

Cleveland Victim Needs Assessment

The Centre for Public Innovation

The Centre for Public Innovation is a Community Interest Company that provides research, training, support and advice in the fields of health, social care, criminal justice and community development.

Our mission is to improve the outcomes of services for their users, with a particular emphasis on the most disadvantaged.

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# Glossary

|  |  |
| --- | --- |
| AFR | Action Fraud Referral |
| ASB | Anti-social behaviour |
| BAME | Black and Minority Ethnic |
| CAMHS | Child and Adolescent Mental Health Service |
| CICS | Criminal Injuries Compensation Scheme |
| CPS | Crown Prosecution Service |
| CSEW | Crime Survey of England and Wales |
| DBS | Disclosure and Barring Service |
| IAPT | Improving Access to Psychological Therapies |
| IDVA | Independent Sexual Violence Adviser |
| ISVA | Independent Domestic Violence Adviser |
| LGBTQ+ | Lesbian, Gay, Bisexual, Transgender and Queer |
| LVWS | London Victim and Witness Service |
| MARAC | Multi Agency Risk Assessment Conferences |
| MOPAC | Mayor’s Office for Policing and Crime |
| ONS | Office for National Statistics |
| PCC | Police and Crime Commissioner |
| PCR | Police Control Room |
| PCSO | Police Community Support Officer |
| SARC | Sexual Assault Referral Centre |
| VCAS | Victim Care and Advice Service |
| VCO | Victim Care Officers |
| VFN | Victim First Northumbria |

# Executive summary

## 1.1 Context

Since 2016, the PCC for Cleveland has commissioned the Victim Care and Advice Service (VCAS) to provide support to victims of crime and anti-social behaviour (excluding domestic abuse and sexual violence) across the area. The current service comes to an end on 31 March 2022. In order to inform the development of a service specification from 1 April 2022 onwards, the PCC commissioned an assessment of need and demand for victims’ services to establish an independent assessment of current level of delivery to victims and understanding local need. The needs assessment will inform both the specification for services as well as planning for the future more widely.

## 1.2 Key findings

This needs assessment identifies a number of key findings and conclusions which are set out thematically below.

### 1.2.1 Extent of support provided

A key finding of this report is the extent of victim coverage – that is, how many victims of crime are supported by services currently. Data analysed for this needs assessment indicates that, in any given year, an average of 1.2% of victims of crime are supported by victim services.

Recognising that not all victims of crime will want support, and that victims of some crimes (domestic abuse and sexual assault) will be supported by a range of specialist services, it is nonetheless clear that there is significant unmet demand for support.

The key reason for this level of provision would appear to be the capacity of current provision. Recognising that additional capacity has been added over the life of the contract VCAS (the main provider) operates with six case workers and is therefore inherently limited in what it can offer.

### 1.2.2 What victims want

Data from both a survey of residents and interviews with community organisations indicates that people want personalised victim services that are tailored to the needs of the individuals and which offer a blended package of emotional and practical support. The results are striking insofar as this aligns with the service as provided by VCAS as well as the various providers of domestic abuse services. Moreover this style of support (holistic blended offer) corresponds with the examples of best practice as identified.

### 1.2.3 Structure of offer

From a comparison with best practice models elsewhere around the country, the current structure of service provision (a central hub managing referrals and offering casework with onward referrals into a range of specialist services) aligns with what is currently considered to be best practice. It can therefore be concluded that victim services are currently structured in the right way.

### 1.2.4 Knowledge of victim services

It is very clear that knowledge of victim services are very low. Three quarters of respondents to a resident survey disagreed with the statement that ‘VCAS is well promoted across Cleveland’. Knowledge of VCAS was also mixed across the range of community organisations who were consulted. As such it would appear that a key barrier to accessing the service is simply knowledge of its existence and availability.

### 1.2.5 Barriers to accessing victim services

40% of respondents to the residents survey indicated that they would *not* seek help if they were the victim of crime. This is necesssarily a significant impediment to people utilising victim services locally. A related barrier to accessing victim service are perceptions of the police and criminal justice agencies. 30% of respondents to the resident survey indicated previous negative experiences with police. Community stakeholders reported reticence among the groups that they represent to engage with the police.

### 1.2.6 Under-represented groups

The data (both qualitative and quantitative) makes clear that there are a number of groups are under-represented among users of victim services:

* Young people
* Men
* BAME communities
* LGBTQ+ community

### 1.2.7 Domestic abuse

There is a consensus among stakeholders that domestic abuse and sexual assault services should remain a distinct offer from the wider victim offer. Simply put, there is no appetite locally from any practitioner or stakeholder that domestic abuse provision is absorbed into VCAS. It can therefore be concluded that the current approach of separate commissioning of victim services from domestic abuse and sexual assault services should be continued.

### 1.2.8 Crime types

The victims of a number of crime types appear to be under-served in terms of the number of victims being supported. Key under-represented groups are victims of:

* Hate crime
* Cyber crime

### 1.2.9 Gaps

While it would appear that the current mixed offer of emotional and practical support both meets the expectations of the community and the needs of victims, it would appear that there is scope to offer more low level mental health and counselling support to victims of crime to support their recovery.

## 1.3 Recommendations

Following on from thekey findings and conclusions set out above a number of recommendations have been made which are set out below:

### 1.3.1 PCC

1. Should the PCC wish for a greater proportion of victims of crime (above the current 1%) to be supported in Cleveland then it is highly likely that greater levels of investment need to be made in the provision of victim services. While it is not in the scope of this report to determine what the level of investment should look like, we note that all the examples of best practice that have been set out involve staffing structures far in excess of the number of staff currently employed by the current provider.
2. A number of specialist victim champions posts should be created each of whom should have a specific focus on a given community. Consideration should be given to victim champions for: BAME communities, children and young people and the LGBTQ+ community. It will be the responsibility of the champion to: liaise with groups working with this community, help market victim services to this group, provide casework and support to members of this group and provide advice for colleagues who might be working with an individual from this community.
3. Consideration should also be given to a designated domestic abuse champion. While domestic abuse provision should be kept separate (see below), a designated domestic abuse champion within the wider victim service can act as a point of liaison with domestic abuse services as well as helping to support wider needs of the victim.
4. Current domestic abuse and sexual assault commissioning arrangments should be kept in place – that is, offering a dedicated general victim service and separate specialist services for victims of domestic abuse and sexual assault rather than integrating these services into a single provider.
5. Consideration should be given to partnership arrangements between victim services and local third sector organisations using the Community Points model (see 8.3.2). This would involve training and quality assuring local organisations to provide a degree of support for victims of crime as well as signposting into victim and other services.
6. The PCC should commission an online offer for victims of crime. This should have two functions:

* Providing a ’self-service’ model for victims of crime who are experiencing low to moderate impact after crime, giving them tools and information they need to manage
* Providing a means by which they can access victim services and specialist support services (such as domestic abuse and sexual assault services)

1. The PCC should explore commissioning counselling and low level mental health interventions for victims of crime. Rather than using this commissioning to capacity build current mainstream mental health provision consideration should be given to ring-fencing this additional provision so that it is solely for use by victims of crime.
2. The current provision should make greater use of national victim resources in order to free up capaciity within the service. This should include referring victims of road traffic accidents to Brake and victims of cyber crime to Action Fraud.

Whilst the focus of this report is providing recommendations to Cleveland PCC, we feel that the following recommendations may be of interest to wider partners:

### 1.3.2 Cleveland Police

1. Cleveland Police should review the way in which it makes referals to local domestic abuse services. Specifically, the police should consider the feasibility of using the referral forms as developed and used by the domestic abuse services rather than internal police documents as is currently the case.
2. Cleveland Police should develop a safe reporting pathway for migrant victims of crime. This should link victims into local victim services and make clear to officers that the default position is (unless there are specific considerations) that information will not be shared with Immigration Enforcement. Information regarding this pathway should be shared widely with local third sector organisations working with migrant communities and particularly those working with refugees and asylum seekers.

Note that a number of recommendations have been made under the separate VCAS Evaluation report. These recommendations should be read in conjunction with those set out in this report to give a full sense of the scope of changes that have been suggested. The following recommendations build on those in the evaluation report:

1. In addition to the wider promotional work, a separate and specific hate crime awareness campaign should be undertaken. This should raise awareness of hate crime, how it manifests and provide information on how to report hate crime. Moreover the options for reporting hate crime should include options that do not require approaching the police.

In addition to the wider promotional work, specific messages should be developed that highlight that it is safe to approach services to seek help as the victim of crime and that anyone who is a victim is entitled to support. Messaging should stress the independence of victim services from police and criminal justice agencies.

# Context

#### Needs Assessment

Since 2016 the Police and Crime Commissioner for Cleveland has commissioned the Victim and Care Service (hereafter VCAS) to provide support for victims of crime[[1]](#footnote-1) and anti-social behaviour.

The needs assessment seeks to address a number of separate research questions including:

* Level, type and profile of victims
* An understanding of who victims are
* An understanding of whether certain groups are not accessing support
* Gaps in current provision

# Methodology

## 3.1 Quantitative

#### Data analysis

Data analysis compared the expected likelihood of being a victim as derived from the 2019-2020 Crime Survey for England and Wales (CSEW) with actual numbers reported to Cleveland Police; the numbers and characteristics recorded by Cleveland Police were then compared to people engaged with VCAS. An exploratory analysis was undertaken examining any factors (deprivation, substance misuse, health, population measures) that may be associated that explain the difference in victimisation levels across the four boroughs of Cleveland.

This section seeks to understand the ”demand” for victim services – that is, understanding total levels of crime that occur in the Cleveland Police force area, the volume of crime that is reported to the police and the volume of crime that is supported by victim services.

The first section examines the expected demand as derived from the Crime Survey of England and Wales (CSEW). This survey is a national (England and Wales) household survey of victimisation that asks questions as to whether a person has been a victim of crime (alongside other topics such as substance use). A person may be a victim of crime and not engage with police or other ancillary services. This figure provides an estimate of the likely prevalence for victim services.

Following on from an understanding of total lvels of crime, the next section compares the prevalence estimate to police recorded information on victims: put another way, an examination of how many of the estimated victims as derived from the CSEW are known to the police. This section also compares the characteristics of the two groups – the age, gender and ethnic profiles of victims estimated to have a need across Cleveland and the profiles of victims as reported to the police.

The next component examines the difference between the number and characteristics of victims reported to Cleveland Police with data derived from VCAS.

A final component models factors associated with differential levels of victimisation as recorded by Cleveland Police across the four boroughs: Hartlepool, Middlesbrough, Redcar and Cleveland and Stockton-on-Tees.

#### Resident Survey

A Resident Survey was launched by the Police and Crime Commissioner on 16 June, following a ‘soft’ launch of the research programme in March. The questionnaire is replicated Appendix 1. The deadline for responses 25 June 2021 leading to 357 responses from residents across the sub-region.

To encourage residents to complete the questionnaire all completed surveys have been entered into a prize draw for a £100 gift card, and the survey was kept short in length (seven core questions). The questionnaire was split into two main sections:

* Section 1: Seeking help (four questions) - if a resident was a victim of crime or anti-social behaviour (ASB) where would they seek help, and how aware are they of the Victim Care and Advice Service (VCAS) service?
* Section 2: Quality of life impacts of crime, type of victim service preferences, and experience of VCAS (3 questions)

## 3.2 Qualitative

### Community organisations

#### Professional stakeholder consultation

30 professional stakeholders representing a range of key agencies and organisations operating in part or across the Cleveland Police force area were interviewed. Stakeholders interviewed were:

* David Mead, VCAS Service Manager
* CI Christopher Barker, Cleveland Police
* Lottie Dixon, Victim Care Officer VCAS
* Karen Storey, Victim Care Officer VCAS
* Helen Oldroyd, Victim Care Victim Care Officer VCAS
* Joanne Hodgkinson, CEO Safer Communities
* Nicky Harkin, CEO Arch
* Becky Clark, Restorative Justice Cleveland
* Phil Greaves, Senior Youth Justice Officer Hartlepool BC
* DCI Jayne Downes, Cleveland Police
* Sue Mathews, Restorative Justice South Tees
* Sergeant Bryan Marsay, Cleveland Police
* Caren Barnfather, Business Manager Harbour
* Penny Edgar, Probation Victim Liaison Officer
* Kelly Close, Cleveland Police
* DC Rachael Graham, Cleveland Police
* Gerry McBride, Crime Prevention Officer Cleveland Police
* Richinda Taylor, CEO Eva
* DC Marie Appleby, Cleveland Police
* Andy Proudman 13 Housing Group
* Tanya Evans, YOT Team Manager Stockton on Tees
* Emma Geldhart, Business Manager Foundation
* PC Rachel Goodhall, Cleveland Police
* Lesley Storey, My Sisters Place
* Jamie Blythe, Brake
* Nicolas Stone, Neighbourhood Safety Team Leader Hartlepool BC
* Marc Stephenson Community Protection & Resilience Manager Stockton BC
* Marion Walker, Head of Strategic Commissioning Middlesbrough BC
* Jay Hosie, Service Lead Community Safety Redcar & Cleveland BC
* Inspector Fay Cole, Cleveland Police

#### Community consultation

Organisations and charities working with under-represented communities and groups of interest were invited to provide their views on the victim support services in Cleveland, whether there are any gaps in the current service provision, and potential barriers to victim engagement. The aim was to give a better understanding of the support needs of victims and people affected by crime and to understand where efforts should be directed to better meet the needs of victims.

