ABUSE LINKED TO A BELIEF IN SPIRIT POSESSION/WITCHCRAFT – PRACTICE GUIDANCE FOR SOCIAL WORKERS

This guide was created by the Metropolitan Police Services Project Violet Team and adapted for the social care sector by Children and Families Across Borders

August 2012

INTRODUCTION

Social workers are charged with safeguarding children.

It is important to be aware of the subject of abuse linked with a belief system so that cases of such abuse can be identified at the earliest possible stage.

If any of the indicators (listed below) are present in a referral or become apparent in the course of a S.47 investigation or S.17 enquiries appropriate action must be taken urgently.

Cases of child abuse linked to a belief in spirit possession or witchcraft are not common however they can lead to extreme physical and emotional abuse and to child deaths. The cases of Victoria Climbie, Kristy Bamu and Ikpomwosa, whose torso was recovered from the Thames, were all child deaths linked to this belief system.

Therefore if you believe this issue may be present it is vital to respond as quickly as possible.

Children believed to be possessed by evil spirits or believed to be witches are at clear and immediate risk of significant harm.

AIM OF THIS GUIDANCE

To improve the knowledge on the issues of abuse linked to a belief and provide guidance to social workers and the wider safeguarding network.

This document is not intended as an exhaustive guide but as an information aid.

RELEVANCE

This guidance is of interest to all children and families social workers and the wider safeguarding workforce.

This document should be read in conjunction with current London Child Protection Procedures and Safeguarding Children from Abuse Linked to a Belief in Spirit Possession (HM Government 2007) and the 2012 National action plan to tackle child abuse linked to faith or belief:

National Action Plan to Tackle Child Abuse Linked to Faith or Belief:

https://www.education.gov.uk/publications/standard/publicationDetail/Page1/DFE-00094-2012

Executive summary of National Action Plan:

https://www.education.gov.uk/publications/standard/publicationDetail/Page1/DFE-00095-2012

DEFINITIONS

The term "belief in spirit possession" (for the purposes of this document) is defined as the belief that an evil force has entered a person and is controlling him or her. Sometimes the term "witch" is used and defined as the belief that a person is able to use an evil force to harm others.

Other terms you may hear are: Kindoki, ndoki, sorcerers, the spirit world, the evil eye, djinns, black magic, voodoo, obeah, demons.

The "rituals" used to neutralize the "witch" or rid the victim of the "demon" are commonly known as **deliverance**, **exorcism**, and less commonly, **healing or "praying for children."**

Other terms used are:

- "Beating the devil out" (refers to beating)
- "Burning the evil out" (refers to burning / scalding)
- "Create a way out for the evil" (Cutting / stabbing)
- "Squeeze the life out if the evil" (strangulation / semi strangulation)
- "Weaken the evil spirit" (starvation / fasting)
- "Stop the evil from spreading to other people" (isolation)

Language you may hear parents/carers use about the child:

- "The child has something in them"
- "The child needs to be fixed"
- "We need to send the child home (overseas) to be fixed/treated"

BACKGROUND INFORMATION

Always be mindful that a belief in spirit possession and witchcraft may not necessarily lead to harmful practices.

Belief in spirit possession and witchcraft is not confined to particular countries, cultures or religions, nor is it confined to recent migrants.

To stigmatise a child by accusing him / her of witchcraft or spirit possession can be hugely emotionally damaging. Abuse motivated by beliefs can lead to significant physical, sexual, emotional harm or neglect and is likely to included a combination of the four.

Abusers may be family members, family friends, carers, guardians, faith leaders or other figures in the community.

There is clear distinction in the way the victim and their risk to others is perceived between a belief the child is possessed by spirits / demons and a belief that the victim is a witch.

Spirit / demon possession: the victims themselves are believed to be harmed by the spirit / demon.

Families / carers (and often the victims) genuinely believe that the victim has been completely taken over by "the devil". Often in the perpetrators minds, any abuse is not going to affect the victim because he / she is effectively not there anymore. Violence is directed at the devil.

Witchcraft: the victims are believed to inflict harm on others.

There is a belief that the main power of the victim is the ability to inflict harm, for example by transmitting an illness to a relative who must be "sacrificed," accusations of causing diarrhea, malaria, TB HIV/AIDS - general misfortune, poverty, unemployment and failure.

When families hold a belief about a victim they may be terrified of him / her. They may feel that everything (including their lives) is under threat. Parents / carers may believe that the victim is so evil that their own life may be in danger. **Holding such a belief is no defence or mitigation should a victim be abused.**

There are a number of common risk factors that put a victim at risk of harm. It may be that the family is experiencing difficulties and this is rationalized by the belief that they are cursed and the victim has become possessed by evil spirits. A victim may be perceived as "different" due to changes in their family structure or dynamics, or because of his / her physical, emotional, mental or behavioural problems. It may be that the carer suffers with mental health difficulties.

