

**MUSLIM WOMEN'S NETWORK UK
RESPONSE:**

**PUBLIC CONSULTATION ON THE INTERIM GUIDELINES ON PROSECUTING
CASES OF CHILD SEXUAL ABUSE**

September 2013

Introduction

1. Muslim Women's Network was formally established in 2003 with the support of the Women's National Commission (WNC), to give independent advice to government on issues relating to Muslim women and public policy. In 2007, Muslim Women's Network decided to establish itself as an independent organisation to ensure its autonomy from Government. We renamed the group 'Muslim Women's Network UK' (MWNUK) and became a Community Interest Company in 2008.
2. Our aim is to gather and share information relevant to the lives of Muslim women and girls in order to influence policy and public attitudes, to raise the profile of issues of concern to Muslim women and to strengthen Muslim women's ability to bring about effective changes in their lives.
3. At the time of writing this Response, MWNUK has a membership of 500 that includes individuals and organisations with a collective reach of tens of thousands of women. Members are mainly Muslim women living and working in the UK while our non-Muslim members work with or on behalf of Muslim women. Our membership is diverse in terms of ethnicity, age, religious backgrounds, lifestyles, sexual orientation and geographic location and members are from a range of employment sectors including: higher and further education; voluntary sector and support services including services workers; health and legal professionals; the police and criminal justice sectors; and local and central government.
4. Our current priority areas are the following:
 - (a) Sharing understandings of gender in Islam from a human rights perspective.
 - (b) Sharing knowledge of UK family laws, marriage and divorce.
 - (c) Changing attitudes to domestic violence against women.
 - (d) Changing attitudes to mental health.
 - (e) Changing attitudes to women's leadership.

- (f) Supporting actions to addressing forced marriages.
- (g) Supporting actions to addressing child sexual abuse.

**Muslim Women’s Network UK Report –
“Unheard Voices: The Sexual Exploitation of Asian Girls and Young Women”**

- 5. Child sexual abuse is a complex and widespread issue that is not limited to any one community. As the only national Muslim women’s organisation in UK we have been very aware of the issue of child sexual abuse within the Muslim and Black Minority Ethnic (BME) communities and in turn have been specifically concentrating on child sexual abuse as a priority area. We have been deeply concerned however by the fact that media and public attention has thus far focused on White British female victims of sexual exploitation and Asian offenders, suggesting that the motivating factors behind such cases of abuse are to do with race, faith and ethnic culture. We were concerned that this paradigm ignores the reality that sexual predators, regardless of their ethno-cultural or religious background, will target the most vulnerable and the most accessible of children and young people.
- 6. MWNUK therefore wanted to address this issue and fill the gap in knowledge with regard to BME victims in the hope that it would provide a voice to the unheard victims of sexual exploitation. At the beginning of 2013 a pilot study led by the Chair of MWNUK Shaista Gohir was launched to uncover the hidden experiences of Asian/Muslim girls and young women so as to allow a better understanding of how to support and protect them. The findings have been compiled into our report entitled “Unheard Voices: The Sexual Exploitation of Asian Girls and Young Women” which is to be launched on 10th September 2013. We hope that this report will be taken into consideration when assessing the Interim Guidelines on Prosecuting Cases of Child Sexual Abuse.
- 7. MWNUK have also been providing training to individuals and organisations in relation to sexual violence and child sexual abuse cases involving Muslim and/or BME victims so as to ensure that specific vulnerabilities and individualities can be identified and appropriate support and preventative measures can be put in place.

Response

- 8. MWNUK’s concern has consistently been that the needs of the Black Minority Ethnic (BME) victims of sexual abuse are at risk of being overlooked by service providers and support agencies. This response is being written in the hope that the experiences of BME victims are taken into account when determining new policies and resources to tackle crimes of child sexual abuse as it is important that victims from all backgrounds are helped and supported.
- 9. At the outset we must commend the CPS for recognising that there are particular aspects of child sexual abuse cases which differentiate them from other types of cases as well as taking steps by which to tackle the issues. We believe that overall the Interim Guidelines will be very beneficial for all involved in the prosecution of such cases, especially victims. However, there are certain matters which we feel should be included in order to ensure that the Guidelines are truly inclusive and applicable to all cases where sexual offences have

been committed against a child or young person. We will endeavour to raise these issues in our responses to the specific questions raised as part of the consultation process.