In-depth telephone or online interviews were undertaken with thirteen stakeholders from community organisations in May and June 2021. The organisations consulted include:

* A Way Out
* Age UK
* Barnardos
* Breckon Hill Community Centre
* Essential Learning Curve
* Halo
* Hart Gables
* Hartlepool Chinese Association
* Hartlepool Deaf Centre
* Methodist Asylum Project
* NUR Fitness
* Terrence Higgins Trust
* The Regional Refugee Forum

# Current services

This section sets out a brief overview of current victim service provision across the Cleveland PCC area.

## 4.1 Victim Care and Advice Service (VCAS)

The key service for victim that is operated in the area is the Victim Care & Advice Service (VCAS) which is operated by Safer Communities. The charity also provides other supportive community services in the same geographical area. The VCAS service is commissioned by the Cleveland PCC to provide victim support services across the Cleveland Police Force areas.

VCAS will support victims of all crimes, with a number of key exceptions:

* the immediate family of homicide victims,
* domestic abuse and
* serious sexual assault and violence.

VCAS will provide support to witnesses to homicide and family members who have lost someone under suspicious circumstances. The current service model commenced on 1April 2016.

Cases can be identified at any point of the criminal justice pathway and support provided may encompass the whole victim pathway or just one aspect.

There may be occasions when VCAS come into contact with a victim of one of the excluded types of victims (as listed above). In this situation VCAS may operate some degree of “hand holding”, but the cases are swiftly referred on to appropriate services through the police and established pathways. There is no duplication of services in these areas. VCAS may be requested to contact a victim for another reason and may find that a domestic abuse issue comes to light. They would then advise and support referral to a domestic abuse charity provider and will continue to check that contact has been made. They may well also continue to support the victim for any non- domestic violence issues.

### 4.1.1 Operation of the service

Within Cleveland there are six full time Victim Care Officers (VCO) who work closely with the police alongside specialist teams (e.g. Neighbourhood Teams). They work Monday – Friday 9am – 5pm. Each are allocated to individual boroughs. One of the VCOs also acts a Team Leader for the other VCOs. The VCOs manage their own caseload and have supervision meetings quarterly with the Team Leader. There is a full time manager for the service who is responsible for the overall service, but does not carry an individual caseload. The office is also supported by a full time administrative support.

A recently introduced pilot has resulted in two additional VCAS staff members being located within the police control room. Cover is provided over the seven day period 9am – 5pm.

The core hours of the service are 9am – 5pm, but the service is at times flexible dependent on need and has operated between 8am – 8pm and on occasions over the weekend with managerial approval.

The VCOs are community based and have access to hot desks in local police stations and have an average caseload of 30 victims relating to crime and victim support at any one time. Caseloads have increased recently with an average of 40 per each VCOs.

### 4.1.2 Referral process

#### 4.1.2.1 Referral pathways

Referrals come from a variety of police sources. All those victims identified by the Police as having a vulnerability that could require VCAS input are identified on the Police IT system, Niche. Also, all police staff within the control room have been made aware of the services provided by VCAS and flag those victims classed as having vulnerabilities. They work on the basis that the victim will be referred to VCAS unless they opt out.

There is not a uniform referral form used for VCAS by all referrers. Referrals are sourced using a number of differing means. This can be through a review of the Police IT system, Niche, by telephone, by email or self-referrals.

The VCOs have been trained to use the police IT systems. The VCOs are peripatetic and attend a police station on a daily basis where they review crimes reported on the police IT system and identify if a victim of that crime has requested support or contact. This is flagged on the Niche system. They will also pick up the victims that have been flagged as requiring contact by the police and VCAS staff based in the Police Control Room. The VCOs will take into account the Ministry of Justice categories of need and crime type to assess the victims’ needs (e.g. mental health, physical health, children and young adults, accommodation, finance and benefits, outlook and attitude) and will then make contact with all victims identified whether they have requested VCAs support or not. For example, all victims of serious violence, house burglary or hate crime would be contacted. Each VCOs have also been formally aligned with police sergeants in each team (e.g. neighbourhood teams) to raise awareness of VCAS services and encourage joint working. Referrals to VCAS have risen since this alignment was implemented.

Any Police officers can also make direct referrals to VCAS. Types of crimes include witnesses to homicide, bereaved relatives following suspicious deaths or fatal road traffic accidents, where Family Liaison Officers are deployed, fraud, anti-social behaviour, and neighbourhood incidents. Referrals can come from various parts of the police force and VCAS have been working closely with the police to raise awareness of their services. These areas include neighbourhood Teams, Victim Liaison Officers, specialist units specialising in fraud and cyber-crime and the CID, for example.

VCAS also receive referrals directly from third party and community organisations such as local authorities, local charities and registered social landlords. Such referrals could include incidents of antisocial behaviour and neighbourhood noise disputes. Again, these referrals are not made on a standardised referral form but can be made by email or telephone.

Victims can self-refer into VCAS and the service has attempted to raise awareness of services in a wide range of agencies such as hospitals, GP practices & social care agencies.

Referrals are entered onto the VCAS case management system detailing the calls made to the victim, and such information as to who made the referral and what was the crime type. These processes do lead to the creation of three copies of the case management: lists hosted by the VCAS office, the operational list held by the VCOs and the list held in the Police Control Room. If the Control Room pilot is to continue then the issue of duplication of list will need to be addressed.

#### 4.1.2.2 New referral initiatives

As part of a pilot initiative an additional two members of VCAS staff are based in the police control room giving the police immediate access to a VCAS member of staff as incidents are recorded. This allows for even more rapid access to support for victims, allowing swifter action and referral onto other support agencies and services if needed. This has already resulted in a large increase in VCAS referrals and is now the source of the largest number of police referrals. Cases can be identified and transferred to VCAS immediately.

### 4.1.3 Services provided

VCAS offers emotional and practical support services to victims themselves, their family members, witnesses to the offence or anyone who feels vulnerable as a result of crime or fear of crime. Support is provided regardless of whether the victim wishes to report the incident to the police and support is provided for however long as necessary to support the victim through their journey. This may include all parts of the victim’s journey or one or several parts of that process and could include liaison with the Victim Care Unit, Witness Services, the courts, the police and Restorative Justice.

Each package of support is bespoke for the individual victim’s needs and could include emotional and practical support at the point of reporting, subsequent court hearings through to the release of the perpetrator from prison. There is no time limit on the length of support although the ending of the package of support is discussed and agreed between the victim and VCAS. Victims are able to contact VCAS after the completion of their package of support if they have further concerns or feel vulnerable again. There are a large number of repeat victims and these are seen as high risk by the police and VCAS.

VCAS provide a mixture of emotional and physical practicable support and works in conjunction with partner agencies, the third sector and will make onward referral to another agency should that be required.

Support is delivered on a face to face basis with an initial visit used to create a VCAS Victims Needs Assessment which looks at the vulnerabilities as a result of mental or physical health, housing needs, drugs or alcohol, employment or education, financial hardship and general outlook. Once an Assessment has taken place the VCO and the client create a recovery plan identifying the actions and strategies which are to be employed to reduce the victim’s issues. The plan will be regularly mutually reviewed to assess progress with the aim to empower the victim rather than creating reliance.

VCAS also offer a number of additional services that have been developed in response to the needs of victims. These include:

* Crime Prevention surveys and the provision of crime prevention equipment such as door and window alarms, dummy CCTV camera and dusk to dawn security lighting. Many of these are responses to crime, fear of crime and working with RSLs.
* Fraud awareness sessions. VCAS work with Action Fraud and VCAS staff members have been trained by the National Trading Standards Team to deliver Friends Against Scams sessions providing fraud awareness and prevention advice. The sessions are provided to groups of victims, faith groups, disability groups and elderly victims groups. Fraud Awareness sessions are also delivered during student police officer and PCSO initial training courses. VCAS runs drop in sessions with Barclays Bank on fraud prevention.
* Telephone Call Blocker. VCAS can provide call blockers to vulnerable victims of fraud for an initial three month period and the blocked calls are monitored by VCAS volunteers. On average 2,800 calls a month are stopped / blocked.
* Anti-social Behaviour drop in sessions. A number of drop in sessions have been held in areas of high ASB. These often run in conjunction with Cleveland Police, local authorities and youth outreach services.
* Over the contract various drop in sessions have been run in such settings as libraries and community facilities often run with partner agencies.
* Dementia Friends sessions. VCAS run a number of sessions to partner agencies.

## 4.2 Domestic Abuse Services

Three domestic violence charities operate across the Cleveland PCC area. Each of these is explored below.

### 4.2.1 My Sisters Place: Middlesbrough

My Sisters Place is an independent specialist ‘one stop shop’ for women aged 16 or over who have experienced or are experiencing domestic violence. The service includes community services and refuge provision in Middlesbrough. Services are provided for both female and male victims of domestic abuse.

The majority of referrals are received from the police. The second largest numbers of referrals are self- referrals.

The services offered include:

* IDVA
* Support for those wishing to stay at home
* Economic support through Covid
* Therapeutic counselling
* Therapeutic service for children & young people
* Training for GPs
* Refuge services

They operate a no waiting list policy and try and manage demand by flexible use of resources. There are no defined time limits to the length of support that is provided and victims stay in the service for as long as necessary.

Covid did not see a large rise in the number of referrals, but there has been an increase in the level of need and complexity. They wish to develop services to include more support for the LGBT community, chaotic women, mental health overlap and BAME women if resources and adequate capacity were available.

### 4.2.2 Harbour: Hartlepool & Stockton-On-Tees

Harbour refuges are available in Hartlepool, Middlesbrough and Stockton-On-Tees.

IDVA support is funded by the PCC who also provided additional funding during Covid.

Harbour operate a seven day service, with call out service. Services are provided to both female and male victims of domestic abuse with the exception of refuge provision which is female only.

The largest number of referrals are received from the police, followed by self-referrals.

Community services are provided which encompass advice and guidance, including support if the victim wishes to stay in their own home. Focus and liaison with other support services are provided dependent on the individual victim’s needs.

Harbour noted that they saw a 25% increase in referrals last year, which was in part caused by Covid. They noted that there is insufficient capacity within the system and that this lack of capacity is historic and already existed pre-Covid.

### 4.2.3 Foundation: Redcar & Cleveland

Foundation provides services to the Redcar & Cleveland areas. Foundation’s services include:

**IDVA**

This works on an outreach basis with clients at highest risk of harm, from the point of crisis to the longer term goal of safety from further harm. The service works with all agencies and has specialist knowledge of the civil and criminal court processes.

**Navigator**

The Navigator is an 18 month pilot and that offers intensive support on an outreach basis to both male and female victims of domestic abuse who have complex needs. The service can work with victims both long and short-term depending on the needs of the client.

**Sanctuary**

This provides support to victims of domestic abuse who want to remain in their own home and feel safe. In partnership with the Crime Reduction Officer, security measures/work are carried out in clients’ homes, this enables clients to continue to live independently.

Foundation also provides therapeutic support for children and young people, counselling and a flexible response for male victims of domestic abuse.

The PCC funds the IDVA service and the local authority funds refuge services.

Referral rates to the service were described as being high and that they manage to cope without introducing waiting lists as they manage resources and have had additional time limited by Ministry of Justice funding.

### 4.2.4 Halo

The Halo Project supports BME women and families at risk of harm of abuse with a specific focus on work around honour based violence, forced marriage and female genital mutilation. Halo seeks to promote the rights of women through empowerment, education and specialist intervention programmes including providing BME specialist accommodation and recovery programmes to enhance safety and protection offering trauma-informed programmes.

The Halo Project provide training to organisations’ support staff so that they have an understanding of cultural issues around honour based violence, forced marriage and female genital mutilation in order to be able to deal with cases effectively. They also look to educate the community about honour based violence to change attitudes with the aim to put a stop to this abuse. Their outreach programmes work with schools and other safeguarding agencies, including social services and the police.

## 4.3 Sexual Assault Services

### 4.3.1 SARC Teesside

Teesside SARC is located in Middlesbrough and provides medical, practical and emotional support to anyone who has been sexually assaulted, sexually abused or raped in Cleveland. The service is commissioned by NHS England and the Police and Crime Commissioner in Cleveland. They have specially trained paediatricians/Forensic Nurse Examiners and support workers in post. The SARC provides 24 hour crisis intervention and support 365 days a year with dedicated specially trained staff. The SARC will offer support regardless of whether or not the events have been reported to the police. If the victim decides to report the events to the police the SARC will also be able to offer support during this process.

