

Intersectional Risk Tracker Tool•

The Intersectional Risk Tracker Tool for Domestic Abuse: A Comprehensive, Survivor-Centred Approach to Safety Planning

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Intersectional Risk Tracker Tool

Introducing the Intersectional Risk Assessment Tool for Domestic Abuse: A Comprehensive, Survivor-Centred Approach to Safety Planning

We're delighted to present our tool created to support professionals in the field of domestic abuse services - our Intersectional Risk Tracker Tool (IRTT). This tool provides a holistic framework for exploring how intersecting identities, marginalisation, and life experiences influence a victim-survivor's unique risks, barriers to safety, and needs.

Our tool enables professionals to foster more inclusive, trauma-informed discussions with survivors and offers a means to track risk levels and intervention effectiveness. It also serves to enhance life-saving risk assessments by inviting deeper understanding and cultural humility in recognising how intersectional marginalisation can intensify abuse.

The IRTT is designed for flexibility and can be adapted to suit diverse victim-survivor demographics, including those often overlooked in traditional risk assessment tools - such as migrant women, racially marginalised women and individuals with diverse gender identities and sexual orientations.

Our tool empowers professionals to deliver more inclusive, accessible, and effective services. It is constructed to complement existing best practices, rather than to replace validated tools like the DASH risk assessment.

Our recommendation is that this tool be used only after completing our comprehensive training programme. This is to ensure that it is used responsibly and effectively, and that users are equipped to respond appropriately to the complexities of intersectional risk in domestic abuse.

Contact us at wearefrieda.org.uk or email us at talkto@wearefrieda.org.uk to take the next step in offering survivor-centred, and intersectionally-informed support to victims of domestic abuse. We're excited to have you on board in our mission to provide services that truly see, hear, and understand survivors in all their complexity and courage.

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Practice Guidance:

This intersectional risk tracker tool (IRTT) is not meant to replace validated tools like

the DASH risk assessment. Rather, it is intended to complement existing best

practices by helping professionals have more inclusive, trauma-informed

conversations with victims/survivors. The prompts and considerations provided aim

to explore how a victim/survivor's intersecting marginalised identities, social

locations, and life experiences may impact their unique risks, barriers to safety, and

needs.

This IRTT does not override professional judgement. It is simply meant as a resource

to track risk levels and effectiveness of intervention, as well as foster more nuanced,

survivor-centred risk assessments that take each person's full humanity into account.

The questions are designed to invite victims/survivors to share their self-identified

risk factors, priorities, and options as shaped by intersectional dynamics of power

and oppression.

Ultimately, professionals should use their expertise and the victim/survivor's own

perspective to determine risk levels and appropriate interventions. This IRTT serves

to strengthen life-saving risk assessments by encouraging cultural humility and

deeper understanding of how intersectional marginalisation exacerbates abuse. It

aims to support professionals in providing inclusive, accessible, and effective

services. However, professional judgement and the survivor's voice should remain

central when making safety decisions.

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Note on Language:

Every act of abuse, irrespective of its nature, is severe and represents a serious

violation of human rights. When we categorise abuse as 'low risk', 'moderate risk', or

'high risk', it's not to downplay the severity or the damaging impacts of 'low risk'

forms of abuse. Rather, these categories are used as a tool for professionals to

assess and track the situation, and to guide the necessary response in terms of

support and intervention.

The 'risk' here refers not to the legitimacy or severity of the abuse itself, but to the

potential escalation of the abuse and the immediate physical safety of the victim.

'High risk' typically signifies that immediate and assertive interventions are

necessary due to the likelihood of severe harm or life-threatening danger.

However, it's vital to remember that every experience of abuse is valid, and even

'low risk' situations can have devastating and long-lasting impacts on the individual.

No level of abuse is acceptable, and every individual deserves support, respect, and

safety.

These classifications are designed to help provide the most effective support and

intervention for individuals in different situations. They are not intended to minimise

or invalidate any experiences of abuse. It's essential to approach each case with

empathy, respect, and an understanding of the unique intersectional factors at play.