Question 1:

Do you agree with the new approach of the CPS to cases involving child sexual abuse?

10. Overall we agree with the new approach of the CPS towards cases involving child sexual abuse and believe this will lead to positive results for all involved in the process, particularly the victims who have already been put through gruesome ordeals.
11. We must firstly commend the CPS for highlighting that boys as well as girls can be victims of child sexual abuse and similarly that offenders can be both male and female. We urge that all individuals and organisations involved in the prosecution of cases remain free of any stereotypical notions as well as stay alert to the possibility of a wider picture that may emerge; an individual that may be assisting an offender may be a victim him/herself of sexual abuse, blackmail or even bullying. Case studies have emerged where for example, a male was bullied into befriending a female victim through peer pressure so as to then facilitate a means by which to exploit her. It must be remembered that various techniques can be used by offenders to achieve their aims and it is not necessarily the case that all techniques will be known to us.
12. The concept of early consultation between the police and CPS will in our opinion have a positive impact by which to allow proper investigation and assist in assessing the merits of a case at later stages, and in turn will potentially reduce the burden on victims.
13. We commend the CPS for highlighting the fact that child sexual abuse covers a range of offending behaviour and types of offenders and second the proposition that it is important that prosecutors have regard to the context and circumstances in which offending is alleged to have taken place.
14. We are concerned however that the Interim Guidelines have not put forward proposals by which to ensure proper investigation where BME victims are involved nor considered the need for specialist faith and culturally sensitive support for BME and/or Muslim victims.
15. We have noted that the Rape and Serious Sexual Offences (RASSO) Unit will act as a central point of expertise in the CPS area and will conduct the prosecution of all rape and serious sexual offences cases locally. Whilst we feel such a Unit will be useful given the nature of cases to be dealt with, without a proper understanding of the vulnerabilities of BME victims we do not believe that proper investigations and evidence gathering can take place. An example would be where a boyfriend and girlfriend, in a healthy and consensual relationship, are caught kissing by a third individual who then exploits the situation by stating he/she will inform both their families of their relationship should they not comply with the demands put forward and the fear of the consequences of this occurring, such as disownment or forced marriages, leads to their abuse. Furthermore, a victim may have been a part of an alleged Islamic marriage to the offender which was conducted in secret and done so with the aim of silencing the victim from opposing her so-called husband; therefore it is necessary that the individual dealing with the victim is aware of such possibilities and has

the knowledge and understanding by which to investigate the matter further and explore various options whilst remaining sensitive to the needs of the victim.

