**Procedure for Managing Honour Based Abuse Referrals with Essex MARAT**

**Honour-based violence**

The **definition** of “honour” based abuse to be used is:

“an incident or crime involving violence, threats of violence, intimidation coercion or abuse (including psychological, physical, sexual, financial or emotional abuse) which has or may have been committed to protect or defend the honour of an individual, family and/ or community for alleged or perceived breaches of the family and/or community’s code of behaviour.”

**For the CPS** we are seeking to record any criminal offence of threatening behaviour, violence, or abuse (psychological, physical, sexual, financial, or emotional) **committed as so-called honour crime**. Cases would be prosecuted for the specific offence committed, e.g. common assault, GBH, harassment, kidnap, rape, threats to kill, murder. These crimes should be identified as "honour crimes" on the CMS Case Management System as well as by the named offence.

Additionally, honour-based crimes could include:

* Attempted murder;
* Manslaughter;
* Procuring an abortion;
* Encouraging or assisting suicide;
* Conspiracy to murder;
* Conspiracy to commit a variety of assaults.

**Forced marriage**

A forced marriage is where one or both people do not (or in cases of people with learning disabilities or reduced capacity, cannot) consent to the marriage as they are pressurised, or abuse is used, to force them to do so. It is recognised in the UK as a form of domestic or child abuse and a serious abuse of human rights.

The pressure put on people to marry against their will may be:

* physical: for example, threats, physical violence, or sexual violence
* emotional and psychological: for example, making someone feel like they are bringing ‘shame’ on their family

Financial abuse, for example taking someone’s wages, may also be a factor.

**The Essex SET (Southend, Greater Essex & Thurrock) MARAT and HBV incidents**

The Essex MARAT partnership has agreed that all high-risk Essex HBV incidents where the adult is the possible victim should be managed within the Essex MARAT process to support multi agency decision making and planning in response to such concerns.

To ensure safe practice in relation to HBV incidents it was agreed that:

* Bespoke HBV training would be provided to the Essex MARAT
* Each partner within MARAT would identify an HBV named person who will be their MARAT representative for all HBV cases
* Each partner agency would ensure that they have appropriate recording polices in place that support restricted access to HBV case information

In addition, it was agreed that the following principles would underpin all practice from agencies within Essex who may receive a disclosure about, or have concerns about, possible HBV:

* That in these instances family members, friends and the community may pose the biggest risk to the victim
* The ‘One Chance’ rule – that we only have **one chance** to speak to a potential victim of HBV and prevent injury or death. If the victim is allowed to walk out of the door without support being offered, that **one chance** might be wasted
* The danger of involving the family and the community in cases of HBV – this includes any discussions about the concerns or welfare of a potential victim or any type of family involvement (for example using family, friends, neighbours, or community leaders as interpreters)
* That current policies and procedures for managing confidential records in relation to potential HBV are required to be fit for purpose. This may include securing potential HBV victims' records to restrict staff access
* That the underlying principles within safeguarding, whereby young people and adults with support needs are deemed to be best placed within their family if possible, and the practice of attempting to reconcile, mediate and offer counselling to achieve this, could inadvertently place potential victims of HBV at greater risk of harm

**Procedure**

The following procedure should be followed for all cases where agencies identify possible HBV concerns for an adult:

* Agency identify high risk HBV concerns via a DARA/DASH/Professional Judgement and then follow their own procedures in respect of HBV concerns
* Agency will contact Essex MARAT by sensitive headed email marked urgent and notify of a HBV , share the DASH/DARA information and other relevant information gathered using the Essex MARAC referral form, unless Police referral for which written notification of the relevant Athena reference will be required.
* Any referral received from a Partner Agency that are not Police should be passed to the MARAT Police Team for safeguarding considerations as a matter of urgency by the MARAC Operations Manager.
* Agency also refer to Children’s social care and/or Adult Social care as per SET procedures where there are children in the household at risk and/or an adult with care needs in the household, highlighting the case as HBV. This should be done at the same time as the MARAC referral.
* A MARAT admin representative takes the referral information and MARAT admin confirms the case with their MARAT Operation Manager and agree for a time to list the case. following the procedure for restricted access to HBV cases
* MARAT manager/or relevant MARAT member and the referring agency identify if they require an emergency MARAT HBV meeting, which will be held within 24 hours of the referral. Minimum attendance of 3 HBV representatives is required
* If it is not an emergency, a MARAT HBV meeting will be held within 10 – 14 working days of the referral
* MARAT admins email all relevant agencies/services where appropriate to advise that an HBV incident is going to /has already been sent to them. Those agencies should then follow their own security protocols for locking records down.
* MARAT HBV representatives research information relevant to the incident/family and provide this for the meeting. This will be minimal information as to whether the family is known if it is an emergency MARAT HBV meeting
* The MARAT HBV meeting will be heard on Teams. Purpose of the meeting is to agree and produce a MARAT HBV action and safety plan, using the MARAT action plan format
* The MARAT HBV action and safety plan will identify who will complete the actions agreed to address the concerns and the time for completion
* Only those HBV cases that have been risk assessed as high will be heard at MARAC.