### 4.3.2 Arch

Arch are a specialist sexual violence clinic/ISVA service operating in Middlesbrough and Cleveland. Most referrals are from the SARC. Support provided can be long-term and the length of time will be determined by the victim’s needs. They also provide a service to children and young people. Funding is received from the PCC.

Other services (not funded by PCC) include counselling, pre-trial therapy, Life Enhancement Skills Advisors.

### 4.3.3 Eva

Eva provides counselling services regarding sexual violence and domestic abuse for females and wrap around services for adults and children of both sexes. Some local authority funding is provided for refuge services, but only for up to 12 weeks.

Referrals come from many sources and there are capacity issues resulting in waiting lists being in place.

## 4.4 Restorative Justice

Restorative Justice is well embedded across the Cleveland PCC area. The majority of referrals come from within the criminal justice system, but can also come from elsewhere such as local authorities, mental health and Registered Social Landlord (RSL). Most referrals are from the police and the courts.

Each case is dealt with according to individual needs and each restorative justice service is based on local geographical bases. The process involved include:

* Referral to the service
* Undertaking risk assessments
* Obtaining relevant consents
* Arranging meetings
* Raising awareness / plans involving other agencies
* Key contacts arranged with other agencies

There are no waiting lists and pathways seem effective.

Restorative Justice is actively promoted to adult victims of crime as well as children and young people aged ten to 18 years of age.

It was noted that the main caseloads are predominantly made up of those of White British origin which raises the question of underrepresentation amongst other groups.

## 4.5 Local Authority Provision

There are distinct and, in some cases extensive, support mechanisms put in place by each of the local authorities that make up the Cleveland PCC area.

Each borough council has developed its own strategic approach to tackling crime and thereby impacting also on victim support and services.

Each borough reported greater and better joint working. Good practice includes the provision of a wide multi-disciplinary community safety team being co-located in the main Hartlepool police station. This includes VCAS who have a good relationship with other services. Middlesbrough also reported having co-located cross-agency teams. Although the staff members have various employers the overall team is operationally managed by a Chief Inspector. This has great benefits in terms of joint working as well as facilitating targeting resources on particular themes or crime hotspots and issues.

Local authority inputs to support residents who have been the victim of crime includes posts such as Community Safety Officers, Early Intervention Co-ordinators, use of Safer Streets funding, Community wardens, and Neighbourhood Safety Officers. Quite often victim support is incorporated as part of other community safety/enforcement roles.

## 4.6 Probation

The provision of Victim Liaison services is only offered for those who are affected where the sentence awarded is greater than 12 months. Those victims affected by crimes that attract a shorter sentence do not qualify for support for the service. Consequently the service is driven by the length of sentence rather than the crime type and victims’ needs. Most referrals are from the police as well as the Witness Care Unit.

It was noted that this focus on sentence length gives rise to anomalies: for example it was noted that this has the effect that many victims of domestic abuse are not covered, common assault is not covered, but actual bodily harm is and only aggravated burglary is covered, but not burglary.

The service works closely with VCAS and local domestic abuse charities (see above). They update victims and explain their rights, including developing personal statements. They stay in contact with the victim until end of sentence or perpetrator dies, which results in a high caseload.

# 5. Prevalence of need

This section seeks to understand the ”demand” for victim services – that is, understanding total levels of crime that occur in the Cleveland Police force area, the volume of crime that is reported to the police and the volume of crime that is supported by victim services.

The first section examines the expected demand as derived from the Crime Survey of England and Wales (CSEW). This survey is a national (England and Wales) household survey of victimisation that asks questions as to whether a person has been a victim of crime (alongside other topics such as substance use). A person may be a victim of crime and not engage with police or other ancillary services. This figure provides an estimate of the likely prevalence for victim services.

Following on from an understanding of total lvels of crime, the next section compares the prevalence estimate to police recorded information on victims: put another way, an examination of how many of the estimated victims as derived from the CSEW are known to the police. This section also compares the characteristics of the two groups – the age, gender and ethnic profiles of victims estimated to have a need across Cleveland and the profiles of victims as reported to the police.

The next component examines the difference between the number and characteristics of victims reported to Cleveland Police with data derived from VCAS.

A final component models factors associated with differential levels of victimisation as recorded by Cleveland Police across the four boroughs: Hartlepool, Middlesbrough, Redcar and Cleveland and Stockton-on-Tees.

## 5.1 Estimated prevalence of crime in the area

This section looks at data from the CSEW and compares this data from Cleveland Police records of victims. From this it derives a picture of the total level of crime occurring in Cleveland and compares this to how many victims of crime go on to report the incident to the police.

### 5.1.1. Overall levels of crime (2019-2020)

Overall, the CSEW estimates that 13.3% of the Cleveland population were a victim of crime in the financial year 2019-2020.

#### 5.1.1.1 Total levels of crime and reporting

The level of likely demand (in terms of numbers of people) is shown in Table 1 across the four local authorities. This is compared to the level of victims recorded by Cleveland Police.

Table 1 Estimated overall likely demand, the proportion of victims estimated from the CSEW 2019-2020 compared to the recorded victims to Cleveland Police (numbers) by local authority

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Personal characteristic** | **All CSEW crime (excluding fraud and computer misuse)** | **Estimated Numbers derived from CSEW** | | | | **Police Victims Data 2019-2020 (using CSEW definitions)** | | | |
|  | Percentage, victims once or more | H’pool | M’brough | Redcar & Cleveland | Stockton | H’pool | M’brough | Redcar & Cleveland | Stockton | |
| ALL ADULTS | 13.3 | 10021 | 14787 | 14889 | 21013 | 5812 | 11621 | 6380 | 9544 | |
|  |  |  |  |  |  |  |  |  |  | |
| **Total** |  | **60,710** | | | | **33,357** | | | | |

Using CSEW data it can therefore be estimated that there were 60,710 victims of crime in the Cleveland Police force area in 2019-2020. 33,357 victims of crime were known to Cleveland Police.

#### 5.1.1.2 Total levels of crime and reporting by gender

The CSEW and police data is looked at by gender at Table 2.

Table 2 Estimated overall likely demand, the proportion of victims estimated from the CSEW 2019-2020 compared to the recorded victims to Cleveland Police (numbers) by gender/local authority

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Personal characteristic** | **All CSEW crime (excluding fraud and computer misuse)** | **Estimated Numbers derived from CSEW** | | | | **Police Victims Data 2019-2020 (using CSEW definitions)** | | | |
|  | Percentage, victims once or more | H’pool | M’brough | Redcar & Cleveland | Stockton | H’pool | M’brough | Redcar & Cleveland | Stockton | |
| ALL ADULTS | 13.3 | 10021 | 14787 | 14889 | 21013 | 5812 | 11621 | 6380 | 9544 | |
|  |  |  |  |  |  |  |  |  |  | |
| **Total** |  | **60,710** | | | | **33,357** | | | | |
| Men | 13.5 | 4915 | 7352 | 7241 | 10414 | 2515 | 5350 | 2786 | 4252 | |
| Women | 13.0 | 5063 | 7374 | 7581 | 10511 | 3251 | 6172 | 3551 | 5225 | |

A slightly higher proportion of women than men who are victims of crime: 30,259 women compared to 29,922 men.

#### 5.1.1.3 Total levels of crime and reporting by age

CSEW and police data is looked at by age at Table 3.

Table 3 Estimated overall likely demand, the proportion of victims estimated from the CSEW 2019-2020 compared to the recorded victims to Cleveland Police (numbers) by age-band /local authority

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Personal characteristic** | **All CSEW crime (excluding fraud and computer misuse)** | **Estimated Numbers derived from CSEW** | | | | **Police Victims Data 2019-2020 (using CSEW definitions)** | | | |
|  | Percentage, victims once or more | H’pool | M’brough | Redcar & Cleveland | Stockton | H’pool | M’brough | Redcar & Cleveland | Stockton | |
| ALL ADULTS | 13.3 | 10021 | 14787 | 14889 | 21013 | 5812 | 11621 | 6380 | 9544 | |
|  |  |  |  |  |  |  |  |  |  | |
| **Total** |  | **60,710** | | | | **33,357** | | | | |
| 16-24 | 18.3 | 1752 | 3382 | 2391 | 3567 | 1085 | 2394 | 1164 | 1844 | |
| 25-34 | 16.2 | 1948 | 3301 | 2642 | 4268 | 1518 | 3315 | 1739 | 2666 | |
| 35-44 | 15.1 | 1557 | 2329 | 2147 | 3582 | 1288 | 2602 | 1297 | 1978 | |
| 45-54 | 14.1 | 1843 | 2429 | 2686 | 3853 | 923 | 1752 | 1033 | 1454 | |
| 55-64 | 12.3 | 1526 | 2080 | 2321 | 3129 | 556 | 942 | 638 | 941 | |
| 65-74 | 8.3 | 824 | 1033 | 1384 | 1653 | 309 | 401 | 308 | 413 | |
| 75+ | 5.2 | 417 | 537 | 716 | 819 | 133 | 215 | 201 | 248 | |

Those aged 25 to 34 years are the age group that have the largest proportion of victims of crime: 16.2% of those in this age have been the victim of crime, some 12,159 people.

### 5.1.2 Difference between total crime and recorded victims

#### 5.1.2.1 Total levels of crime and reporting

Table 4 below illustrates the difference between the prevalence estimates of likely need as determined by the CSEW and recorded police data on victims. The percentage to which people who have been recorded as a victim by the police is also shown as a proportion of the levels of likely need, that is, the difference between total crime and the number of victims known to the police.

Table 4 Estimated likely demand, the proportion of victims estimated from the CSEW 2019-2020 compared to the recorded victims to Cleveland Police (numbers)

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Personal characteristic** | **All CSEW crime (excluding fraud and computer misuse)** | **Numerical Difference between estimated demand and recorded Police Data 2019-2020** | | | | **Percentage of estimated need met by police 2019-2020** | | | | |
|  | Percentage, victims once or more | H’pool | M’brough | R&C | Stockton | | H’pool | M’brough | R&C | Stockton |
| ALL ADULTS | 13.3 | 4209 | 3166 | 8509 | 11469 | | 58% | 79% | 43% | 45% |

The data at Table 4 indicates differential rates to which likely victims are known to the police ranging from 79% overall in Middlesbrough to 45% in Stockton-on-Tees and 43% in Redcar and Cleveland. Therefore the data shows that reporting to the police was lowest in Redcar and Cleveland.

#### 5.1.2.2 Total levels of crime and reporting by gender

Table 5 (below) sets out the difference between total levels of crime and police reported crime by area, age and gender.

Table 5 Estimated likely demand, the proportion of victims estimated from the CSEW 2019-2020 compared to the recorded victims to Cleveland Police (numbers) by gender/local authority

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Personal characteristic** | **All CSEW crime (excluding fraud and computer misuse)** | **Numerical Difference between estimated demand and recorded Police Data 2019-2020** | | | | **Percentage of estimated need met by police 2019-2020** | | | | |
|  | Percentage, victims once or more | H’pool | M’brough | R&C | Stockton | | H’pool | M’brough | R&C | Stockton |
| ALL ADULTS | 13.3 | 4209 | 3166 | 8509 | 11469 | | 58% | 79% | 43% | 45% |
| Men | 13.5 | 2400 | 2002 | 4455 | 6162 | | 51% | 73% | 38% | 41% |
| Women | 13.0 | 1812 | 1202 | 4030 | 5286 | | 64% | 84% | 47% | 50% |

The data at Table 5 indicates that female victims of crime are more likely to report/be known to the police than male victims. Note for instance that 84% of female victims of crime report to the police in Middlesbrough compared to 73% of male victims.

#### 5.1.2.3 Total levels of crime and reporting by age

Table 6 explores the difference between total crime and reported victims by age.

Table 6 Estimated likely demand, the proportion of victims estimated from the CSEW 2019-2020 compared to the recorded victims to Cleveland Police (numbers) by age-band /local authority

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Personal characteristic** | **All CSEW crime (excluding fraud and computer misuse)** | **Numerical Difference between estimated demand and recorded Police Data 2019-2020** | | | | **Percentage of estimated need met by police 2019-2020** | | | | |
|  | Percentage, victims once or more | H’pool | M’brough | R&C | Stockton | | H’pool | M’brough | R&C | Stockton |
| ALL ADULTS | 13.3 | 4209 | 3166 | 8509 | 11469 | | 58% | 79% | 43% | 45% |
| 16-24 | 18.3 | 667 | 988 | 1227 | 1723 | | 62% | 71% | 49% | 52% |
| 25-34 | 16.2 | 430 | -14 | 903 | 1602 | | 78% | 100% | 66% | 62% |
| 35-44 | 15.1 | 269 | -273 | 850 | 1604 | | 83% | 112% | 60% | 55% |
| 45-54 | 14.1 | 920 | 677 | 1653 | 2399 | | 50% | 72% | 38% | 38% |
| 55-64 | 12.3 | 970 | 1138 | 1683 | 2188 | | 36% | 45% | 27% | 30% |
| 65-74 | 8.3 | 515 | 632 | 1076 | 1240 | | 37% | 39% | 22% | 25% |
| 75+ | 5.2 | 284 | 322 | 515 | 571 | | 32% | 40% | 28% | 30% |

For people aged 25-34 and 35-44 years the level of victims’ police recorded by the police exceeds the expected demand as derived from the CSEW.[[2]](#footnote-2) In addition, the level of estimated need met by the police in 2019-2020 is higher for females than men (reaching 84% in Middlesbrough).

