% cited obtaining a visa for someone from outside the UK, and 13% said they thought it was because marriage is seen as a rite of passage and this might be thought to ‘normalise’ the person with learning disabilities.

6% thought the reason was to obtain financial security for the person with a learning disability. Another 6% thought families believed it would ‘cure’ the person of their learning disability. A further 15% cited other reasons, including marriage being a family/cultural norm and obtaining physical assistance for ageing parents.

When asked whether forced marriage was viewed as the only option or the right option by families, 50 participants replied. Half thought families saw it as the right option, stating that
families cited reasons such as ‘every woman needs a husband’ and ‘no-one else will want her’, wanting to ‘normalise’ their child and not wanting to acknowledge that their child had a learning disability. 16% thought families saw it as the only option, citing reasons such as no-one else will look after him, no alternative to marriage, no-one to care for their child when they (parents) have gone (died).

Interestingly, 18% thought families saw forced marriage as both the right and only option. Reasons included the view that marriage is something that must happen to someone once they come of age.

In considering who from the family was participating in forcing the marriage to take place, 35% reported the father, 32% the mother, 15% said siblings, 12% grandparents, 9% aunt, 9% uncle and 5% reported cousins to be involved. A further 17% cited others, including step parents, spouses of siblings and extended family in another country. So although parents were involved in over 60% of cases, there were a significant number and range of other family members playing a role.

In answering what they thought might dissuade families from seeing forced marriage as an option, 24% thought less pressure from extended family/community/faith group would help. 15% thought support from an agency specialising in forced marriage and a further 15% thought a better knowledge of available services. 12% thought support from social care staff, 7% support from health care staff and 4% support from other voluntary organisations would be beneficial. A high percentage therefore considered that services could play a vital part.
22% cited other factors, including parents having a better understanding of the human rights of their child, and better communication between services and families. A number reported they thought nothing would dissuade some families as the practice of marriage is so deeply embedded in culture.

Domestic violence was reported to be a factor in 22% of forced marriages. It was also reported not to be a factor in 22% of marriages. 28% of participants were not sure whether it was a feature or not.

**Experiences of frontline practitioners and practice issues**

Participants were asked if they came up against any particular issues in dealing with cases of forced marriage. A range of difficulties were reported, including difficulties in seeing the service user independently from family members, family members and potential spouses being angry at what they saw to be private family business, apathy from other service providers in response to acting, and a lack of clarity in relation to the differences between arranged and forced marriage. These responses highlight the complexity of working with cases involving people with a learning disability.

Participants cited receiving support in working with the case from a variety of sources, including their own manager (23%), adult social care services (23%), Forced Marriage Unit (12%), police (12%), children’s social care services (8%) and specialist NGO (2%). A further 20 reported receiving support from other sources, including colleagues and legal services. 42% thought the support they received was useful, 6% did not and 21% were not sure.

Participants were asked if they experienced any resistance from their managers or agencies in recognising the case as being one of forced marriage. 76% did not, 4% did from their own manager, 5% did from their own agency, and 15% experienced resistance from another agency.

Research participants also cited being accused of being racist by families (including formal complaints being made) and senior managers/councillors not wanting to act for fear of upsetting community leaders. With only 12% using the services of the FMU, there has to be raised awareness of the advice and support that this valuable resource can offer.

Participants were asked questions relating to the routine recording of information about service users. In her research on the abuse of disabled children, Cooke (2000) found that basic information relating to the child was often missing from files. This makes it difficult for local authorities to adequately protect them from harm or make strategic plans. Similarly, without adequate information, it will be impossible to make provision for potential or actual victims of forced marriage with learning disabilities.
126 participants answered a question relating to whether they knew of anyone who had ‘disappeared’ from services such as school, day services, college etc. 20% said they did and 75% reported they did not. Of those that answered yes, 13% reported that this was followed up by the service, 2% said it was not and 8% were not sure.

This group of participants also answered questions on the recording of information relating to marital status and the number of children of service users with learning disabilities in their own agencies. 47% said the marital status is always recorded, 27% said it was not and 20% were unsure. 57% said whether they had children (living with them or not) was always recorded, 20% said it was not and 16% were unsure. Without clearer and more consistent recording of such information it is difficult for agencies to plan for services and adequately meet the needs of service users.