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User Note: Intersectionality within the Matrix of Domination:

It's crucial to acknowledge that the factors described—ranging from 'Honour'-Based Abuse to the impacts of cultural stereotypes, and beyond—operate within the broader framework of the matrix of domination, where intersectionality is key. These factors do not exist in isolation but interact with, influence, and exacerbate each

other, contributing to a complex web of discrimination and abuse that is deeply

rooted in the larger macrosystem of structural violence.

When assessing the risk and impact of abuse, it's imperative to consider both the microsystem—individual and immediate social environments—and the macrosystem, including societal, cultural, and institutional structures that perpetuate inequality and violence. This comprehensive perspective ensures a more accurate

understanding of the victim's experience and the multifaceted nature of abuse.

Advocacy and intervention strategies must therefore extend across all parameters, addressing immediate needs and challenges within the microsystem while also challenging and seeking to change the structural inequalities within the macrosystem that underlie and perpetuate abuse. This approach underscores the importance of a holistic, intersectional perspective in effectively supporting victims

and working towards systemic change..



Intersectional Factor	Low Risk	Medium Risk	High Risk
Separation- Instigated Abuse	No escalation in abuse post-separation. No significant change in abuser's behaviour post-separation	Following separation, there is a noticeable increase in the intensity of abuse. The abuser may employ tactics to exert control, including emotional manipulation or indirect threats. There could be attempts to maintain influence over the victim's life through coercion or manipulation.	There is a significant escalation in abuse after separation, including stalking, direct threats, physical aggression, or other forms of harassment. The abuser actively seeks to intimidate, harm, or exert control over the victim, significantly impacting the victim's safety and well-being.

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Physical Health
Status &
Recognition of
Injuries on
Different Skin
Tones

No significant injuries related to VA/B and has regular access to good healthcare services. There is an awareness and understanding among healthcare providers regarding the identification of injuries across different skin tones, ensuring appropriate care and intervention.

some injuries associated with abuse and experiences inconsistent access to healthcare. There are mild challenges in identifying injuries on different skin tones, potentially delaying or complicating treatment. The abuser may target areas less likely to show visible signs of injury or exploit the victim's existing health conditions to inflict harm subtly.

Multiple or severe injuries related to abuse, with limited access to healthcare services. There is a significant challenge in identifying injuries due skin tone, which the abuser exploits to inflict harm more discreetly. Severe injuries may be overlooked or misdiagnosed, and the victim's health condition could be used strategically by the abuser to control, manipulate, or further harm the victim.

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Mental Health
Status
(including
Racial Trauma
and Minority
Stress)

No significant mental health needs and ability utilise safe, effective coping mechanisms. Exhibits minimal to no signs of racial trauma or minority stress.

Exhibits mild symptoms of mental health needs such as anxiety or depression, with occasional challenges in managing stress. Shows signs of experiencing racial trauma or the effects of minority stress. The abuser might manipulate the victim's mental health issues or experiences of racial trauma as a means of psychological control or manipulation.

Suffers from severe mental health needs, such as chronic or complex PTSD, major depression, or chronic anxiety. Exhibits clear signs of racial trauma or significant effects of minority stress, compounded by inadequate access to mental health support or resources. The abuser strategically exploits the victim's mental health conditions, racial trauma, or minority stress for gaslighting, exerting control, and isolating the victim, significantly hindering the victim's ability to seek help or achieve recovery.



Substance Misuse	There is no history of substance misuse. The individual leads a lifestyle free from substance dependency.	Occasional substance misuse is present but not to a severe or chronic degree. The abuser may sporadically introduce or encourage substance use as a means of control, escape, or further manipulation, potentially complicating the victim's situation without causing immediate, severe harm.	The individual faces chronic and severe substance misuse issues, significantly impairing judgment, health, and the capacity to seek help or exit abusive situations. The abuser actively exploits the victim's substance misuse problem, using it as a powerful tool for control, manipulation, and isolation, severely affecting the victim's physical and mental health and hindering recovery efforts.
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Social Factors

The individual benefits from a robust support network and does not face discrimination. This social strong foundation provides resilience against abusive dynamics, fostering sense of community and belonging that safeguards against isolation.