16. Similarly, it has been noted that consideration has been given to the support to be given to victims before, during and after legal proceedings which is a positive approach to take; however, it is concerning that there is no mention of specialist faith and/or culturally sensitive support being available to BME and/or Muslim victims despite the obvious barriers that may appear which prevent victims from pursuing prosecution. This is also lacking when considering Independent Sexual Violence Advisers and counselling and therapy. A victim may be in fear of the consequences of family finding out such as disownment or a forced marriage and in fact the family may themselves be preventing the victim from pursuing prosecution where they are aware in a bid to save their reputation irrespective of the fact that their child or sibling is a victim of a crime. Shame, honour and the stigma attached to being a victim of a sexual crime are hurdles which appear in various guises and manner and it is vital that a support network is put in place that provides BME and/or Muslim victims with reassurance rather than to further push them away from the justice system and in turn push them towards the offenders themselves. We consider the Interim Guidelines to be seriously lacking in this regard and hope that this will be addressed in due course.
17. Moreover, we hope that consideration is given to the physical needs of a victim and not just the emotional; in our case studies we have found that the lack of practicality shown has gone towards worsening a situation rather than bettering. For example, a victim may have been disowned and made homeless by family members after becoming aware of the abuse and has then been placed in accommodation in an area that keeps the victim very much in the public eye and thus discoverable by the offender as well as family members who may intend to harm her. Research from our pilot study has also shown that accommodation such as hostels are actually targeted by offenders. It is important that victims are placed in safe accommodation and in a safe environment with all protective steps taken into consideration such as for example, retaining the victim's passport so that family members cannot take them abroad. The needs of victims with mental health issues and learning disabilities must also be considered and addressed.
18. Due consideration needs to be given to the cultural barriers that may be imposed during evidence gathering itself. Despite agreeing to assist with the prosecution, a victim may still hesitate in providing a complete account of their ordeal due to concerns over shame and honour.
19. From research undertaken and training sessions provided by MWNUK, we are aware that child sexual abuse of BME victims is especially challenging due to various intricate factors involved. In our opinion knowing of child sexual abuse cases or alternatively knowing of issues in the BME and/or Muslim community is not sufficient to deal with such cases; collective understanding and approach is required in order to do justice to the victims and to the prosecution system. We suggest that consideration be given into the training of both police and CPS and in particular the RASSO Unit and Independent Sexual Violence Advisers that will be tasked with conducting prosecution of rape and serious sexual offences as well as supporting the victims so as to ensure that the particular vulnerabilities of Muslim and BME victims are given due consideration. Without proper understanding it will not be

possible in our opinion to carry out proper investigations or prosecute a case to the requisite standards.

20. In this regard we wish to once again reiterate that when considering counselling and therapy provisions it is vital that faith and/or culture appropriate services are made available as well as services appropriate for victims with disabilities. Through our case studies we have uncovered that victims often have other underlying issues that made them vulnerable to exploitation in the first place and this should be considered during counselling and therapy sessions in order to ensure that the victim is fully supported and dealt with appropriately keeping their vulnerabilities in mind as otherwise it may worsen an already critical situation. It is imperative that the possibility of a victim self-harming be kept in mind especially where this has occurred in the past as such acts may be repeated or worsen during investigations or trial when they relive their ordeal. Measures should be put in place which ensure the adequate safe-keeping of the victim in this regard. Once again we urge that a faith and/or culturally sensitive support network is put in place which may assist in protecting the victim; for example, a Muslim victim prone to self-harming may find it useful to discuss the issue from an Islamic perspective.
21. It must be stated however that the individualities of the victim must remain paramount. Whilst we urge that a faith and/or culturally sensitive support package is made available, it should not be the case that the same support package is provided to all in the same manner. For example, whilst one individual may wish to have their faith matters taken into consideration another may wish to stay away from such topics due to having been abused by a religious leader. Decisions must be based having made proper assessment; and in our opinion proper assessment can only occur should those involved be in a position to understand faith and cultural issues at play. Adequate training of issues affecting BME and/or Muslim victims is therefore imperative in ensuring that a proper support network is made available.
22. With specific regard to paras. 9 – 15 of the Interim Guidelines, whilst we agree with all that has been outlined we however ask once again that the BME context be further considered especially in regards to the issue of honour and shame which is used as a means of manipulation. Para. 13 for example suggests that children and young people may be groomed into a party lifestyle; whilst this may be true in various instances including for BME victims, it is unfair to assume that all such coordinated networks operate in this manner. BME victims may have for example, been restricted by family members to the extent that their time was purely divided between school and home. Such victims would not necessarily be attracted by the party lifestyle merely because they have been kept away from it and in fact may have a fear of such gatherings; instead they are most likely to be lured into spending time alone with an offender such as in parks, or a car, and then in a flat thus entrapping the victim in this manner.
23. This is furthermore the case with regard to the scenario highlighted in para. 15 of the Interim Guidelines as we have come across a number of case studies where the fear of photographs and recordings being published has been exacerbated further by the consequences of this within the BME community such as disownment or being ostracized by the rest of the community due to the stigma attached to sexual activity even where this was non-consensual and criminal.