Studies and previous cases indicate that the abuse takes the form of beatings, scalding, burning cutting and stabbing of the body, semi strangulation, applying pressure and smothering. Small incisions are known to have been made in the victim's abdomen to cut out a small piece of their intestine. Chilli may be rubbed into a victim's eyes or genitals.

There are reports of victims ingesting poison potions by mouth or administered via eyes or ears, sometimes to induce vomiting and / or defecation. This includes injection of petrol into the eyes / ears or pouring of tree sap into the eyes.

Those accused may be forced to fast and deprived of food and water for long periods of time. They may be tied up and / or made to sleep in the bath.

Those accused of witchcraft / spirit possession may be neglected and isolated from human contact. Often the parent / carer wants the victim removed and makes threats of abandonment. Siblings may not be allowed to talk to the victim. They may be isolated to stop

the "evil from spreading" to other people. Family members may only touch the victim with a stick, may not allow him / her to eat with the family and may not allow him/ her to share a room or have any physical contact with anyone.

There are also circumstances where parents / carers believe a victim has passed evil spirits to an unborn child, which may lead to abandonment or even the killing of the child.

The family / carers of a victim believed to be possessed or to be a witch may turn to their place of worship, faith leaders or traditional healers for help and guidance. Victims may be subjected to "deliverance" or "exorcism" rituals organised by and/or carried out by the faith leaders & other members of the community.

A small minority of faith leaders have been involved in accusing people of witchcraft by making accusations during a religious service or by confirming the suspicions of a parent / carer who has come to them for help. The advice given and any subsequent exorcism / deliverance ritual performed is often in return for payment.

The families are unlikely to have relationship of trust with police and social care. It is not uncommon for a family that is abusing their child in this way to remove the child from school (one of their main sources of protection). Statutory agencies usually become involved only when the situation has escalated.

CHILDREN VULNERABLE TO ACCUSATIONS OF SPIRIT POSSESSION / WITCHCRAFT

- Infants born with a congenital defect, albinos, twins, "badly born" (breech, posterior, face up positions).
- Children with physical disability or difficulties with speech (stammering has been linked with such accusations)
- Orphans / divided family structure children having lost both parents, sent to live with another relative / host family or children having lost one parent and the other parent re-marrying.
- Children with psychological disorder, learning difficulties, mental health problems or children who are especially gifted.
- Children who display naughtiness, stubbornness, aggression, thoughtfulness, laziness or who are withdrawn.
- Step-children within a family
- Children who experience nightmares / bedwetting.
- Children that have been trafficked

Children accused of spirit possession / witchcraft are often pre-adolescent or adolescent, vulnerable and living in socially precarious circumstances. However we must be mindful that a victim's age can range from birth to old age and can affect people from a variety of backgrounds and situations.

Children accused have displayed behaviour consistent with distress. They may appear isolated, quiet, withdrawn and sad. Significant numbers come to notice of teachers because of signs of neglect. Children may come to school hungry, unkempt, dirty and in unlaundered clothes. Some may come to attention because of injuries or because of aggressive behaviour or truanting.

SOCIAL WORK INITIAL RESPONSE

The key is to hold an urgent strategy meeting and launch a S.47 investigation if you see signs that this issue may be present in a referral.

Safeguarding

- A multi agency approach to early intervention is key. There should be a telephone strategy discussion on the day the referral is received and a face to face strategy meeting with key partners within 48 hours of referral. To include:
 - Children's Social Care
 - The child's school
 - Health (re current / previous injuries but also to provide information and guidance to carers about medical diagnosis and treatment of a child's perceived "difference")
 - Police
 - Consider UKBA (if immigration status is a factor).
 - Consider presence of a community representative / member of charity organization for advice and guidance. Details for CFAB and other agencies is at the end of this guide.

Any home visit may wish to consider the following questions

- Where does the child sleep?
- What conditions does the child live in?
- Is he / she treated differently to other children in the household?
- Speak to other siblings
- Is there an unborn child expected?
- Is there any religious literature or literature relating to witchcraft / demon possession?
- Information relating to places of worship or details of a pastor / healer?
- Seek out documentary and other corroborative evidence of identity (victim, family, carers, faith leaders)
- Identify any place of worship or community to which the victim and family are connected
- If a place of worship/faith leader is implicated in any abuse, consider if any other children are at risk
- Consider that once a child is stigmatised, the possibility they will be accused again is HIGH.
- Be mindful that police and social workers should not attempt to change the beliefs of the family, this will not be possible. Is there a member of the community that can be introduced to aid communication / educate?

 Concerns for the mental health of a parent / carer including PTSD, depression and schizophrenia.