The individual has a limited support network and encounters occasional discrimination, which may erode their sense of security and belonging. The abuser might try to further diminish this support network, using isolation tactics and leveraging societal discrimination to undermine the victim's self-esteem and autonomy.

The individual is highly isolated, lacking any significant support network, and regularly faces discrimination. The abuser capitalises on this isolation and societal bias to exert control, compelling the victim to adhere to harmful social norms or stereotypes. This constant exposure to discrimination and manipulation severely impacts the victim's mental health and ability to seek help.



Economic
Factors & Cost
of Living Crisis

The individual is financially independent, enjoying stable employment and secure housing. They are not adversely affected by the cost of living crisis. which contributes to their ability to maintain and autonomy resist coercive control

The individual is partially financially dependent on the abuser, with unstable employment and housing situations exacerbated by the cost of living crisis. The abuser may exploit this semidependence and economic instability to exert control, using financial pressures as a tool for manipulation and coercion.

The individual is entirely financially dependent on the abuser, without personal income and/or facing a significant risk of homelessness. The severe impact of the cost of living crisis further entrenches this dependency, allowing the abuser to exploit economic vulnerabilities to a devastating extent. The victim's financial vulnerability is used by the abuser as a primary means of control, manipulation, and isolation, significantly hindering the victim's ability to escape the abusive situation



Cultural and Religious Considerations

The individual's cultural and religious beliefs support and do not interfere with their ability to seek help. There is accessible, culturally sensitive support available, ensuring that services align with the individual's beliefs and practices, facilitating a supportive and understanding environment

Cultural and religious beliefs create occasional hesitancy in seeking help. The abuser may manipulate these beliefs to their advantage, using them as tools for control and manipulation. While some culturally sensitive resources are available, navigating these beliefs to access help can present challenges.

Cultural and religious beliefs pose significant obstacles to seeking help, with a pronounced lack of culturally and religiously sensitive resources. The abuser extensively exploits these beliefs to exert control and isolation, leveraging cultural norms and religious mandates to justify abusive behaviour and prevent the victim from seeking external support, thereby compounding the challenges faced by the victim.



Safety Planning & Cultural Barriers	The individual has a comprehensive safety plan in place, with no cultural barriers to its planning or implementation. This plan is adaptable and inclusive, considering the individual's cultural background to ensure it is practical and effective, promoting a path to safety and independence.	The safety plan is only partially complete, with some cultural barriers affecting its development and execution. These barriers may limit the individual's options for separation and action. The abuser exploits these cultural nuances to complicate planning and to maintain control, creating additional hurdles for the victim to overcome when attempting to separate or seek help.	The individual lacks a safety plan, facing substantial cultural barriers that significantly impede any effort to separate or protect themselves. These barriers are deeply intertwined with the individual's situation, with the abuser leveraging cultural norms and expectations as mechanisms of control and isolation. The lack of a safety plan, combined with the exploitation of cultural barriers by the abuser, leaves the victim exceedingly vulnerable and without a clear path to safety.
Use of Children	No children involved or abuser does not use children to manipulate or control.	Abuser occasionally uses children to manipulate or control.	Abuser frequently uses children to manipulate or control.



Use of Children

No children involved or abuser does not use children to manipulate or control. The abuser occasionally uses children as tools for manipulation or control, exploiting the parent-child relationship to exert pressure on the victim. This manipulation may involve threats, custody battles, or using children to convey messages, creating a tense and harmful environment for both the victim and the children.

Children are covictims requiring appropriate and specified risk assessment and safeguarding practices. The abuser frequently and systematically uses children to manipulate and control the victim. This could involve direct threats of harm to the children, using them as leverage in abusive scenarios, or manipulating child custody arrangements to exert control. Such tactics profoundly impact the victim's emotional wellbeing and decisionmaking, significantly complicating efforts to seek help or leave the abusive situation, while also harming the children involved.

Children are covictims requiring appropriate and specified risk assessment and safeguarding practices.