There are differences noted by age range, such that the likely level of need for people aged 25-44 years are more likely to be met with a police response.

### Ethnicity and crime

The overall numbers of people estimated to be a victim as derived from the CSEW is presented by ethnicity and local authority.[[3]](#footnote-3) See Table 7.

Table 7 Estimated overall likely demand, the proportion of victims estimated from the CSEW 2019-2020 compared to the recorded victims to Cleveland Police (numbers) by ethnicity/local authority

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Personal characteristic** | **All CSEW crime (excluding fraud and computer misuse)** | **Estimated Numbers derived from CSEW** | | | | **Police Victims Data 2019-2020 (using CSEW definitions)** | | | |
| **Ethnic group\*** | Percentage, victims once or more | H’pool | M’brough | R&C | Stockton | H’pool | M’brough | R&C | Stockton | |
| White | 12.9 | 9548 | 12726 | 14297 | 19307 | 3818 | 6802 | 4023 | 5660 | |
| Mixed/Multiple | 19.5 | 77 | 329 | 109 | 261 | 11 | 75 | 12 | 47 | |
| Asian/Asian British | 14.9 | 155 | 1264 | 113 | 833 | 58 | 596 | 51 | 294 | |
| Black/African/Caribbean/Black British | 14.3 | 18 | 185 | 16 | 120 | 13 | 131 | 48 | 57 | |
| Other ethnic group | 15.5 | 14 | 176 | 18 | 74 | 10 | 79 | 14 | 42 | |

\* Source for the population estimate: https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/adhocs/008781populationdenominatorsbybroadethnicgroupandforwhitebritishlocalauthoritiesinenglandandwales2011to2017

The CSEW indicates that those of Mixed heritage are the most likely to be the victim of crime – 19.5% of people in this cohort were the victim of crime in the last year. Those of White heritage were the least likely to the victim of crime – 12.9%.

As per the analysis at section 5.1.2 the data for ethnicity was explored to understand the difference between numbers of victims and the proportion reporting to the police. See Table 8.

Table 8 Estimated likely demand, the proportion of victims estimated from the CSEW 2019-2020 compared to the recorded victims to Cleveland Police (numbers) by ethnicity/local authority

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Personal characteristic** | **All CSEW crime (excluding fraud and computer misuse)** | **Numerical Difference between estimated demand and recorded Police Data 2019-2020** | | | | **Percentage of estimated need met by police 2019-2020** | | | |
| **Ethnic group\*** | Percentage, victims once or more | H’pool | M’brough | R&C | Stockton | H’pool | M’brough | R&C | Stockton |
| White | 12.9 | 5730 | 5924 | 10274 | 13647 | 40% | 53% | 28% | 29% |
| Mixed/Multiple | 19.5 | 66 | 254 | 97 | 214 | 14% | 23% | 11% | 18% |
| Asian/Asian British | 14.9 | 97 | 668 | 62 | 539 | 37% | 47% | 45% | 35% |
| Black/African/Caribbean/Black British | 14.3 | 5 | 54 | -32 | 63 | 71% | 71% | 306% | 48% |
| Other ethnic group | 15.5 | 4 | 97 | 4 | 32 | 72% | 45% | 77% | 57% |

Using police recorded information, the difference of the level of likely demand as determined by the CSEW and the extent to which victims are recorded by the police suggest some divergence by ethnicity.

Those of Black and Other heritage were more likely to have their needs met (as determined by the extent to likely demand determined from the CSEW is met through police recorded data).

In Redcar and Cleveland, the level of police recorded victimisation was higher than the expected level for the Black ethnic group. White and Asian groups were shown to have broadly similar rates of need met by the police (with the exception of the level of need recorded in Redcar and Cleveland).

Those of Mixed heritage were more likely not to have their needs met ranging from around one-quarter (23%) of people recorded as of Mixed ethnicity having their needs met in Middlesbrough to 11% in Redcar & Cleveland.

To adjust for missing data relating to ethnicity recorded by the police, it was possible to modify the dataset to take into account missing information (Table 9 below).

Assuming that the missing data is comparable to what we know about the victim population based on recorded information (so that no ethnic group is more likely to be missing), the above table shows revised estimates of the level of demand by ethnicity. This suggests that Black and Other ethnic groups can be shown to have their needs met. Asian and White groups are broadly similar with Mixed ethnicities showing the lowest level of unmet need relative to the other ethnic groups.

Table 9 Estimated likely demand, the proportion of victims estimated from the CSEW 2019-2020 compared to a revised estimate of recorded victims to Cleveland Police (numbers) by ethnicity and local authority

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Personal characteristic** | **All CSEW crime (excluding fraud and computer misuse)** | **Revised level of estimated need met by police 2019-2020 adjusting for non-response (estimated numbers)\*** | | | | **Revised estimate of the Percentage of need met by police 2019-2020 (ethnicity only)** | | | |
| **Ethnic group\*** | Percentage, victims once or more | H’pool | M’brough | R&C | Stockton | H’pool | M’brough | R&C | Stockton |
| White | 12.9 | 5675 | 10288 | 6188 | 8856 | 59% | 81% | 43% | 46% |
| Mixed/Multiple | 19.5 | 16 | 113 | 18 | 74 | 21% | 34% | 17% | 28% |
| Asian/Asian British | 14.9 | 86 | 901 | 78 | 460 | 55% | 71% | 69% | 55% |
| Black/African/Caribbean/Black British | 14.3 | 19 | 198 | 74 | 89 | 104% | 107% | 472% | 74% |
| Other ethnic group | 15.5 | 15 | 119 | 22 | 66 | 108% | 68% | 120% | 90% |

\*Calculated assuming the same percentage can be applied to missing ethnicity figures

## 5.2 Comparison of Police Recorded Crime against VCAS clients

The next phase of the analysis examines the differential characteristics of victims recorded by the police compared to those people who go on to be engaged by VCAS. The aim of this approach is to understand the extent and nature of any differences in profile that may point towards gaps in service provision. (Note that the crime data in this section includes cases of domestic abuse and sexual assault both of which types of crime are out of the scope of the VCAS victim service. The data should therefore be read accordingly in that it is *not* the intention of VCAS to support all victims of crime).

### 5.2.1 Proportion of victims supported by victim service

Table 10 below shows the proportion of victims recorded by the police that go on to be supported by VCAS.

Table 10 Extent of victim engagement by VCAS into the victim population recorded by the police, 2016-17 to 2019-2020

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **2016-2017** | **2017-2018** | **2018-2019** | **2019-2020** |  | **TOTAL** |
| Engaging with expected need | 0.6% | 1.3% | 1.3% | 1.4% |  | 1.2% |

The proportion of victims who have been engaged by VCAS increased from 0.6% of the total victim population to 1.3% in 2017-2018, with a further slight increase to 1.4% in 2019-2020. The estimated total level of engagement across the four years was estimated to be 1.2%. The change in the proportion of victims of clients being supported is probably linked to the fact that capacity in VCAS has increased over this period through additional funding provided by the PCC.

### 5.2.2. Characteristics of victims known to VCAS

The following section looks at comparing the characteristics of the victim population known to VCAS compared to victims recorded by Cleveland police.

#### 5.2.2.1 Gender

The gender of victims known to police and supported by VCAS is set out below.

Table 11 Gender Profile, Police Recorded Number of Victims 2016-2017 to 2019-2020 compared to VCAS 2016-2019

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Gender** | **Police 2016-2017\*** | | **VCAS 2016** | | **Police 2017-2018** | | **VCAS 2017** | | **Police 2018-2019** | | **VCAS 2018** | | **Police 2019-2020** | | **VCAS 2019** | |
|  | No | % | No | % | No | % | No | % | No | % | No | % | No | % | No | % |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Female | 17363 | 51.0 | 163 | 62.9 | 19500 | 51.9 | 413 | 60.6 | 25118 | 55.1 | 520 | 65.2 | 25534 | 54.9 | 549 | 66.5 |
| Male | 16699 | 49.0 | 96 | 37.1 | 18064 | 48.1 | 268 | 39.4 | 20494 | 44.9 | 278 | 34.8 | 20949 | 45.1 | 277 | 33.5 |
| VALID TOTAL | 34062 | 100.0 | 259 | 100.0 | 37564 | 100.0 | 681 | 100.0 | 45612 | 100.0 | 798 | 100.0 | 46483 | 100.0 | 826 | 100.0 |
| Missing/Not Stated | 11675 | 25.5 | 3 | 1.10 | 13667 | 26.7 | 1 | 0.1 | 14051 | 23.6 | 2 | 0.30 | 12800 | 21.6 | 2 | 0.2 |
| TOTAL | 45737 |  | 262 |  | 51231 |  | 682 |  | 59663 |  | 800 |  | 59283 |  | 828 |  |

The data at Table 11 indicates that, annually, VCAS were more likely to engage with female victims of crime compared to victims reported by police. The annual difference can be shown to be greater than 10% with the exception of 2017 which is a difference of 8.7%.

Table 3b Aggregated Gender Profile, Police Recorded Number of Victims 2016-2017 to 2019-2020 compared to VCAS 2016-2019

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Police 2016-2020 (aggregated)** | | **VCAS 2016-2019 (aggregated)** | |
| Gender | Number | Percent | Number | Percent |
| Female | 87515 | 53.5% | 1645 | 64.2% |
| Male | 76206 | 46.5% | 919 | 35.8% |
| VALID TOTAL | 163721 | 100.0% | 2564 | 100.0% |
| Missing/Not Stated | 52193 | 24.2% | 8 | 0.3% |
| TOTAL | 215914 |  | 2572 |  |

To demonstrate the comparison between males and females, the total number of people who were recorded by the police as victims was compared to the total number of people engaged by VCAS. The overall difference shows that females were more likely to proportionally engage with VCAS (64.2%) compared to 53.5% of victims known to the police. In comparison, males are under-represented in VCAS (35.8% were engaged compared to 46.5% reported to the police).

#### 5.2.2.2. Age

Analysis was carried out regarding the age of victims known to the police compared to the age of VCAS clients. The data is set out at Table 12.

Table 12 Age-Profiles Police Recorded Number of Victims 2016-2017 to 2019-2020 compared to VCAS 2016-2019

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Police 2016-2017 | | VCAS 2016 | | Police 2017-2018 | | VCAS 2017 | | Police 2018-2019 | | VCAS 2018 | | Police 2019-2020 | | VCAS 2019 | |
| Age | No | % | No | % | No | % | No | % | No | % | No | % | No | % | No | % |
| Under 20 | 4942 | 14.6 | 15 | 6.3 | 5194 | 13.9 | 33 | 5.3% | 6517 | 14.4 | 34 | 4.7 | 6324 | 13.7 | 31 | 4.0 |
| 20-29 | 7707 | 22.7 | 22 | 9.3 | 8404 | 22.4 | 60 | 9.6% | 10867 | 24.0 | 83 | 11.5 | 10642 | 23.0 | 78 | 10.2 |
| 30-39 | 7363 | 21.7 | 29 | 12.2 | 8333 | 22.3 | 97 | 15.5% | 10882 | 24.0 | 88 | 12.2 | 11259 | 24.3 | 104 | 13.6 |
| 40-49 | 5821 | 17.1 | 35 | 14.8 | 6275 | 16.8 | 100 | 16.0% | 7323 | 16.1 | 108 | 15.0 | 7689 | 16.6 | 106 | 13.8 |
| 50-59 | 4161 | 12.3 | 32 | 13.5 | 4803 | 12.8 | 103 | 16.5% | 5325 | 11.7 | 118 | 16.3 | 5658 | 12.2 | 126 | 16.4 |
| 60-69 | 2199 | 6.5 | 38 | 16.0 | 2456 | 6.6 | 76 | 12.1% | 2625 | 5.8 | 89 | 12.3 | 2891 | 6.2 | 107 | 14.0 |
| 70-79 | 1159 | 3.4 | 30 | 12.7 | 1351 | 3.6 | 91 | 14.5% | 1200 | 2.6 | 100 | 13.9 | 1294 | 2.8 | 110 | 14.4 |
| 80+ | 599 | 1.8 | 36 | 15.2 | 623 | 1.7 | 66 | 10.5% | 615 | 1.4 | 102 | 14.1 | 537 | 1.2 | 104 | 13.6 |
| VALID TOTAL | 33951 | 100.0 | 237 | 100.0 | 37439 | 100.0 | 626 | 100.0% | 45354 | 100.0 | 722 | 100.0 | 46294 | 100.0 | 766 | 100.0 |
| Missing/Not Stated | 11786 | 25.8 | 25 | 9.5 | 13792 | 26.9 | 56 | 8.2% | 14309 | 24.0 | 78 | 9.8 | 12989 | 21.9 | 62 | 7.5 |
| TOTAL | 45737 |  | 262 |  | 51231 |  | 682 |  | 59663 |  | 800 |  | 59283 |  | 828 |  |

The difference between age groups can be seen to be broadly stable although the difference between victims aged under 20 reported to the police and to VCAS increased from 8.3% 2016-2017 to 10.7% in 2019-2020.