24. We hope that the above instances have assisted in explaining the need to consider the particularly vulnerabilities and individualities of BME and/or Muslim victims and hope to see this reflected in the Guidelines to be used when prosecuting child sexual abuse cases.
25. Finally we wish to echo the words highlighted in para. 28 of the Interim Guidelines: *“Supporting and engaging with victims should continue after the court process has concluded, regardless of outcome. There may still be risks to the victim that need to be reduced and managed; he or she may still be at risk of further sexual exploitation”*. Our case studies have shown that on many occasions the victims of sexual abuse have either been a victim previously or become a victim once again later on in life. It is imperative that measures are put in place by which support of and engagement with victims can continue so as to ensure that they are not ensnared into the system once more by another offender; prevention should be given as much importance as prosecution.

Question 2:

Is it right that we should focus on the overall credibility of the allegation rather than the victim?

26. We feel that the focus on overall credibility of the allegation rather than the victim is indeed right and appropriate.
27. We fully agree with the points raised within paras. 46 – 54 and wish to reiterate the particular problems faced by BME victims who may be reluctant to provide all or any information due to their fear of dishonouring the family and the consequences which may follow or alternatively due to the specific circumstances relating to their abuse such as threats to the victim or to their family member or due to a hold placed on the victim such as an alleged Islamic marriage or a belief of being in a loving relationship. These aspects can unfortunately hinder evidence-gathering and can consequently place a burden on the victim which may further exacerbate the situation. We hope that this revised focus on overall credibility of the allegation will assist in better prosecution of such cases whilst at the same time easing the process for the victim.
28. Such a focus would only be successful in our opinion however where a collective approach is taken by which credibility of allegations are assessed whilst at the same time the individualities and vulnerabilities of victims are taken into account together with an appropriate support network; this is because irrespective of the shift in approach, the victim will remain central to prosecution and indeed it is for the victim that justice is being sought. Thus whilst understanding that the victim may not identify themselves as one of abuse due to the belief of a genuine and loving relationship, such as stated in para. 49, other factors such as mental health or learning difficulties must also be taken into account. We therefore hope that the shift in focus does not mean that the victim is then overlooked or ignored.
29. It is also important that investigations are approached in a smart manner and by keeping in mind the consequences of certain actions for BME victims. Para. 69 of the Interim Guidelines for example, states: *“The possibility of information coming from house to house enquiries should not be overlooked. Neighbours may well not have seen anything first hand but they could be a useful source of other information about the wider context”*. It is prudent to accept that in some situations the neighbours mentioned may in fact be the very

same members of the community that the victim is in fear of being ostracized by and therefore it is important that the impact on the victim of different methods of enquiry should be considered. Similarly it is also necessary to assess the quality of information that may be utilised; again in the scenario involving neighbours it may be that they are in fact aware of an issue and have information but are withholding it in order to protect the reputation of the victim's family or even the offender's family or the wider community as a whole. Alternatively they may not necessarily have any relevant information but will divulge hearsay information that was derived through the 'grape-vine'; it is not always the case that the community will wish to hide an issue but rather a victim may have become a topic of 'gossip' some of which may be true and some not and in turn this mixture of information could divert attention towards an irrelevant line of enquiry thus wasting time and costs. An example of a scenario in this situation would be where the daughter of a perceived pillar of the community had become a victim of sexual abuse and exploitation; it may be that she has begun truanting from school but in the grapevine it may taken further to state that she had ran away from home.