Racial and Ethnic Identity

The individual experiences minimal to no discrimination based on their racial or ethnic identity, living in an environment where such biases are either rare or effectively challenged. The abuser does not use racial or ethnic identity as a tool for abuse, allowing the victim to maintain their sense of self and cultural integrity.

The individual faces occasional discrimination due to their racial or ethnic identity. The abuser sometimes leverages these societal biases to belittle, control, or manipulate the victim, exploiting racial and ethnic stereotypes or prejudices to undermine the victim's confidence and isolate them from their support networks.

The individual frequently encounters discrimination rooted in racial or ethnic biases. The abuser systematically exploits this discrimination, using racial trauma and societal biases as significant components of the abuse. This not only magnifies the victim's experiences of marginalisation but also strategically uses these societal prejudices to manipulate, control, and further isolate the victim.



Fear of
Discrimination
Based on Racial
Identity in Help
Seeking

The individual has no fear of facing racial discrimination when seeking help, confident in accessing supportive resources that are perceived as inclusive and understanding of diverse racial and ethnic backgrounds.

The individual harbours concerns about potential racial discrimination in the process of seeking help, which may cause hesitation or delay in accessing services. This fear is rooted in personal experiences or societal narratives of racial bias within support systems, creating barriers to seeking timely and effective assistance.

The individual has a significant fear of racial discrimination that strongly impedes their helpseeking efforts. This fear is based on pervasive experiences or awareness of systemic biases, making the prospect of seeking help daunting and leading to a sense of isolation and helplessness. Such fears are exacerbated by real or perceived instances of discrimination within support services, deeply affecting the individual's willingness and ability to reach out for help.



Age & Life Stage

Individuals at this level experience minimal risk related to their age or life stage, possessing adequate resources, autonomy, and social support to navigate their circumstances. Their wellestablished support network and access to resources mitigate vulnerabilities typically exploited in abusive situations, ensuring a degree of protection irrespective of their age or life stage.

Individuals may face exploitation due to age-related vulnerabilities or life stage transitions. Abusers may exploit dependencies arising from healthcare needs, financial control, or cognitive and physical health challenges. Life stage transitions such as entering parenthood or significant career changes can also be leveraged by abusers. Victims might be belittled based on agerelated stereotypes or face manipulation that complicates their ability to seek support or leave abusive environments. This manipulation underscores the need for targeted interventions that are sensitive to the nuances of age and life stage.

Individuals are significantly affected by ageism, dependency, and isolation. Abusers exploit vulnerabilities associated with health, financial instability, or a lack of social support, employing tactics like withholding care, financial exploitation, or emotional manipulation. Younger individuals are not exempt; they face unique vulnerabilities due to a lack of autonomy, experience, or resources. Across these age groups, abusive tactics often include withholding essential support, exploiting financial dependencies, and emotional manipulation, highlighting the need for comprehensive support systems that address the specific challenges faced by victims at different ages and life stages.

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Chronic Illness & Disability

The individual does not have a chronic illness or disability, or it does not impact their daily functioning. They face no discrimination in accessing healthcare, allowing for a life unimpeded by such barriers.

The presence of a chronic illness or disability partially impairs the individual's daily activities, with occasional discrimination or barriers in healthcare access. The abuser might occasionally use the victim's condition to belittle or exert control. including minimising the seriousness of the condition or obstructing access to necessary treatments and accommodations.

A chronic illness or disability significantly disrupts the individual's daily life, with frequent encounters of discrimination in healthcare settings. The abuser egregiously exploits the victim's condition, possibly denying access to essential medications, mobility aids, or support systems, or using the illness or disability to inflict harm directly. This level of exploitation not only exacerbates the victim's vulnerability but also significantly hinders their ability to seek help or achieve independence, emphasising the need for targeted support that acknowledges and accommodates the intersecting challenges of abuse, chronic illness, and disability.



Neurodivergence

The individual does not exhibit or identify with neurodivergent traits, or such traits do not significantly impact their daily life or interactions. The individual's neurodivergence presents moderate challenges in daily life, including some difficulty in accessing mental health resources that are culturally competent and understanding of neurodiversity. The abuser may exploit the victim's neurodivergent status for manipulation, control, or to belittle them, including denying access to necessary support, therapy, or accommodations that would aid in managing their neurodivergence.