The extent to which numbers of victims reported to the police and the numbers engaged with VCAS were compared to determine whether trends in age-group representation are aligned. In other words, if there is an increase in numbers of victims reported to the police, is there a commensurate increase in numbers engaged with VCAS? The analysis is set out at Table 13.

Table 13 Aggregated Age-Profiles Police Recorded Number of Victims 2016-2017 to 2019-2020 compared to VCAS 2016-2019

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Police 2016-2020** | | **VCAS 2016-2019** | | **Correlation 2016-2017 to 2019-2020 (r)** |
| Age | Number | Percent | Number | Percent |
| Under 20 | 22977 | 14.1% | 113 | 4.8% | 0.66 |
| 20-29 | 37620 | 23.1% | 243 | 10.3% | 0.91 |
| 30-39 | 37837 | 23.2% | 318 | 13.5% | 0.72 |
| 40-49 | 27108 | 16.6% | 349 | 14.8% | 0.78 |
| 50-59 | 19947 | 12.2% | 379 | 16.1% | 0.94 |
| 60-69 | 10171 | 6.2% | 310 | 13.2% | 0.98 |
| 70-79 | 5004 | 3.1% | 331 | 14.1% | 0.63 |
| 80+ | 2374 | 1.5% | 308 | 13.1% | -0.41 |
| VALID TOTAL | 163038 | 100.0% | 2351 | 100.0% |  |

The analysis suggests that broadly there is a strong relationship between reporting across age-groups ranging from 0.66 in the under 20-year-olds to 0.98 in the 60-69 year old band. The relationship breaks down for the 80+ age group which suggests a negative relationship. As can be shown in Table 13 the number of victims reported to the police in this age-group may decline from 2017-2018 but from this time the numbers engaged with VCAS increased. This suggests a differential relationship in engagement for this age-group reflecting some of the most vulnerable people who would benefit from the service.

Figure 1 shows the disparity in reporting to VCAS compared to victims reported to Cleveland police.

Figure 1 Aggregated Age-Profiles Police Recorded Number of Victims 2016-2017 to 2019-2020 compared to VCAS 2016-2019

Victims aged under 40 were more likely to be known to the police (in purple, Figure 1) compared to the proportional engagement with VCAS (in blue, Figure 1). Near parity is achieved with the 40-49 age-range and thereafter, VCAS can be shown to engage proportionally with older age-groups relative to younger groups.

Note that it may be the case that VCAS perceive older people to be more vulnerable and so deliberately target their support at older people. This would explain the over-representation of the older cohorts (and particularly those aged 70 years and above).

#### 5.2.2.3 Ethnicity

Analysis was carried out on the data in relation to the ethnicity of victims known the police and victims supported by VCAS. The results are set out at Table 14.

Table 14 Ethnic-Profiles Police Recorded Number of Victims 2016-2017 to 2019-2020 compared to VCAS 2016-2019

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Police Victims (Full Def) 2016-2017 | | VCAS 2016 | | Police Victims (Full Def) 2017-2018 | | VCAS 2017 | | Police Victims (Full Def) 2018-2019 | | VCAS 2018 | | Police Victims (Full Def) 2019-2020 | | VCAS 2019 | |
| Ethnicity | No | % | No | % | No | % | No | % | No | % | No | % | No | % | No | % |
| W1 - White British | 27098 | 91.4% | 138 | 82.1% | 28539 | 90.8% | 413 | 89.6% | 29520 | 91.6% | 498 | 93.4% | 26815 | 92.0% | 527 | 95.1% |
| W2 - White Irish | 67 | 0.2% | 0 | 0.0. | 81 | 0.3% | 0 | 0.0% | 89 | 0.3% | 3 | 0.6% | 60 | 0.2% | 0 | 0.0% |
| W9 - Any Other White Background | 343 | 1.2% | 6 | 3.6% | 403 | 1.3% | 5 | 1.1% | 293 | 0.9% | 4 | 0.8% | 205 | 0.7% | 6 | 1.1% |
| A1 - Indian | 135 | 0.5% | 2 | 1.2% | 162 | 0.5% | 0 | 0.0% | 128 | 0.4% | 0 | 0.0% | 111 | 0.4% | 1 | 0.2% |
| A2 - Pakistani | 752 | 2.5% | 3 | 1.8% | 783 | 2.5% | 2 | 0.4% | 725 | 2.2% | 5 | 0.9% | 677 | 2.3% | 4 | 0.7% |
| A3 - Bangladeshi | 27 | 0.1% | 0 | 0.0% | 28 | 0.1% | 1 | 0.2% | 28 | 0.1% | 1 | 0.2% | 28 | 0.1% | 0 | 0.0% |
| A9 - Any Other Asian Background | 502 | 1.7% | 11 | 6.5% | 642 | 2.0% | 22 | 4.8% | 633 | 2.0% | 11 | 2.1% | 545 | 1.9% | 8 | 1.4% |
| B1 - Black Caribbean | 31 | 0.1% | 1 | 0.6% | 45 | 0.1% | 0 | 0.0% | 49 | 0.2% | 4 | 0.8% | 46 | 0.2% | 4 | 0.7% |
| B2 - Black African | 179 | 0.6% | 2 | 1.2% | 213 | 0.7% | 9 | 2.0% | 206 | 0.6% | 4 | 0.8% | 130 | 0.4% | 2 | 0.4% |
| B9 - Any Other Black Background | 118 | 0.4% | 0 | 0.0% | 115 | 0.4% | 0 | 0.0% | 154 | 0.5% | 0 | 0.0% | 148 | 0.5% | 0 | 0.0% |
| M1 - White and Black Caribbean | 21 | 0.1% | 2 | 1.2% | 35 | 0.1% | 0 | 0.0% | 28 | 0.1% | 0 | 0.0% | 24 | 0.1% | 1 | 0.2% |
| M2 - White and Black African | 19 | 0.1% | 0 | 0.0% | 24 | 0.1% | 2 | 0.4% | 27 | 0.1% | 0 | 0.0% | 29 | 0.1% | 0 | 0.0% |
| M3 - White and Asian | 63 | 0.2% | 0 | 0.0% | 54 | 0.2% | 0 | 0.0% | 67 | 0.2% | 0 | 0.0% | 74 | 0.3% | 0 | 0.0% |
| M9 - Any Other Mixed Background | 92 | 0.3% | 1 | 0.6% | 87 | 0.3% | 1 | 0.2% | 117 | 0.4% | 1 | 0.2% | 75 | 0.3% | 0 | 0.0% |
| O1 - Chinese | 53 | 0.2% | 0 | 0.0% | 39 | 0.1% | 0 | 0.0% | 28 | 0.1% | 0 | 0.0% | 28 | 0.1% | 0 | 0.0% |
| O9 - Any Other Ethnic Group | 162 | 0.5% | 2 | 1.2% | 189 | 0.6% | 6 | 1.3% | 143 | 0.4% | 2 | 0.4% | 142 | 0.5% | 1 | 0.2% |
| VALID TOTAL | 29662 | 100.0% | 168 | 100.0% | 31439 | 100.0% | 461 | 100.00% | 32235 | 100.0% | 533 | 100.0% | 29137 | 1 | 554 | 100.0% |
| Missing/Not Stated | 16075 |  | 94 | 35.90% | 19792 |  | 221 | 32% | 27428 |  | 267 | 33.0% | 30146 |  | 274 | 33.0% |
| TOTAL | 45737 |  | 262 |  | 51231 |  | 682 |  | 59663 |  | 800 |  | 59283 |  | 828 |  |

The data on ethnicity shows no clear trend over time by ethnic group.

There has been a shift from 2016-2017 where VCAS were less likely to see White British victims (82.1%) compared to victims reported by police (91.4%), to 2019-2020 where VCAS were slightly more likely to engage with White British victims (95.1%) compared to victims reported to Cleveland Police (92.0%).

There is a close relationship between the ethnic profile of victims engaged with VCAS and the ethnic distribution of victims reported by police using the long ONS classification. See Table 15.

Table 15 Aggregated Ethnic-Profiles Police Recorded Number of Victims 2016-2017 to 2019-2020 compared to VCAS 2016-2019

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Police Victims 2016-2019** | | **VCAS 2016/17 - 2019/20** | | **Difference between VCAS and Police Percentages** |
| Ethnicity | Number | Percent | Number | Percent |
| W1 - White British | 111972 | 91.4% | 1576 | 91.8% | 0.4% |
| W2 - White Irish | 297 | 0.2% | 3 | 0.2% | -0.1% |
| W9 - Any Other White Background | 1244 | 1.0% | 21 | 1.2% | 0.2% |
| A1 - Indian | 536 | 0.4% | 3 | 0.2% | -0.3% |
| A2 - Pakistani | 2937 | 2.4% | 14 | 0.8% | -1.6% |
| A3 - Bangladeshi | 111 | 0.1% | 2 | 0.1% | 0.0% |
| A9 - Any Other Asian Background | 2322 | 1.9% | 52 | 3.0% | 1.1% |
| B1 - Black Caribbean | 171 | 0.1% | 9 | 0.5% | 0.4% |
| B2 - Black African | 728 | 0.6% | 17 | 1.0% | 0.4% |
| B9 - Any Other Black Background | 535 | 0.4% | 0 | 0.0% | -0.4% |
| M1 - White and Black Caribbean | 108 | 0.1% | 3 | 0.2% | 0.1% |
| M2 - White and Black African | 99 | 0.1% | 2 | 0.1% | 0.0% |
| M3 - White and Asian | 258 | 0.2% | 0 | 0.0% | -0.2% |
| M9 - Any Other Mixed Background | 371 | 0.3% | 3 | 0.2% | -0.1% |
| O1 - Chinese | 148 | 0.1% | 0 | 0.0% | -0.1% |
| O9 - Any Other Ethnic Group | 636 | 0.5% | 11 | 0.6% | 0.1% |
| VALID TOTAL | 122473 | 100.0% | 1716 | 100.0% |  |
| Missing/Not Stated | 93441 |  | 856 |  |  |
| TOTAL | 215914 |  | 2572 |  |  |

The results indicate that VCAS were more likely to engage with:

* White British (+0.4%) and
* White Other (+0.2%) groups,

VCAS were less likely to engage with:

* White Irish (-0.1%)
* Indian (-0.3%) and
* Pakistani (-1.6%) victims

VCAS engaged exactly with the Bangladeshi community (0.0% difference) with victims from an Asian Other (+1.1%) background more likely engage with VCAS support.

Black groups were proportionally more likely to engage with VCAS with the exception of the Any Other Black category (-0.4%). Mixed White and Asian (-0.2%) and Mixed Other (-0.1%) groups were less likely to engage with VCAS, although this was offset by greater representation from Mixed White and Black Caribbean (+0.1%) and equivalent engagement from Mixed White and Black African (+0.0%). Chinese ethnic groups were slightly under-represented in VCAS (-0.1%) whilst Arab groups were slightly over-represented in VCAS (+0.1%).

## 5.3 Comparisons with demographic profile of wider population

This section explores the extent to which the profile of those who report crime to the police and who engage with VCAS is consistent with the profile of the wider community.

### 5.3.1 Gender

Table 16 shows the gender profile of the Cleveland area as a whole (all four boroughs within the Cleveland Police force area) compared to the gender of victims reported to the police and the gender of VCAS clients.

Table 16 Comparisons with Cleveland demographic profile (gender)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Cleveland Demographic 2019 Estimate\*** | | **Police 2016-2020 (aggregated)** | | **VCAS 2016-2019 (aggregated)** | |
| Gender | Number | Percent | Number | Percent | Number | Percent |
| Female | 455896 | 51.5% | 87515 | 53.5% | 1645 | 64.2% |
| Male | 429786 | 48.5% | 76206 | 46.5% | 919 | 35.8% |
| VALID TOTAL | 885682 | 100.0% | 163721 | 100.0% | 2564 | 100.0% |

\*Cleveland estimate for 2019

The above table shows that, across Cleveland in 2019, there were slightly more females in the population compared to males. The proportion of females increases as one moves from police to VCAS – that is there is a higher proportion of female victims known to the police (53.5%) than the proportion of women in the community as a whole (51.5%) and a greater proportion again among VCAS clients (64.2%).

### 5.3.2 Age

Analysis was carried out in relation to the age profile of the community compared to victims known to police and those supported by VCAS. The results are set out at Table 17.