Participants were asked if they were aware of any differences in the ways men and women with learning disabilities were being forced into marriage. 114 answered this question. 68% were not aware of any differences. The remainder demonstrated a range of reasons for differences, including men with learning disabilities being married to obtain a carer (one case involved a woman without learning disabilities who could not have children, this fact was viewed as shameful by her family); women more likely to be forced into marriage to obtain a visa for her spouse; women more likely to be ‘sold’ the romantic idea of being married and having a wedding ceremony; and men being forced on women for financial gain to the women’s parents. One participant stated that men marrying women with a learning disability may be in an advantageous position if the marriage fails, as the marriage will secure a future in this country and he will be free to marry again.

Participants were asked how they thought existing cases of forced marriage (where the marriage has already taken place and children may have been born into the family) should be dealt with. 115 responded, citing a range of responses. The majority (68%) believed each case should be dealt with individually and sensitively, looking at the needs of the person with the learning disability and any children in the household, ending the marriage/removing children only if they were at risk of harm and this was deemed appropriate. 21% cited alternative ways of managing the situation using child and/or adult safeguarding procedures, annulment of the marriage or any other legal processes necessary.

Finally, participants were asked what knowledge they had of forced marriage of people with learning disabilities, and what knowledge, skills and training they thought would be useful. 115 answered. 22% said they had knowledge, ranging from a lot of casework knowledge to little theoretical knowledge. 38% said they had very limited or no knowledge. However, some in this category stated no knowledge of cases but did not clarify if they had theoretical knowledge. A
range of responses was given in relation to the knowledge, skills, and training they thought would be useful.

Discussion

The findings from the research project offer a snapshot of some of the key issues both in terms of demographics of those at risk of forced marriage, and what is required in policy and practice to increase knowledge and skills in safeguarding people with learning disabilities at risk from, or already subject to, forced marriages. The key factors which differentiate forced marriages of people with learning disabilities from those without can be summarised as:

<table>
<thead>
<tr>
<th>Person Without a Learning Disability</th>
<th>Person With a Learning Disability</th>
</tr>
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<tbody>
<tr>
<td>Duress always a factor.</td>
<td>Duress not necessarily a factor or may manifest itself differently. Person may even appear happy about forthcoming marriage.</td>
</tr>
<tr>
<td>Victim often reports themselves that they may be/have been forced into marriage.</td>
<td>May report themselves or may need support to report. May be reliant on others to recognise what is happening and report/take action. By far the majority of cases come to the attention of statutory agencies through a third party.</td>
</tr>
<tr>
<td>More females than males reported to be forced into marriage. Majority of support services in relation to forced marriage focused on meeting needs of females.</td>
<td>Rates of males/females with learning disabilities being forced into marriage are similar. Services need to address needs of males and females.</td>
</tr>
<tr>
<td>Capacity to give or withhold informed consent to marriage.</td>
<td>May lack capacity to give consent to marriage. May not understand they are being forced into marriage. May be more easily coerced into marriage.</td>
</tr>
<tr>
<td>May be able to obtain support themselves if leave family/community (i.e. to find work, apply for benefits, housing, medical needs etc.) though they are often supported in accessing accommodation and other support services, particularly in the short-term.</td>
<td>Often need ongoing support from a range of professionals in order that daily living needs are met (may include personal care, help with eating, shopping, finances, social/leisure activities, work etc.) May need specific and specialist support if placed in a refuge. Males may find it difficult to obtain place of safety given limited availability of refuges to meet needs of males with or without a learning disability.</td>
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It is clear that there are differences both between and within agencies in the ways in which forced marriage of people with learning disabilities is acknowledged and managed. Some frontline staff believe they have the skills and knowledge to work with such cases. However, a far bigger proportion report that they do not think they or their employing organisations have the level of knowledge and skills required to adequately safeguard those at risk.

Frontline staff fear being reported as racist and are concerned about ‘getting it wrong’. There are worries that they will be seen as culturally insensitive or over-zealous. All these issues impact upon the safeguarding process and can ultimately make the difference between acting to safeguard or not.

Having the time and space to explore concerns with experienced professionals is crucial. Current recording practices on electronic files were thought to put people with learning disabilities at risk, as the files are open for many people to read.