Neurodivergence significantly affects the individual's daily life, with major barriers in accessing mental health services that accommodate and respect neurodivergent needs. The abuser takes severe advantage of the victim's neurodivergence, employing it as a primary tool for gaslighting, manipulation, or exerting control. This exploitation may involve undermining the victim's perceptions of reality, withholding support, or misrepresenting the victim's needs to others to isolate and control them further.



Gender Identity
& Sexual
Orientation

Individuals face minimal to no discrimination based on their gender identity or sexual orientation. Their environment and relationships support and affirm their identity, providing a foundation of respect and understanding that protects against targeted abuse.

Individuals may face discrimination or abuse that differentiates between challenges related to sexual orientation (LGB) and gender identity (T). Abusers might exploit the victim's sexual orientation through ridicule, threats of "outing," or leveraging societal biases. For those with diverse gender identities, abuse could include misgendering, denial of their gender experience, or manipulation exploiting societal misunderstandings of gender identity. These acts of discrimination can exacerbate feelings of isolation and vulnerability.

Individuals frequently encounter severe discrimination or abuse, with distinct risks associated with their sexual orientation or gender identity. For LGB individuals, this could involve sustained threats of "outing," emotional abuse exploiting internalised homophobia, or leveraging societal prejudices. Transgender and gender-diverse individuals might face persistent misgendering, threats against their safety, denial of access to genderaffirming care, or abuse rooted in transphobia. These targeted abuses demand specialised support services that are knowledgeable and sensitive to the distinct needs and challenges faced by members of the LGBTQIA+ community, ensuring interventions are respectful, affirming, and effective.



Note: Recognising the distinct experiences within the LGBTQIA+ spectrum is vital. Sexual orientations (LGB) and gender identities (T) encompass different societal challenges, personal vulnerabilities, and healthcare needs. Effective support and intervention strategies must be tailored to understand and address these unique aspects, ensuring comprehensive care and protection for all individuals within the LGBTQIA+ community.

Immigration
Status &
Recourse to
Public Funds

The individual has a secure immigration status and full access to public funds, providing a stable foundation that prevents exploitation based on immigration concerns. This stability supports their independence and access to services without fear of jeopardising their legal status.

The individual's immigration status is temporary or uncertain, with some restrictions on access to public funds. The abuser may exploit this uncertainty, using the victim's immigration status and limited access to financial resources as means of control, threatening with deportation, or withholding necessary documentation. This vulnerability can significantly impact the victim's ability to seek help or leave the abusive situation.

The individual has an insecure immigration status and no recourse to public funds, placing them in a highly vulnerable position. The abuser exploits this insecurity extensively, using threats of deportation, denying access to essential services, or isolating the victim from potential support networks. This exploitation makes it exceedingly difficult for the victim to seek safety or independence, emphasising the critical need for confidential, accessible support services that can navigate the complexities of immigration and abuse.



Interaction with
Systems &
Experiences of
Criminalisation

Individuals report positive or neutral interactions with law enforcement and other systems, with no history of being criminalised or unfairly targeted. This supportive experience contributes to a sense of trust in these systems, potentially facilitating more effective helpseeking and intervention processes.

Individuals have varied interactions with law enforcement and systems, including occasional experiences of unfair criminalisation.

Abusers may exploit these mixed experiences, manipulating the victim's apprehension towards seeking help or reporting due to fear of misunderstanding, bias, or further criminalisation. This uncertainty can hinder the victim's willingness to engage with support services or legal protections.

Individuals
frequently face
negative or harmful
interactions with law
enforcement and
systemic institutions,
often experiencing
unjust
criminalisation.

Abusers leverage this distrust and fear, using it as a tactic to control, isolate, and dissuade victims from seeking external assistance. The constant threat of negative repercussions from system engagement exacerbates the victim's isolation and vulnerability, highlighting the need for systemic support and advocacy to improve accessibility and trust in support services.