Table 17 Comparisons with Cleveland demographic profile (age)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Police 2016-2020** | | **VCAS 2016-2019** | | **Cleveland Socio-Demographic 2019** | |
| Age | Number | Percent | Number | Percent | Number | Percent |
| Under 20 | 22977 | 14.1% | 113 | 4.8% | 43056 | 24.2% |
| 20-29 | 37620 | 23.1% | 243 | 10.3% | 22201 | 12.5% |
| 30-39 | 37837 | 23.2% | 318 | 13.5% | 22865 | 12.9% |
| 40-49 | 27108 | 16.6% | 349 | 14.8% | 21085 | 11.9% |
| 50-59 | 19947 | 12.2% | 379 | 16.1% | 20430 | 11.5% |
| 60-69 | 10171 | 6.2% | 310 | 13.2% | 22012 | 12.4% |
| 70-79 | 5004 | 3.1% | 331 | 14.1% | 15950 | 9.0% |
| 80+ | 2374 | 1.5% | 308 | 13.1% | 9981 | 5.6% |
| VALID TOTAL | 163038 | 100.0% | 2351 | 100.0% | 177579 | 100.0% |

The Cleveland population has a higher number of younger people aged under 20 compared to those known to the police and VCAS. Thus, while nearly a quarter (24.2%) of the population is aged under 20, this group make up 14% of victims known to police and 4.8% of VCAS clients. Conversely, while those aged between 70 and 79 make up 9% of the population, they make up 14% of VCAS clients.

### 5.3.3. Ethnicity

Analysis was carried out in relation to the ethnicity of the population versus those known to the police and VCAS clients. The results are set out at Table 18.

Table 18 Comparisons with Cleveland demographic profile (ethnicity)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Police Victims (Full Def) 2019-2020** | | **VCAS 2019** | | **Cleveland Demographic Profile, 2019** | |
| White | 27080 | 92.9% | 533 | 96.2% | 532706 | 93.6% |
| Asian | 1361 | 4.7% | 13 | 2.3% | 21879 | 3.8% |
| Black | 324 | 1.1% | 6 | 1.1% | 4054 | 0.7% |
| Mixed | 202 | 0.7% | 1 | 0.2% | 7837 | 1.4% |
| Other | 170 | 0.6% | 1 | 0.2% | 2665 | 0.5% |
| Total | 29137 | 100.0% | 554 | 100.0% | 569141 | 100.0% |

There is a close comparison between police victims’ data and the Cleveland demographic profile for residents reported as ‘White’. In comparison, the proportion of clients seen by VCAS report a slightly higher percentage (96.2%) compared to the wider population (93.6%).

A higher proportion of Black (4.7%) and Asian (1.1%) victims as a proportion were recorded by the police in 2019 compared to the Cleveland population (3.8% and 0.7% respectively). As a proportion, VCAS were more likely to engage with Black people (1.1% compared to 0.7% in the population) and slightly less likely to engage with Asian resident (2.3% compared to 3.8%). A lower proportion of residents recorded as Mixed were reported by Police (0.7%) and VCAS (0.2%) compared to the resident population (1.4%). There was broad concordance between police victims recorded as ‘Other’ (0.6%) compared to the Cleveland population (0.5%) with a slightly lower proportion noted by VCAS (at 0.2% in 2019).

## 5.4 Crime type

### 5.4.1 Types of crime known to police and VCAS

This section analyses data in relation to the types of crime committed.

Table 19 Offence comparing VCAS 2016-2020 and Police Reports 2016-2019

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | VCAS 2016-2020 | | Police Reports 2016-2019 | |
|  | Number | Percentage | Number | Percentage |
| Violence | 664 | 17.7% | 49510 | 23.1% |
| Robbery | 100 | 2.7% | 2065 | 1.0% |
| Theft | 249 | 6.6% | 73339 | 34.2% |
| Criminal damage/Arson | 576 | 15.4% | 40490 | 18.9% |
| Vehicle Offences | 16 | 0.4% | 3519 | 1.6% |
| Burglary | 556 | 14.8% | 21645 | 10.1% |
| Fraud | 482 | 12.9% | 412 | 0.2% |
| Harassment/Stalking | 258 | 6.9% | 21564 | 10.0% |
| Racial/Religious Offences | 90 | 2.4% | 360 | 0.2% |
| Anti-Social Behaviour/Other | 758 | 20.2% | 1810 | 0.8% |
|  |  |  |  |  |
| TOTAL | 3749 | 100.0% | 214714 | 100.0% |

Table 19 examines the differences between the offence types reported to VCAS (2016-2020) and those reported to the police (2016-2019). The individual offence description provided by Cleveland was recoded into the above categories to compare and contrast similar categories used by VCAS. There were over 100 line-items to be recoded with offences recorded by the police that were not victim-based were excluded. These excluded some categories that were assumed to be victim or non-victim based and without further detail of each case, it is possible that this approach may omit a victim eligible for VCAS services. This may explain the greater number of fraud cases recorded by VCAS compared to police figures. Caution is therefore recommended in the interpretation of this table and should therefore be considered indicative only. Certain offences were excluded from this analysis entirely (e.g. sexual offences).

Some differences should be noted however. Police reported slightly higher proportions of violent offences (23.1% compared to 17.7%), criminal damage and arson (18.9% v 15.4%), vehicle offences (1.6% v 0.4%) and harassment/stalking offences (10.0% v 6.9%) compared to proportions recorded by VCAS.

The main gap between police recorded offences and VCAS reports were for theft (34.2% reported by the police compared to 6.6% by VCAS). In comparison, VCAS were more likely to report proportionally robbery (2.7% compared to 1.0% recorded by the police), burglary (14.8% v 10.1%), fraud (12.9 v 0.2%) and racial or religious offences (2.4% v 0.2%). VCAS report a higher proportion of ‘other’ offences that incorporate a code for ‘antisocial behaviour’ which is not an offence code used by the police. This code therefore skews the proportional comparison across all offences type.

### 5.4.2 Hate crime

The majority (between 91.2% in 2016 to 95.4% in 2020) of crime reported to VCAS were non-hate crimes. The number of hate-crimes reported are relatively low at around 33-39 (between 2017 and 2020). Further data is set out at Table 20.

Table 20 Hate crime reported by Cleveland victims reported to VCAS 2016-2020

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **2016** | | **2017** | | **2018** | | **2019** | | **2020** | |
| Type of Hate Crime | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent |
| Disability | 7 | 2.7% | 13 | 1.9% | 11 | 1.4% | 8 | 1.0% | 6 | 0.5% |
| LGBT | 3 | 1.1% | 5 | 0.7% | 8 | 1.0% | 10 | 1.2% | 9 | 0.8% |
| Not a hate crime | 239 | 91.2% | 629 | 92.2% | 747 | 93.4% | 779 | 94.1% | 1123 | 95.4% |
| Race | 13 | 5.0% | 33 | 4.8% | 34 | 4.3% | 30 | 3.6% | 39 | 3.3% |
| Religion | 0 | 0.0% | 2 | 0.3% | 0 | 0.0% | 1 | 0.1% | 0 | 0.0% |
| VALID TOTAL | 262 | 100.0% | 682 | 100.0% | 800 | 100.0% | 828 | 100.0% | 1177 | 100.0% |
| Missing/Not Stated | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |
| TOTAL | 262 | 100.0% | 682 | 100.0% | 800 | 100.0% | 828 | 100.0% | 1177 | 100.0% |

## 5.5 Epidemiological Modelling of Prognostics Associated with Police-Recorded Victims

The difference in the level of victims reported to Cleveland Police (and explored in section 5.1) by the four borough areas was modelled by comparing the variance to a list of possible variables (prognostics) that might affect reporting rates.

The variables chosen were theorised as factors that could help explain the difference in the number[[4]](#footnote-4) of victims reported to the police in 2019-2020.

The variables included:

* Indices of deprivation for 2019 disaggregated by the domains (income, employment, education, health, barriers to housing, environmental deprivation, Income Deprivation Affecting Children Index, Income Deprivation Affecting Older People Index [note that the crime domain was excluded as crime data formed the outcome variable]).
* the extent of the local non-White population for each borough,
* the total number of people accessing specialist drug and alcohol treatment for 2019-2020 (recoded to a rate per 1,000 population), and
* an overall health index for each borough split into three domains focusing on health outcomes (including mental health); health-related behaviours and personal circumstances and wider determinants of health, environmental factors.

The analysis found that, for 2019-2020, the difference in victimisation as reported by the police across the four Cleveland boroughs could *not* be explained by differences in:

* deprivation,
* population markers such as the proportion in each borough that were non-White,
* drug and alcohol treatment demand or
* variations in health indicators.

This model should be considered indicative only and as such suggests further work is required to understand what factors are associated with differential rates of victimisation as reported by Cleveland Police.

# Community perceptions

This sections seeks to explore the views of the community in relation to being the victim of crime, the need for victim services and accessing victim services.

## The views of the wider community

A survey was prepared and circulated to gather the views of the wider community in Cleveland (that is the general population rather than specifically victims of crime or other sub-groups).

The analysis of the results is set out below.

### 6.1.1 ‘About you’ demographics

When asked ‘what gender do you identify as?’ just under a third of respondents identified as male (31.4%), over two thirds female (68.2%), and one as non-binary.

These proportions are broadly in line with service user statistics for 2020, with most victims reporting in to VCAS being female (68.8%), compared to under a third (31.2%) being male.

Survey respondents were also asked to self-identify with one of the standard ethnicity classifications, and in this Resident Survey 96.3% classed themselves as ‘White British’ (n=288, of the 299 who answered)

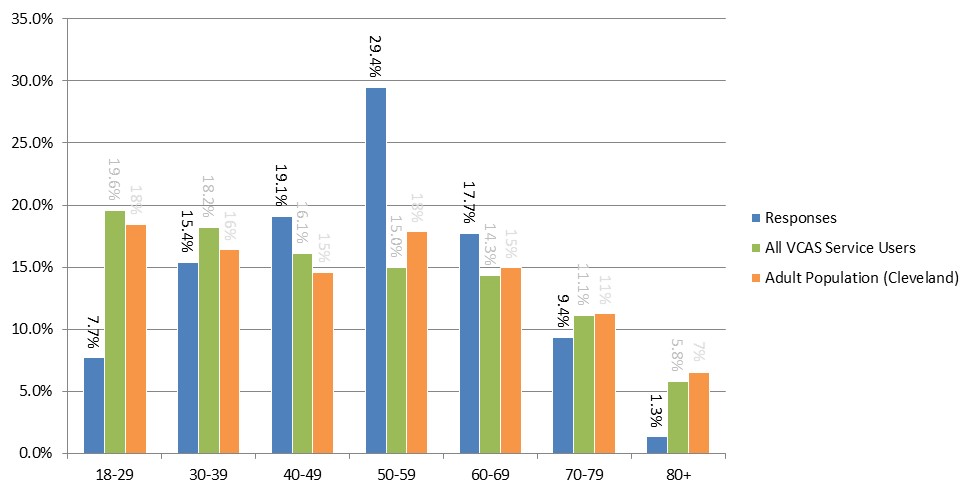
This reflects the profile of service users using VCAS the vast majority of all service users (92%) reporting to VCAS in 2020 identify as White British.

Comparing that to the population as a whole, the most reliable data at the local authority level (and the latest available National Statistics for ethnic group) are from the 2011 Census, until the results from the recent Census are released. However ONS have released more recent experimental statistics in December 2019[[5]](#footnote-5), and that data reveals how Cleveland as a whole has a far higher proportion of people classifying themselves as ‘White British’ compared to national benchmarks – accounting for 93% of Cleveland residents compared to 80% of the England and Wales population. There is variation within the sub-region, ranging from 83% of the population in Middlesbrough classifying themselves ‘White British’, to 99% of residents in Redcar and Cleveland local authority area.

When asked their age, a disproportionate number of respondents are in the middle age brackets, as shown in Figure 2 below. The Cleveland population is derived using 2020 ONS mid-year population estimates, referred to earlier.

In summary, almost half of resident survey respondents were aged between 40 and 59 years of age (48%), compared to just under a third of Cleveland’s population as a whole. Conversely there is under-representation in the younger age bands.

Figure 2 How old are you?



Breaking down the results by local authority of residence, a sizeable percentage of respondents (who disclosed where they reside) live in Redcar and Cleveland (44%, n=132), followed by Stockton-on-Tees (26%, n=78). A fifth of respondents live in Middlesbrough (20%, n=61), with the least number living in Hartlepool – a tenth of the survey respondents (10%, n =29).