30. It must also be remembered that the family members of a BME victim of child sexual abuse can be equally affected and this needs to be taken into account where cases involve parents who are willing to assist but are in fear of reprisals from the offender or the wider community. Para. 68 of the Interim Guidelines states that where appropriate parents or carers should be encouraged to involve the police as early as possible; however, this may only occur in BME families where adequate support has been provided. It is not always the case that a family is unwilling to support a prosecution but proper support and assistance needs to be available in order to provide reassurance to families that there will be no further adverse consequences for them for assisting with a case.
31. In terms of other case building issues it may be useful to include computer equipment to the list even for cases where online grooming is not the method used; it may be that a computer has been used for related activities. For example, case studies in research undertaken by MWNUK uncovered that webcams were being used to facilitate victims performing certain acts for clients. Victims may have also kept a diary of their ordeal or some sort of record of their movements and whereabouts at different dates which should also be considered.

Question 3:

While the list of criteria for the suspects is non-exhaustive, have we got the factors right?

32. We consider the CPS to have considered appropriate factors in compiling a list of criteria for suspects and are also grateful to note that this list has been deemed non-exhaustive as it is vital that a flexible yet simultaneously robust approach is taken in assessing the circumstances of a suspect.
33. In this regard we ask that our report "Unheard Voices" be taken into consideration as it includes a discussion of the profile of offenders uncovered as well as a discussion of factors driving sexually abusive behaviour which may assist in assessing and understanding suspect behaviour in cases involving BME victims. An important discovery from our findings for example was the influence of Bollywood films and victims being made to perform dances to popular Bollywood songs to clients and made to dress accordingly. This may be a useful point to consider when gathering further evidence and assessing credibility; it is therefore

imperative to consider wider factors that may be involved when dealing with BME victims of child sexual abuse.

34. Where considering the likelihood of a suspect coming into contact with the victim it is also necessary to consider the lifestyle of not just the suspect or victim but also that of family members and immediate associations. There have been instances where the victim would not have been in contact with the suspect had it not been for separate dealings occurring between the suspect and the victim's brother. For example, the brother may have become involved in drugs use and become embroiled in this regard; the offender may force the victim to settle the debts of her brother and from this point on keep both siblings entrapped in their circle.
35. We would also like to stress an important finding from our report by which it is apparent that perpetrators had no distinct profile in cases involving BME victims, aside from usually sharing the same ethnicity as the victim. Perpetrators varied in age from 15 year old school boys to pensioners aged 60 plus. They included visibly observant men, respected members of the community, men connected to the restaurant and takeaway business, students, British-born men as well as men from abroad, married and single men, taxi drivers and drug dealers. There was also evidence of female involvement often consisting of them assisting the offenders to getting to know the victim, witnessing abuse and even encouraging it. It is therefore apparent that there is no one category that fits all suspects and it is vital that assessment of suspects therefore takes place keeping such considerations in mind.
36. Finally, we would ask that consideration be given to the existence of a wider network that can operate in such abuse. The 15 year old school boy's involvement for example may be consist of the initial stages of befriending the victim and bringing her into contact with a higher level of individuals or his offending may include inflicting sexual abuse himself. On the other hand, his actions may be as a result of abuse himself or alternatively due to bullying or blackmailing. Various models are used to facilitate sexual abuse and this must be borne in mind when investigating suspects and when assessing the overall merits of a case.

Question 4:

Would it be helpful to have an Annex setting out 'myths and stereotypes' surrounding this type of offending? If so, please provide details of 'myths and stereotypes' that would be useful in the circumstances.

37. We believe that it is vital that an Annex is created which sets out the relevant myths and stereotypes surrounding this type of offending. Indeed our report entitled "Unheard Voices" was created as a result of the recognition that certain myths and stereotypes had led to the silencing of BME and/or Muslim victims and we felt it was imperative that this is immediately addressed.
38. The following is a non-exhaustive list of the types of myths and stereotypes surrounding this type of offending which we feel should be included in the Annex:
 - (a) Myth that there are no BME victims of child sexual abuse; our case studies prove otherwise and indicate that there are many more undiscovered victims in the BME community.