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Understanding of Intersectional Needs by Professionals

Professionals across relevant fields demonstrate a robust understanding of intersectional needs, ensuring support and interventions are tailored, inclusive, and effectively address the multifaceted realities of those they serve. This level of insight fosters an environment where all individuals feel seen, understood, and appropriately supported.

Some professionals show a limited grasp of intersectional needs, which may result in support that does not fully address or appreciate the complex layers of identity and experience affecting the individual. This gap can lead to suboptimal care, potentially leaving critical needs unmet and diminishing the effectiveness of interventions.

There is a widespread lack of understanding regarding intersectional needs among professionals, significantly impacting the quality of support provided. This deficiency can exacerbate the individual's risk and trauma, as services fail to recognise or adequately address intersecting factors such as race, gender identity, sexual orientation, disability, and more. The need for comprehensive training and education among professionals is critical to bridge this gap and ensure all individuals receive respectful, informed, and effective support.



Tech Use & Isolation for Migrant Women Migrant women enjoy full access to technology, which serves as a vital lifeline for connection, support, and information. This access underpins strong social networks and the ability to maintain relationships with family and friends, both locally and abroad, fostering a sense of community and belonging.

Migrant women experience intermittent restrictions on their use of technology by abusers, impacting their ability to communicate freely and access support. Instances of techrelated abuse or enforced isolation may include sporadic monitoring of their communications or limited restrictions on technology use, especially in connecting with family abroad. While moderate social support is available, these controls can undermine their autonomy and connectivity.

Migrant women face significant barriers due to constant restrictions on technology by perpetrators, leading to profound isolation. Their social networks are severely limited or non-existent, exacerbating their vulnerability. Techrelated abuse is a common tactic. including continuous monitoring of their activities, blocking communications with family abroad, and using technology to threaten or control them, especially leveraging immigration status. This environment starkly limits their access to outside help and support, intensifying feelings of isolation and dependency.



Language Proficiency

Individuals are fluent in the dominant language, facing no barriers in communication. This fluency facilitates easier access to services, support, and community integration, significantly reducing the risk of isolation and exploitation based on language.

Individuals experience some difficulty with the dominant language, leading to minor barriers in communication. These challenges may occasionally be exploited by abusers, including acts of belittling or refusing to communicate in the individual's preferred language. While some support systems are in place, the language barrier can hinder full access to necessary services and opportunities for social connection.

Individuals with limited proficiency in the dominant language encounter significant communication barriers, greatly affecting their ability to seek help, access services, and integrate into the community. Abusers may exploit these challenges through actions like refusing to provide interpretation services or using complex language to confuse or control. This exploitation deepens their isolation and vulnerability, underscoring the urgent need for accessible. linguistically inclusive support services that can bridge these gaps and offer protection and assistance.



Impact of
Cultural &
Societal
Stereotypes

Individuals benefit from a robust social network and navigate their environments without the adverse effects of cultural stereotypes. Their strong support system and positive self-perception shield them from potential stereotype-driven manipulation, fostering resilience against cultural biases and stereotypes.

Individuals experience some negative impacts of cultural stereotypes on their self-esteem and social interactions. Despite these challenges, they remain generally resilient. However, abusers may exploit cultural stereotypes to undermine the victim's confidence or exert control, using stereotypes as a tool for belittlement or manipulation. Victims navigate these instances with varying degrees of success, often relying on their support networks for reassurance and counteraction against stereotypebased abuse.

Stereotypes may influence the nature and quality of treatment and support provided by services.

Individuals are significantly affected by cultural stereotypes, which detrimentally impact their mental health, hinder their ability to seek help, and strain interactions with support systems. Abusers intensively leverage these stereotypes to demean, control, and isolate victims, exacerbating feelings of alienation and misunderstanding. This exploitation of cultural stereotypes magnifies the victim's vulnerabilities, making it challenging to access or receive effective support. Addressing these impacts requires targeted interventions that not only understand and counteract the effects of cultural stereotypes but also reinforce the victim's autonomy, identity, and access to culturally competent support services.



Female Genital Mutiliation/Cutt ing FGM/C No risk or incidence of FGM/C identified within the community. There is a comprehensive awareness of the legal consequences and health risks associated with Female Genital Mutilation. ensuring a protective and informed environment against such practices.