Not all agencies have specific guidance on dealing with cases of forced marriage of people with learning disabilities included in their safeguarding procedures, or have the means for good practice to be shared. This clearly has implications for both single agency and multi-agency approaches to keeping people safe.

Multi-agency working and the sharing of information is key in safeguarding practice. Indeed, Working Together to Safeguard Children (2010) states that all those with a duty to safeguard and promote the welfare of children should have regard to the statutory guidance The Right to Choose: Multi agency statutory guidance for dealing with forced marriage (p.198).

This guidance sets out the duties and responsibilities of agencies and seeks to ensure all agencies are clear about their own role and the requirement for joint working to protect. It says: ‘There are policies and procedures in place so organisations can work effectively together to protect people facing forced marriage’ (p17), thus sending a clear message that, as is required in other forms of safeguarding, protecting children and adults from forced marriage requires a multi-agency approach.

The research indicates that there are specific professional practice issues in terms of understanding how to assess capacity, how to deal with cases of families informing the worker they are ‘arranging’ the marriage, best practice in working with people with learning disabilities who are already married, and how to adequately support people who need to leave their home and communities in order to be safe.

There are also implications for policy. This research suggests that most cases of forced marriage happen to people under 25 years of age. This links to the time when young people
with learning disabilities are moving through the transition from Children’s to Adult Services and leaving schools and colleges, perhaps making them more vulnerable at a time when their cares needs are increasing.

In addition, there are more cases reported of males with learning disabilities being forced into marriage than in the non-disabled population. Many services are geared towards meeting the needs of females rather than males.

The need to protect males is indeed recognised in the 2009 Government Guidance ‘Handling Cases of Forced Marriage,’ which states: “Although these guidelines focus on women, much of the guidance applies to men facing forced marriage – and men should be given the same assistance and respect when they seek help” (p6).

However, part of the difficulty for both men and women with learning disabilities is getting the forced marriage to be viewed as such. The need for forced marriage to be recognised becomes all the more important as most cases reported to authorities are done so by a third party. This leads us to question whether many more go unreported due to lack of recognition.

What was clear from the research was that frontline professionals and agencies themselves are struggling to understand how best to plan for and work with people with learning disabilities who are forced into marriage.

Practitioners would benefit from policies, procedures, and training on reducing risk and raising support.

As one participant put it, forced marriage should be “integral in all policies and any training. Issues regarding people with learning disabilities should be mentioned every time; they shouldn’t be an ‘add on’. At present forced marriage is an add-on, so forced marriage of people with learning disabilities is an ‘add-on to an add-on’.”
Key Recommendations

- Development of specific multi-agency guidelines on forced marriage and learning disability (to be published by Government).
- Local Safeguarding Children Boards and Adult Safeguarding Boards to ensure the multi-agency guidelines are made available to practitioners and policy makers.
- All local safeguarding disabled children and vulnerable adult policies should include information on and procedures to follow in cases of suspected/actual forced marriage of people with learning disabilities.
- Local Safeguarding Children Boards and Adult Safeguarding Boards to collate figures for the number of forced marriages of people reported in their area. These could be used both strategically to plan services and locally in terms of learning from good/poor practice.
- Development of specific support services for males and females with learning disabilities who are at risk of forced marriage.
- Clear guidance is needed on the use of the Mental Capacity Act 2005 in assessing capacity to consent to marriage.
- Training on forced marriage of people with learning disabilities should be mandatory for frontline professionals (e.g. social workers/social care workers, health professionals, police, educational professionals).
- There is a need for improved pathways for communication and more productive relationships between local authorities and community/faith leaders.
- Training/information for families relating to human rights of children and adults with learning disabilities is required.
- The provision of a web-based forum in which professionals can obtain support, advice and information from others working with people with learning disabilities forced into marriage. Information on where to find resources, i.e. specialist advocates, tools for working with people with learning disabilities, tools for working with families/communities, accessible information about marriage and responsibilities, preventative work relating to relationships and safety, practical resources, refuges etc. must be included. The site could also potentially include separate sections for people with learning disabilities and for family members/faith leaders.
- There is a need for outreach work with families and community leaders to both raise the profile of the motivators and consequences of forced marriage but equally importantly to raise the issue of human rights of people with a learning disability.
- Information about the Forced Marriage Unit and other relevant resources.
• A helpline for people with learning disabilities themselves, staff supporting them, families and carers and the general public.

References