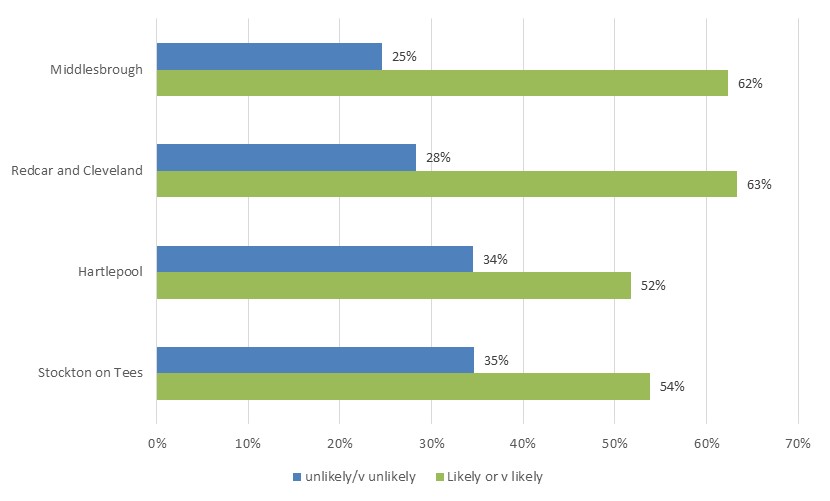
### 6.1.2 Seeking help

#### 6.1.2.1 Seeking help

When asked ‘if you were a victim of crime or anti-social behaviour in the next 12 months, how likely is it that you would seek help outside of your network of friends / family?’ a majority (59.4%) said they were very likely or likely to seek help beyond their close networks (n=209, out of 352 who answered this question), whilst in contrast two in every five (40.6%) respondents were very unlikely, unlikely or not sure if they would go beyond their network of friends/family.

Breaking down the survey answers further reveals that 62% of female respondents would likely or very likely seek outside help, compared to 54% of males and there is considerable variation by local authority of residence (where local authority is recorded by a respondent) as shown in Figure 3.

Figure 3 How likely is it that you would seek help outside of your network of friends and family?



#### 6.1.2.2 Why people do not seek help

Those who were ‘very unlikely’ or ‘unlikely’ (or unsure) that they would seek help outside of their network of friends / family were then asked the reasons for not seeking help. By far the most common reason for not seeking external help is that ‘police and other agencies wouldn’t do anything/not be bothered/ not be interested’, which over half (51.8%) of respondents put forward as the reason why they would keep the issue ‘close to home’. Other sizeable volumes of responses were registered against the following reasons:

* Previous bad experience of seeking help or reporting (29.8%)
* Fear of reprisal by offenders/make matters worse (25.5%)
* Usually deal with matter myself/ourselves (19.2%)
* I don’t know who to contact / who offers support (9.2%)

National benchmarks on reasons why people wouldn’t seek help or not report are difficult to source for comparison. However a June 2019 *ad hoc* request[[6]](#footnote-6) to ONS provides a useful comparison, with the CSEW being sourced to estimate percentages of incidents for which a reason was provided as to why an incident was not reported to the police. In order of volume, the reasons given were:

* Police could not do anything (33%)
* Too trivial/not worth reporting (29%)
* Police not interested / bothered (20%)
* Private/dealt with themselves (19%)

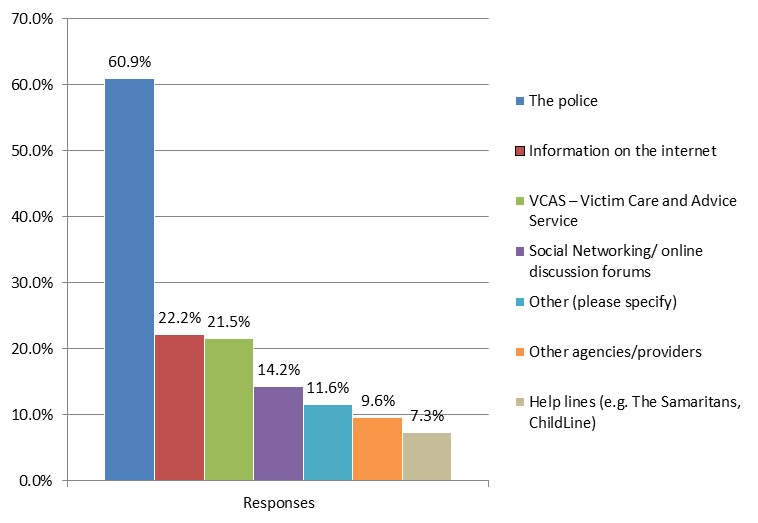
The percentage of Cleveland respondents whose reason for not seeking help outside their network is ‘police and other agencies wouldn’t do anything / not be bothered/ not be interested’ (51.8%) is very similar to the police-related reasons given in that *ad hoc* report from ONS - the percentage of England adults aged 16 and over whose reason for not reporting to the police was ‘Police could not do anything’ and ‘Police not interested/bothered’ sum to 53%.

#### 6.1.2.3 Where people seek help and support

Cleveland residents who are likely or very likely to seek outside help after being victimized were asked to explain more about who or where would they would go to for help.

The percentage of respondents against each of the options offered to them is shown in Figure 4. Almost two thirds (60.9%) would reach out to the police service, and a fifth (21.5%) would contact VCAS - however a large percentage would seek ‘remote’ support online, looking for information on the internet or social network/online forums. The increasing use of the internet by victims for information and ‘self- help’ advice has escalated during lockdown, whilst in contrast traditional methods of engagement with services has been affected by the victims inability to directly access facilities and support face-to-face due to restrictions.

Figure 4 If it’s likely or very likely you would seek outside help after being victimised, who or where would you go to?

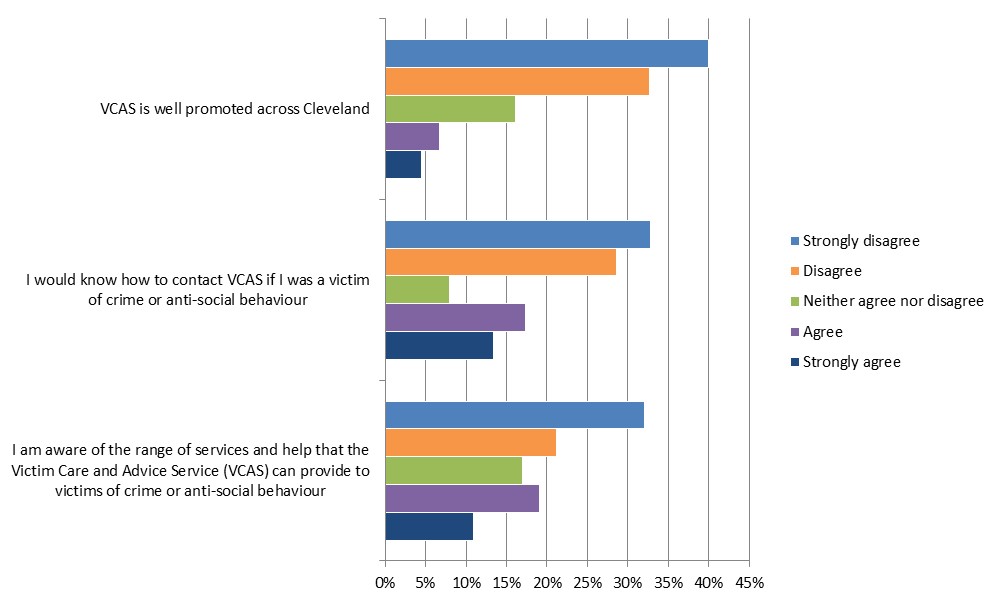


The resident survey reveals that whilst the police remains, by far, the main point of support for those seeking outside help, a sizeable proportion of residents are still reluctant to use that service and doubt how helpful police help can be.

Question 4 of the resident survey asked people to assess three statements and indicate how strongly they agreed or disagreed. Taking each of these statements in turn:

* When asked about promotion of VCAS across Cleveland, there was overwhelming disagreement that the service is well promoted. Almost three quarters of respondents disagreed or strongly disagreed with that statement ‘VCAS is well promoted across Cleveland’ (73%, n=240 respondents). Only one in 10 thought the service well promoted (12%, n = 37 respondents) – i.e. agreed or strongly agreed.
* When presented with the statement ‘I would know how to contact VCAS if I was a victim of crime or anti-social behaviour’, again a high percentage of respondents disagreed. Almost two thirds (62%, n=202) either disagreed or strongly disagreed, whilst just under a third (30%, n = 101) either agreed or strongly agreed with that statement.

Figure 5 To what extent do you agree or disagree with the following statements about VCAS



Almost a third of respondents (30%, n = 99) agreed or strongly agreed that they are aware of the range of services and help that VCAS can provide to victims of crime or anti-social behaviour. At the opposite end of the spectrum, just over a half of respondents either disagreed or strongly disagreed (53%, n = 176).

Sub-regional variation exists summarised in the following charts.

Figure 6 VCAS is well promoted across Cleveland

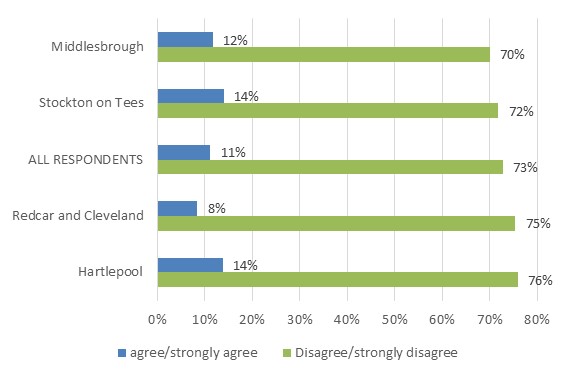


Figure 7 I would know how to contact VCAS if I were a victim of crime

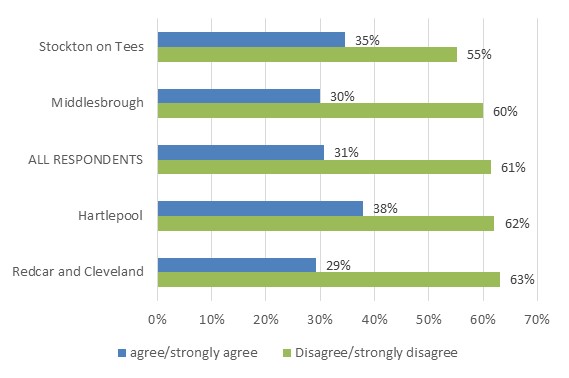
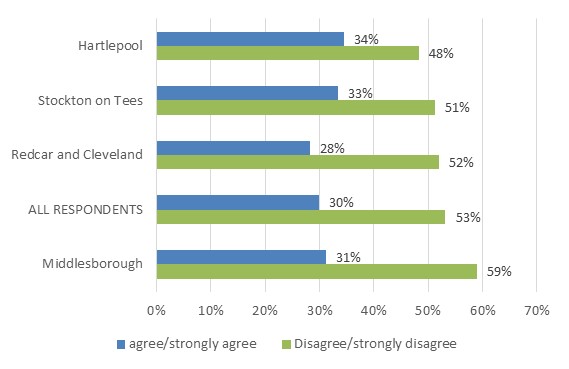


Figure 8 I am aware of the range of help and services VCAS can provide

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In summary, a large percentage of those Cleveland residents taking part in this survey are critical of the promotion of VCAS, don’t know how to contact that service, and lack awareness of the range of support on offer.

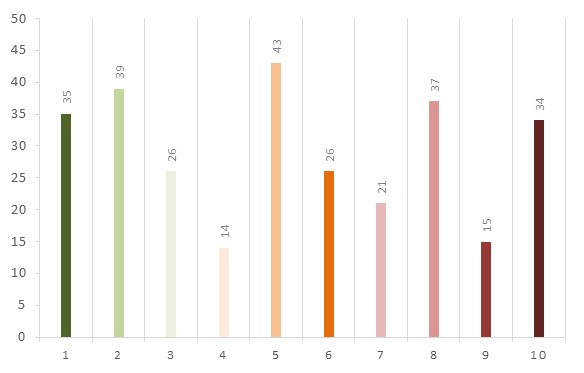
### 6.1.3 Impact of crime and ASB

The negative effects of crime on quality of life is well researched – for example, there is a long line of literature on the wide-ranging effects of violent crimes (e.g. Coker et al., 2002; Parsons and Bergin, 2010), and domestic burglary (e.g. Mawby and Walklate, 1997). There is less work that examines the effects of sub-criminal behaviour on victims, though recent research by Dr Vicky Heap at Sheffield Hallam University (Oct 2020)[[7]](#footnote-7) uncovered that ASB victims experience a range of mental and physical health effects as well as behavioural changes, with greater support needed for ASB victims. Understanding more about the impact of crime and ASB on the quality of life of Cleveland residents was explored in Question 5 of the survey.

Question 5 of the survey asked residents ‘how much is your quality of life affected by your experience of crime and anti-social behaviour, on a scale from 1 to 10 - where 1 is no effect and 10 is a total effect on your quality of life?’

The number of residents who scored quality of life on the range of one to ten is summarized in Figure 9.

Figure 9 Quality of life scores: number of respondents per score



As can be seen in Figure 9 there is a wide variation of scores logged by respondents when summarizing the impact of crime and ASB on quality of life. A similar volume of residents highlighted the scores at the most extreme ends of the scoring spectrum: 34 respondents (12.1%) indicated that their experience of crime and ASB had a ‘total effect on their quality of life’ (a score of 10 on the scale), whilst a similar number (n=35, 11.7%) indicated that their experience had no effect (a score of 1).

