

# **Spiritual, Cultural & Religious Beliefs**

# **Safeguarding Fact Sheet:**

Belief in spirits and possession are widespread. The key feature in cases of abuse is not the beliefs of a family, but that the perpetrator of the abuse uses these beliefs as a justification for the abuse of the child. Practitioners need to have an understanding of religious beliefs and cultural practices in order to gain the trust of the child, family and the community.

#### **Definitions**

The term 'belief in sprit possession' is defined as the belief that an evil force has entered a child and is taking control. Sometimes the term 'witch' is used in the belief that a child is able to use an evil force to harm others.

Families and children can be deeply worried by the evil that they believe is threatening them, and abuse often occurs when an attempt is made to 'exorcise; or 'deliver' the child. Exorcism is defined here as attempting to expel evil spirits from a child.

The abuse can occur in the household where the child lives or in a place of worship where alleged 'diagnosis' and 'exorcism' or 'deliverance' may take place.

# Impact on the child

The impact on the child may take many forms, which come under the general categories of child abuse and maltreatment such as:

- Starvation
- Isolation
- Beatings
- Administrating Substances

Practitioners need to be alert, observe patterns and hear what the child may be reporting.

Some carers and parents believe a child can pass evil spirits to an unborn child, and practitioners will need to be mindful that a pre-birth assessment may be required, and that children subsequently born into the household may be vulnerable to harm.

A Child might come to believe they are possessed and this might be harmful in itself and complicate working with them.

### **Indicators of Risk**

This kind of abuse is not confined to particular countries, cultures, religions or communities. Abusers may appear to be quite ordinary and may be family members, family friends, carers, faith leaders or other figures in the community. There are, however, a number of common factors that put a child at risk from harm:

- Rationalising misfortune by attributing it to spiritual forces
- A child is scapegoated because of an obvious or perceived difference
- A belief in 'evil spirits' commonly accompanied by a belief that the child could 'infect' others with such 'evil'
- Social factors such as changes in family structure or dynamics
- A family's disillusionment with life or negative experience of migration
- A parent or carer's mental ill health including post-traumatic stress disorder or depression

## **Referral and Assessment**

Practitioners should make a referral to Children's Social Care if there are concerns of risks to a child. Whilst being sensitive to cultural or religious beliefs, the focus on the child should never be forgotten. The multiagency response may be a Child in Need meeting or a Strategy Discussion.

The multi-agency assessment of the child's needs should include services from CYPS and where relevant from Adult Mental Health.

Where a child is of school age the education services should be fully involved to ensure support of the child.