There are occasional indications or threats of FGM/C. eliciting concern for the physical and mental well-being of individuals within the community. Potential risks may emerge from familial or communal discussions endorsing FGM/C under the guise of tradition or cultural norms. Individuals. particularly those traveling to or residing in areas known for practicing FGM/C, may face heightened risk and require vigilant monitoring and education on the dangers associated with such practices.

Evidence of FGM/C exists, or there is a significant threat of individuals being subjected to FGM/C, including imminent plans for undergoing the procedure or past occurrences of FGM/C. Situations of confirmed or high risk necessitate immediate intervention and comprehensive support to address the extensive physical and psychological harm inflicted by FGM/C.

Mandatory Reporting Duty for FGM:

Professionals such as healthcare workers, teachers, and social workers are under a mandatory reporting duty if they discover that FGM/C has been carried out on a girl under the age of 18. The duty requires these professionals to report such cases to the police. This aims to protect girls and young women, provide support to victims and survivors, and hold perpetrators accountable. It's crucial for professionals to be aware of their legal obligations regarding FGM/C, including how to identify potential risks and how to report concerns appropriately to safeguard those at risk.

https://assets.publishing.service.gov.uk/media/5a8086f2ed915d74e33faefc/FGM Mandatory Reporting - procedural information nov16 FINAL.pdf



So-Called 'Honour'-Based Abuse

There are no reported threats or instances of abuse linked to perceived 'honour' within the community. Individuals live without the fear of violence or ostracisation related to honourbased expectations, indicating a safe environment free from this form of abuse.

Reports of threats or actual abuse connected to notions of 'honour' exist, leading to intermittent but significant fear, distress, and potential harm. Such instances may stem from accusations of dishonouring family or community through actions deemed unacceptable, causing concern and requiring attention to prevent escalation.

Individuals face frequent and severe honour-based abuse, including threats of violence, public humiliation, and social ostracisation. These abuses have a profound and detrimental impact on the individual's daily life and mental health, rooted in rigid adherence to cultural or familial 'honour codes.' This level of abuse necessitates urgent and targeted intervention to protect the victims and address the underlying cultural norms facilitating such practices.

Definition: So-called 'Honour'-Based Abuse (HBA) refers to a collection of practices used to control behaviour within families to protect perceived cultural and religious beliefs, and/or honour. This type of abuse can occur when perpetrators believe that a relative has shamed the family and/or community by breaking their 'honour code'.

This 'honour code' can be breached by various means including: becoming too 'westernised', resisting arranged marriages, being in a relationship that is disapproved by the family, or living a lifestyle that does not adhere to traditional cultural norms.

It's crucial to recognise that the term 'honour'-based abuse is a misnomer, as there is no honour in the practice of such violence and control. It is used merely for the purpose of identifying the specific cultural context and mechanisms of this form of abuse.



Measurement:

The measurement of these intersectional factors is designed to provide a quantifiable approach to assess risk escalation over time. Each of these factors is rated on a three-point scale:

Low Risk: Little to no instances of abuse or discrimination related to this factor. **Moderate Risk:** Some instances of abuse or discrimination related to this factor.

High Risk: Frequent and severe instances of abuse or discrimination related to this factor.

After conducting an assessment using these risk factors, we suggest calculating a total score. To do this, assign numerical values to each category (i.e., 1 for Low Risk, 2 for Moderate Risk, and 3 for High Risk). Sum these values to get the total risk score for the individual.

For example, if a person has 3 factors at low risk, 5 at moderate risk, and 3 at high risk, their score would be: (3x1) + (5x2) + (3x3) = 22.

By repeating this assessment at different points in time (e.g., every three months), you can track any changes in risk level. An increasing score over time can indicate an escalation in risk and suggest the need for heightened intervention or supports.

It's important to remember that this tool should be used as part of a comprehensive assessment process, alongside professional judgment and consultation with the individual in question. Every person's situation is unique, and this tool is not meant to predict abuse but to aid in understanding and responding to the risk of domestic abuse in its complexity and intersectionality.

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