- (b) Myth that there are no Muslim victims of child sexual abuse; our case studies again prove otherwise.
 - (c) Stereotypical notion that BME victims of child sexual abuse are limited in numbers because their movements outside the house are limited; in fact abuse can occur within their home perhaps either by a family member or a trusted friend or acquaintance.
 - (d) Myth that offending is motivated by religious or cultural factors and victims targeted accordingly; case studies show that vulnerabilities and accessibility of victims is paramount rather than religious or cultural motivations.
 - (e) Myth that offenders come from a particular race, profession, class or background; our research shows that there is no distinct profile in cases involving BME victims.
 - (f) Stereotype that there are no female offenders in cases involving BME victims of child sexual abuse; case studies prove otherwise.
 - (g) Myth that victims are all from a broken home or all in care; victims have been living at home throughout in a number of instances and are not necessarily from a broken home.
 - (h) Myth that alcohol and drugs use is generally prevalent in cases of abuse; our case studies show that in cases involving BME victims it was the sense of love and stability that placed victims into a state of dependency.
 - (i) Myth that a need for freedom or a need to rebel leads BME children and young people into situations of abuse; whilst this can be an issue in certain cases in others it is the need for love and security which has led to the victim becoming embroiled in such networks.
 - (j) Stereotypical notion that BME and/or Muslim victims who dress in cultural and/or religious attire are not targeted; research has shown that victims are targeted based on their vulnerabilities and accessibilities rather than clothing or appearance itself and in turn victims have included those who wear religious clothing such as the hijab.
 - (k) Myth that BME victims tend to be those who are more “westernised” in their attitude and outlook.
39. We hope that the above will be of use when compiling a list for use in assessing and prosecuting cases. We believe however that this should not be only for consideration by prosecutors but rather for all individuals and organisations that may become involved in such cases.

Question 5:

What more can the CPS do to support the victim and witnesses through the court process?

40. The main issue in such cases where BME and/or Muslim victims are involved is the unfortunate situation that, especially where the victims are female, it is the victim that is

blamed and who has their credibility questioned rather than the offender. Even where the guilt of the offender is apparent, the victim is still faced with accusations of having played a contributing factor to their own ordeal.

41. The situation is further exacerbated by concepts of shame and honour and the stigma associated with sexual abuse; a female victim for example may find that her marriage prospects have diminished as a result of which her family feel the only option is to take her abroad to get married or even to just remove her away from the public eye. On many occasions the family will take away complete support and the victims find themselves disowned, homeless and without any financial assistance. In other instances they may be in direct danger from family members themselves. It is unfortunate that such attitudes are prevalent in BME communities and much needs to occur in order to challenge these issues. For the purposes of the response however, the question to ask is: how will the police, CPS and related bodies give such victims the confidence to be able to report their abuse and pursue prosecution? We have stressed throughout this response that there is a need to ensure the particular vulnerabilities and individualities of BME victims are taken into account. However, in our opinion specific focus and efforts are needed to be able to put support mechanisms in place which will provide reassurance to victims who are already hidden away and unheard.
42. It must also be considered that the victims may have been targeted due to certain vulnerabilities that have themselves gone undiagnosed or hidden away. As a national Muslim women's organisation working with individuals of all race and ethnicities we are very aware of the stigma that is associated with mental health and learning difficulties as well as disabilities generally in BME communities. It is an unfortunate situation whereby victims are not able to access the support they should receive and are instead exploited. This is a relevant consideration as the initial contact with the police or CPS may be the only opportunity available by which a proper assessment of mental capacity as well as mental health and learning difficulties and any other disabilities can be uncovered. BME victims may not necessarily manifest any symptoms immediately as they have spent a substantial period of their life learning to hide their difficulties and appear "normal"; it is vital that those involved in the initial stages remain alert of this possibility. This is not only important in order to allow for any proper treatment required to take place as well as to prevent future exploitation but also to ensure that special measures can be put in place to ease the victim at court and ensure they are not unnecessarily affected by examinations and cross-examinations in court.
43. Similarly, it is necessary that CPS and police liaise with other agencies and organisations so as to be able to provide a secure support package that would protect victims both in the present as well as the future, such as by providing accommodation in a secure environment, appropriate counselling and therapy and assisting victims in gaining life skills and qualifications so as to be able to rebuild their lives.
44. Finally the CPS may wish to consider the impact of media commentary when discussing cases involving sexual abuse. As stated previously, MWNUK decided to undertake research into the hidden BME victims of sexual abuse due to the media attention on female White British victims and Asian and/or Muslim offenders. This may have the consequence of not only hiding BME and/or Muslim victims of child sexual abuse but also adding to a fear of

