



What is safeguarding?

- In Islam, we are taught to protect others from harm and act with compassion and justice.
- Safeguarding means making sure everyone is treated with care and dignity.
- It is part of our amanah (trust) to prevent harm where we can.

Raising Awareness of Abuse in Marginalised Communities

Insights from Pilot Project

healthwatch
Greenwich

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Introduction

Between April and May 2025, Healthwatch Greenwich, in partnership with the Greenwich Adult Safeguarding Board (SAB), delivered a pilot project to raise awareness of abuse and adult safeguarding among community groups in the Royal Borough of Greenwich. This collaborative initiative reflects shared priorities for both Healthwatch Greenwich and the SAB: to strengthen understanding of safeguarding and promote earlier recognition and reporting of abuse, especially within communities that may experience barriers to accessing support.

The pilot aimed to test a new approach to increasing safeguarding awareness, explore how best to engage diverse communities in safeguarding conversations, deepen understanding of how safeguarding messages resonate across different communities, and how SAB can work more effectively with grassroots organisations to protect adults at risk.

The pilot consisted of short awareness-raising sessions delivered to three local community groups:

- A Muslim women's support group,
- A Hindu/Sikh women's yoga group, and
- A mixed group of Black Christian and global majority residents attending a community food bank.

A total of 52 residents, who regularly use these community groups or facilities, came to a session. Reflecting the usual membership of these community groups/facilities, nearly all who came along were women.

Each session lasted up to 30 minutes and included a short 10-minute presentation followed by Q&A and wider group discussion. The approach was informal and conversational, designed to be accessible, respectful, and responsive to the questions and concerns raised.

Community groups/facilities that support or are regularly used by people with shared faith were chosen for the pilot because these settings offer a trusted space where residents feel safe, connected, and understood.

How the Content was Created

Sessions were designed not as generic information briefings but as culturally tailored dialogues. Content was developed with the support of the SAB, which provided an outline of what information should be included. Using this as a starting point, we collaborated with Healthwatch Greenwich volunteers who shared lived experience or cultural background with the communities we planned to engage with. Our volunteers played a central role in shaping the sessions. They reviewed and amended the content, suggested relevant examples, and highlighted areas that required especially sensitive handling.

Key steps in the development process included:

Cultural framing – with the support of our volunteers, safeguarding was framed using concepts familiar to each group, for example, drawing on faith-based principles of justice, family responsibility, and care. This approach helped make safeguarding feel like an extension of existing community values rather than an external imposition or paternalistic officialdom.

Language – materials were translated where possible ¹ and made appropriate for each group. One session was wholly delivered in a community language, as we were advised that many of the older women who would be attending felt more comfortable conversing in their first language.

Addressing difficult scenarios – the sessions acknowledged that abuse can occur in all communities, but particular community challenges were addressed openly and without judgment, such as concerns about community reputation or “what people will say” that prevent the reporting of abuse. The sessions created space for people to reflect on this without blame and encouraged thinking about safety over silence. Our volunteers helped us to make sure that messaging didn’t reinforce stereotypes, while still making space for open discussion.

¹ An interpreter was not available for one session as specific language needs were not communicated in advance, indicating that a longer lead-in time is required for more effective planning.

Findings

Shared Themes Across Communities

- Safeguarding was often an unfamiliar term, and many equated 'abuse' with only physical or sexual violence. The broader spectrum, including emotional and financial abuse and coercive control, was not widely understood.
- Residents raised worries about community gossip and the risk of social exclusion if concern about abuse was reported.
- There was a distrust of statutory services, in particular social services and the police, and fear that authorities would act harshly, or that victims would lose control of the process.

All sessions were limited by time and would have benefited from a longer or multi-session format. While the short presentations successfully introduced key safeguarding messages and opened discussion, the short timeframe (up to 30 minutes) meant that more complex or nuanced questions could not always be addressed in full.

Group-specific Insights

Muslim Women's Group



- Faith-based framing was powerful. Referencing Islamic teachings on protection, justice, and family wellbeing helped demystify safeguarding and made it feel morally and religiously aligned.
- Women appreciated the safe space to ask questions about what is permissible or problematic within marriage. Discussions explored coercion and power dynamics in extended families.
- Some said it gave language to things they had heard about or witnessed but hadn't had the vocabulary or confidence to name.
- Women wanted to talk about child as well as adult safeguarding.
- There was evident relief in learning that anonymous reporting and support services exist. Despite this, women shared fears of dishonour or public shame deterring them from speaking out.