CP Medical

• To be conducted as soon as is practicable if physical abuse is present/suspected (within 48 hours in any event)

Achieving Best Evidence

- If interpreter required, ensure he / she is not a direct member of the child's community and is aware of issues.
- Establish relationship between child and carer(s). Family structure may be unclear because "mother" and "father" may be head of the household rather than natural parents. Other adults in the household referred to aunties and uncles. - be aware that if immigration / benefits are an issue, the child may not disclose true relationship. Consider DNA testing where relationships are not clear.
- The child may be a victim of trafficking. What is the child's role and what are his or her responsibilities within the household?
- Establish if the child has been seen by a faith leader / healer.
- Establish if there are multiple abusers & crime scenes (i.e. carers & faith leaders, home and place of worship).
- Be mindful that the child may too believe he / she is a "witch" or is "possessed" and
 may talk of changing into an animal, eating human organs. Do not display any
 disbelief.
- Be aware that previous accusations of "possession" or "witchcraft" are frequently not recognised and it may have previously been thought that the child has been making it up.
- Does the child know of other children accused of spirit possession or witchcraft?
- Consider ABE interviewing child / adult witnesses.
- Remember adults can be victims of such abuse also.

WIDER ISSUES

Also consider the following:

- Is there a perspective on parenting practices underpinned by culture or faith, which is not in line with UK law and cultural norms? Will the parent / carer put their child at risk of harm through e.g. leaving young children at home alone, exercising robust physical punishment, forcing a child into marriage etc?
- Does the parent / carer put a very high value on preserving family honour, will he / she put the child at risk of harm rather than "exposing the family to shame" in their community?
- Does the parent / carer recognise his/her faith or community leader as all powerful, will he / she put the child at risk of harm rather than questioning the leader?
- Is the family being exploited by a faith / community leader?
- If there is a place of worship involved are there other victims within the community?

 Consider MAPPA involvement (particularly in the case of the perpetrator being a religious or community leader).

FURTHER RESOLUTION / PREVENTION

Further incidences can be prevented through education and training. Project Violet will work with CCPAS to provide Child and Vulnerable Adult safeguarding courses for leaders and congregations.

With appropriate advice from relevant agencies faith leaders are also part of the solution. The place of worship can act as a bridge and support engagement between child protection agencies and the family. This may also be an opportunity for the place of worship to undertake child safeguarding training.

Community solutions can also be fruitful through the police arranging a conference in partnership with the indentified community, inviting other agencies to attend and explain their roles and discussing child safeguarding issues. Such initiatives may prevent, identify further cases or even reduce incidents within communities.

This is not an attack on faith or belief; people may believe what they choose to. However, if these beliefs lead to the abuse of children then safeguarding procedures are required and belief is no defence for child abuse.

FOR FURTHER INFORMATION AND GUIDANCE CONTACT:

CHILDREN AND FAMILIES ACROSS BORDERS www.cfab.org.uk

Children and Families Across Borders (CFAB) is a unique UK-based charity which assists in the identification and protection of children who have been separated from family members as a consequence of trafficking, abduction, migration, divorce, conflict and asylum, as well as other vulnerable individuals in often desperate circumstances. CFAB also offers specialist training on international social work issues. Free Advice Line: 020 7735 8941.

Link to HM Government guidelines

www.londonscb.gov.uk/files/resources/cpp/spirit possession dcsf.pdf

AFRUCA www.afruca.org

AFRUCA (Africans Unite Against Child Abuse) is one of the UK's leading charities campaigning against the abuse and exploitation of African children. Afruca offer a specialist training programme for frontline staff, establishing an African Child Safeguarding Forum of African community organisations, and work with local Safeguarding Children Boards to strengthen existing guidance for practitioners.

CHURCHES' CHILD PROTECTION ADVISORY SERVICE (CCPAS) www.ccpas.co.uk CCPAS is an independent Christian charity providing professional child protection advice, support and training to churches, faith and other organisations. Funding through the Safeguarding Children's Rights Initiative will support the continuation and expansion of

CCPAS's work with African places of worship in London. The work will involve identifying and establishing contact with such groups and helping them address safeguarding issues through the development of policies, good working practice, training, written information for leaders and congregations and one-to-one advice via the CCPAS helpline and individual contact.

VICTORIA CLIMBIÉ FOUNDATION www.victoria-climbie.org.uk

The Victoria Climbié Foundation emerged from the tragic death of Victoria Climbié, the result of ritual abuse by her guardian in this country and the systematic failure of statutory bodies to prevent this abuse. Victoria's parents and the current Director set up the organisation to campaign for better child protection and effective co-ordination between statutory agencies, care services and black and minority ethnic communities. The grant from the Safeguarding Children's Rights Initiative will support work in five London boroughs to strengthen links between statutory services and African communities, including to improve identification of vulnerable children and understanding of the beliefs and practices which can lead to child abuse.

AFRICAN FAMILIES SERVICE

http://towerhamlets.talis.com/engage/showrecord/1323502174076

Although the African Families Service is based in Tower Hamlets they provide services across London. Key area of work: • Community partnership group • Training • Reflective practice forum • Direct work with children and families • Expert witness assessment • Links with the community