further reprisals; instead of receiving support the victims would instead be chastised for having brought further negative publicity to the community.

Question 6:

Do you have any further comments on the Interim Guidelines on Prosecuting Cases of Child Sexual Abuse?

45. Overall we consider the Interim Guidelines to have encompassed all the relevant considerations when prosecuting cases of child sexual abuse generally and commend the CPS for taking the initiative to formulate such guidance in order to assist with the prosecution process. It was a very much needed step and results will be positive if followed in the manner specified.
46. We have noted that attempts have been made so as to ensure the Interim Guidelines are inclusive and take account of all factors; we are thankful that when mentioning typical vulnerabilities in children prior to abuse, the risk of honour based violence has been mentioned. We are also pleased to note that consideration has been given to information sharing between agencies and the need to work together in providing support to victims has been given due thought.
47. We reiterate however that the Guidelines should not be considered complete or applicable to all cases without further guidance being made available that is specific to cases involving BME victims of child sexual abuse. Moreover, we ask that as well as creating Guidelines which are inclusive and able to consider the particular vulnerabilities of BME and/or Muslim victims, those involved in investigations and prosecutions are given specialist training which would aid their knowledge and understanding of specific factors to consider and in turn will assist with evidence gathering as well as supporting victims.

Final Word

48. As a point of clarification, given we have on occasions referred to the need to consider the vulnerabilities of Muslim victims or alternatively have provided examples of case studies of Muslim victims when discussing the need for faith sensitive support mechanisms, we must explain that our comments and examples have been limited to BME and/or Muslim victims due to the nature of our organisation and its work. As a national Muslim women's organisation our work predominantly deals with Muslim and BME women albeit we also work with individuals of other faiths and are therefore also aware of issues of relevance to other faith communities. In turn we wish to clarify that where we ask for faith and culturally sensitive support packages and mechanisms we do so on behalf of victims of all race, ethnicity, religion and faith.
49. Similarly, where we refer to case studies or examples relating to female victims or alternatively male offenders we do so as a result of the work that has been undertaken by us. We fully appreciate that boys and young men can become victims of child sexual abuse as well and similarly appreciate that offenders can be both male and female.
50. As a national women's organisation committed to combatting child sexual abuse, Muslim Women's Network UK would like to express its willingness to assist through training,

support, information or advice or any other means in order to ensure that such cases are prosecuted accordingly and preventative measures put in place for the future.

51. We would like to thank the CPS for providing us with the opportunity to respond to the Consultation.
52. We hope that our response proves helpful in compiling an inclusive set of Guidelines by which the individualities and particular vulnerabilities of victims can be taken into account. Such guidelines are a positive step towards making processes easier for victims and allowing justice to prevail.
53. Finally, our report entitled “Unheard Voices: The Sexual Exploitation of Asian Girls and Young Women” will be published and available for circulation on 10th September 2013, a copy of which will be forwarded in due course. We hope that it proves to be helpful.

**On behalf of Muslim Women’s Network UK,
Nazmin Akthar
Vice-Chair**

2nd September 2013

Muslim Women’s Network UK
Arena View
4 Edward Street
Birmingham
B1 2RX
Tel: 0121 236 9000
Email: contact@mw nuk.co.uk