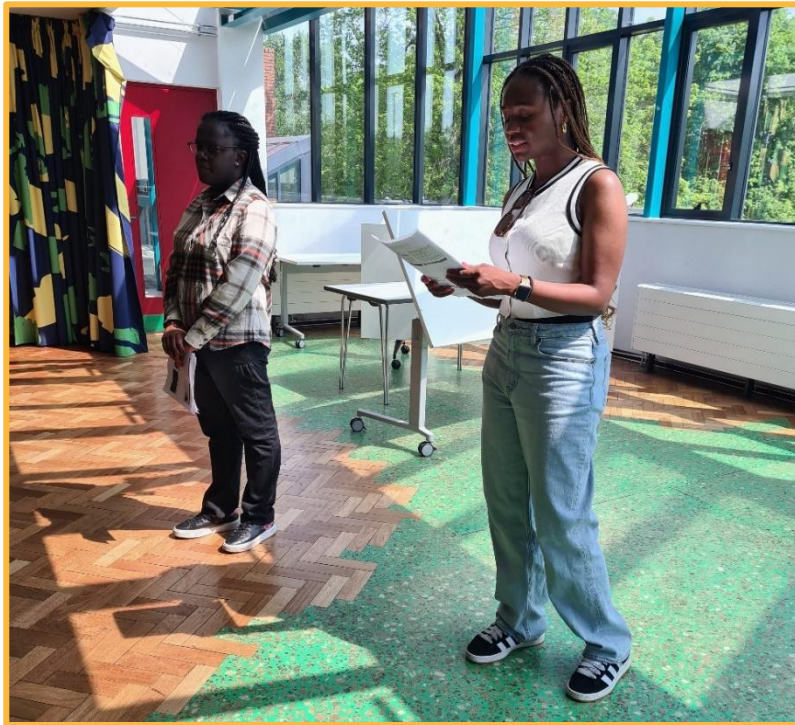
Hindu and Sikh Women's Yoga Group



- Delivering the session in Hindi allowed women to grasp the meaning of terms like abuse and safeguarding, without struggling to translate concepts in their heads, allowing for more fluent discussions.
- Many women equated safeguarding with child protection only, and the session widened understanding of adult safeguarding, particularly elder abuse.

- Women shared reflections on duty, family honour, and the difficulty of challenging hierarchical family systems.
- The fear of speaking out was strongly felt, particularly where adult children or respected in-laws were involved.

Black Christian/ Global Majority Group



- Mistrust of services ran deep. Residents expressed concerns about racial discrimination and being misunderstood, often based on previous experiences.
- Residents wanted to discuss child as well as adult safeguarding.
- Worries emerged about being able to report concerns in other languages, and disbelief (often based on previous experience) in the likelihood of services getting an interpreter to assist them.

Key Takeaways for Future Work

- Facilitators with cultural fluency, whether through faith, language, or lived experience, are essential to fostering trust and encouraging discussion. Raising awareness of abuse and safeguarding in a culturally sensitive way isn't about assuming that everyone from the same background thinks or behaves the same way – it's about recognising that culture, upbringing, and shared experiences can shape how people understand abuse, and how comfortable they feel asking for help or speaking out.
- Sessions must counter myths that discourage help-seeking, such as fears of automatic removal of children, or the idea that one call will 'ruin' a family.
- Ongoing relationships with community groups, rather than one-off sessions, are important to building trust and increasing safeguarding awareness at a grassroots level.

Next Steps

Healthwatch Greenwich will continue to work in partnership with the Greenwich Safeguarding Adult Board (SAB) and local community groups to further develop and expand this approach. The pilot has demonstrated the value of community-based, culturally sensitive safeguarding sessions and highlighted the importance of trusted relationships in creating safe spaces for discussion.

We aim to extend this work to reach a wider range of community groups across the borough, particularly those supporting residents who may face barriers in accessing safeguarding information through mainstream channels. We plan to explore a multi-session model that allows more time for residents to reflect, revisit difficult topics, and ask follow-up questions. This will support deeper understanding and help strengthen safeguarding awareness over time.

We will share our learning with health, care, and voluntary sector partners to inform more inclusive safeguarding communication strategies and community engagement efforts. Ultimately, we hope to embed this approach into wider safeguarding practice in Greenwich, helping to shape policy and service delivery in ways that reflect the needs and voices of all communities.

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