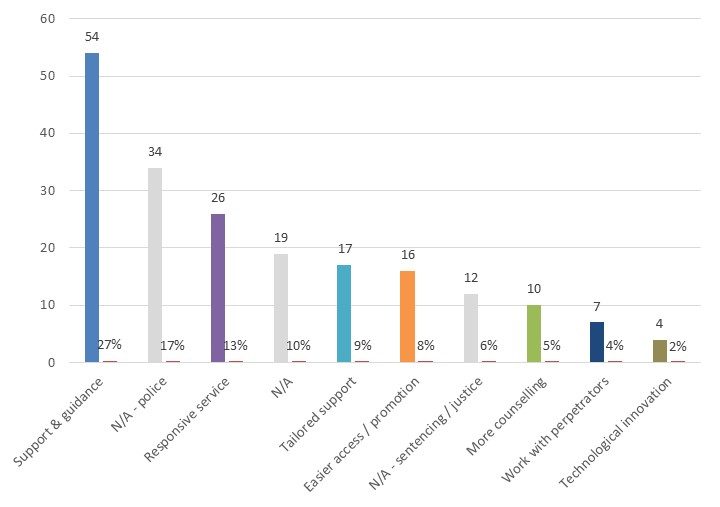
Approximately one in six respondents chose the middle score on the range, five (n=43, 15%), which was the most popular score.

### 6.1.4 What victim services should offer

#### 6.1.4.1 What victim services should offer

Respondents were asked: ‘What would you like to see provided in a victims' service?’ This was an open ended question, and 199 respondents took the opportunity to give their views. Their qualitative answers were coded, to match similar themes or areas, and the results presented at Figure 10.

Figure 10 What people would like to see in a victim support service



Over one in four respondents (27%, n=54) provided an holistic overview of the main characteristics relating to support and guidance they expect from a victims service – referring to a range of needs and associated response, including:

* “emotional support and advice”,
* “reassurance, contact and a plan going forward” or
* “friendly, supportive listening and practical advice”.

Empathy, honesty and confidentiality were also commonly used phrases.

As well as general support and guidance, more specific features of the ideal service include:

* **Responsive**: 13% of respondents (n=26) referred to a service that was timely, easy to access, available for longer, and ideally face-to-face- demands include: “24 hour victim support and not an automated service”, “face to face visits to victims and witnesses of crime and anti- social behaviour within two days of the crime not weeks later or sometimes not at all” with continuity a common reference, for example “continuous and ongoing input with victim to make sure correct support service is being offered and taken.
* **Tailored**: to meet the needs of a variety of victims. More support was mentioned around victims of sexual violence, domestic abuse (male victims) and specific vulnerable groups – including the elderly, disabled, and those living alone. For example: “Focus on support for the elderly and vulnerable especially in areas of high antisocial behaviour and targeting of these groups” whilst providing “enhanced support for victims of abuse and hate crime”.
* **Easy to access** and **well promoted**: Raising awareness of the support offer, and providing an easy to access flexible service, was a repeated theme. Analysis of the Question 4 results (summarized in section 6.1.2) reveal that the survey respondents are critical of the promotion of VCAS, don’t know how to contact that service, and lack awareness of the range of support on offer. The demands presented in Question 6 are therefore not a surprise: “More visible service, more advertising and promotion so people know it’s available”, “Easy to contact; victim-centred; multiply ways to access service i.e. face to face, email, text“, “To know where to go and who to contact”
* A service that provided access to more counselling was identified by ten of the respondents who identified a need for: “More expert and specialist support like counselling and mediation”, “ongoing counselling to help get back to some sort of normality” and “counselling…someone on the end of the phone to just listen in a non-judgmental way”.

#### 6.1.4.2 Views on the police

In addition to these victim service suggestions a sizeable number of people took the opportunity to use this question to comment on the service they had received from the police.

17%, (n=34), expressed their views on the inadequacy of the criminal justice systems and sentencing (6%, n=12), and the need for more work to be done around changing the perpetrator and/or restorative justice (4%, n=7).

### 6.1.4 Contact with victim services

Finally respondents were asked: ‘Have you ever contacted VCAS, and if so can you tell us a little about your experiences?’

83% of those who answered this question had never contacted VCAS (n=252), with the remaining 17% (n = 51) providing more detail about their experience. 54 respondents left this question blank. Of the 51 people who had experienced VCAS support:

* just over half (n=27) explained how their experience had been positive. Comments include:
  + “My partner has used the services of VCAS. The staff showed empathy and tailor made their support to suit our issues. They were supportive and their advice and help certainly meant my partner recovered from the issues They were amazing and I was so grateful for their help and support”.
  + “Very supportive understood immediately my worries”.
  + “Incredibly supportive, understanding, and helpful. They really care, and will go above and beyond to meet a victim’s needs”.
  + “I felt supported. And I had a chance to understand the person who caused the damage”.
  + “As a Victim of an Assault in 2016, i know how valuable support is for victims”.

However not all respondents had positive experiences. A small number (n=8) gave responses that were negative, including:

* “It was very poor but a very long time ago”.
* “No support through the whole process”.
* “Never got called back - totally ignored”

## 6.2 Community organisation perspectives

Organisations and charities working with the underrepresented groups of interest were invited to provide their views on the victim support services in Cleveland, whether there are any gaps in the current service provision, and potential barriers to victim engagement. The aim was to give a better understanding of the support needs of victims and people affected by crime and to understand where efforts should be directed to better meet the needs of victims.

In-depth telephone or online interviews were undertaken with thirteen stakeholders from community organisations in May and June 2021. The organisations consulted include:

* A Way Oute UK
* Barnardos
* Breckon Hill Community Centre
* Essential Learning Curve
* Halo
* Hart Gables
* Hartlepool Chinese Association
* Hartlepool Deaf Centre
* Methodist Asylum Project
* NUR Fitness
* Terrence Higgins Trust
* The Regional Refugee Forum

The organisations work with a diverse range of vulnerable groups and groups with protected characteristics.

* Three organisations work with the LGBTQ+ community
* Six organisations work with people from BAME communities
* Two of these work predominantly, but not exclusively, with women
* Four work with refugees and asylum seekers
* Two work with children and adults who are at risk from sexual exploitation and sexual abuse
* One works with the Deaf community

An online focus group was undertaken in May 2021 with representatives supporting the refugee and asylum seeker community:

* Diversity Inside Us
* Creative Minds
* British Sri Lankan Community
* Individual activist in Hartlepool

### 6.2.1 Experience of Crime

All the stakeholders consulted said that some of the people they represent had been a victim of crime or ASB, and had come into contact with clients who had been the victim of:

* Anti-social behaviour
* Assault
* County Lines
* Domestic abuse
* Harassment
* Hate crimes
* Sexual assault / violence
* Stalking
* Theft
* Trafficking

#### 6.2.1.1 Crime in relation to specific communities

Interviewees were able to describe crimes that there specific to or which their community was vulnerable to.

Hate crime towards those perceived to be gender non-conforming appears was reported to be on the increase. One stakeholder described this form of hate crime as a “massive problem”. Another had seen an increase within the past year in the number of service users the service has supported in relation to gender non-conforming hate crime.

Some BAME groups reported issues around their community members having been victims of abuse, hate crime, trafficking and County Lines. Refugees and asylum-seekers reported having been the victims of racism, hate crime, and ASB.

Groups representing women reported that, for vulnerable and excluded women, sexual exploitation, sexual assault, assault, stalking, harassment, and theft are the prominent crimes committed against them. These women are often seen by perpetrators to be vulnerable thereby exacerbating the risk. Stakeholders reported that women from BAME communities are victims of a broad spectrum of crime types including, hate crime, ASB, extremism, domestic abuse, sexual violence and racism.

The representative from the Deaf community referred to research conducted by Dr Elizabeth Wakeland, 2019[[8]](#footnote-8) which highlighted that D/deaf people are more likely to be a victim of crime than hearing people. The Wakeland research highlighted that D/deaf people can be vulnerable to online scams, but the stakeholder herself has supported D/deaf people who have been victims of physical assault while also working hard during lockdown to increase awareness of cyber-crime to her clients.

It was difficult for many stakeholders to convey the true extent of victimisation amongst their groups as people do not always speak about, or report crimes to the organisation or the police. This issue is explored in more detail below in section 6.2.4.

### 6.2.3 Support provided by community organisations

Of some interest, a level of support was offered by all the organisations consulted despite the fact that none are victim specialist services. The package of support ranges from chats, guidance and advice at the informal level to more formally funded and individually tailored provision.

#### 6.2.3.1 Informal support provision

Informal support comprises chats, listening to people, giving clients the space to talk, or simply offering advice when asked. Informal provision lends itself to pastoral and emotional support within the community organisations.

Within this package of informal support, stakeholders said they frequently encourage victims to report crimes, explain the process of reporting and logical next steps as necessary to help expedite access to the criminal justice system.

Whilst not describing it as victim support services as such, one organisation provides focused and structured emotional support tailored to the individual.

#### 6.2.3.2 Formal support provision

Formal support provision provided by the organisations consulted includes workshops aimed at providing messages and tools on crime prevention measures, running cohesion events with the police enabling women to report crimes via an app, therapeutic work, and trauma informed support.

### 6.2.4 Under-reporting of crime among vulnerable groups

Stakeholders from each organisation were encouraged to explore whether members of their community report being the victim of crime to the police or otherwise seek to engage with the criminal justice system and victim services that are available.

According to the majority of community stakeholders consulted a large number of crimes experienced by members of their communities go unreported. For instance, one stakeholder working for a MBAE organisation estimated that 90% of crimes are not reported amongst the BAME communities she works with, whilst others believe that, “most” crimes go under reported.

The factors underpinning this lack of under-reporting are numerous and complex, however stakeholders were able to identify many of the factors, and offer some advice to overcoming these barriers.

A number of ley barriers to reporting crime amongst vulnerable groups are outlined below.

#### 6.2.4.1 Not recognising the crime

It was felt that some people do not recognise that they are a victim of crime. It was thought that this appears to be more prevalent among BAME communities.

One stakeholder explained how people have not experienced racism to the extent they do in the UK and some individuals do not, therefore understand, or interpret, the racist episodes they experienced as hate crimes. For others, these episodes of racism become normalised and acceptedand so are not reported.

It was felt that some people need help interpreting their victim experiences; if criminal activity is not recognised as such, these crimes will not be reported.

#### 6.2.4.2 Fear of not being believed or listened to

The fear of not being believed when reporting a crime was a widespread problem particularly amongst BAME communities and sex workers.

In relation to sex workers it was thought that they fear they may be judged and that people will conclude they ‘deserved it’ due to the nature of their work.

#### 6.2.4.3 Fear of prosecution or enforcement action

The fear of enforcement action being taken against them, prevents some people reporting crimes – that is, in approaching criminal justice agencies, victims will inadvertently find their own situation explored that may lead to action against them. Interviewees felt that this fear is particularly prevalent amongst sex workers, asylum-seekers and refugees.

Some crimes are not reported to the authorities due to a fear that it will impact negatively on visa applications or their asylum decision.

It was note by professionals working with refugees and asylum seekers that it can be difficult for people to recognise that the Home Office and the police are separate entities. People confuse the uniformed officials of the Border Force, Home Office and police and assume that they are one body. Therefore, if they have a bad experience with border control for example, they are less inclined to interact with the other uniformed departments.

This phenomenon was not limited to people newly arrived in the UK. A stakeholder from the Deaf community noticed this within the Deaf community where some people worry that they may be misunderstood when reporting crimes, and end up in trouble themselves.

#### 6.2.4.4 Mistrust in the system and police

Those working with people amongst people recently arriving into the UK thought that mistrust in policing was a significant issue – particularly where they come from a country where the police are not widely trusted by the community. They may make assumptions about the behaviour of police officers and they fear a similar experience within the British justice system.

Many within the refugee and asylum seeker community also noted that members of the community do not report crimes as they feel no action is taken by the authorities once the report has been filed. There is a consensus among refugees and asylum seekers that nothing is done about the crimes, the police fail to respond to the report, and reporting crime is therefore a waste of time. One stakeholder estimated that this is the reason why 60% to 70% of crimes are not reported by the people she works with.

One respondent explained how she works with individuals to help them understand the process - what the police can or cannot do in that moment and that if people work with the police and keep logging what is happening to them, the police can build up a picture to potentially respond to at a later date.

Some within the LGBTQ+ community noted that members of their community also mistrust the police and the reporting system. One stakeholder explained that, as it appears that many reported crimes do not make it to the threshold to be investigated, a lack of trust in the system ensues and people are left wondering why they should report crimes

#### 6.2.4.5 Coercive control/fear of perpetrator

The situation some people are in leaves them little room to report crimes. One stakeholder explained how women may be sexually exploited by one or more organised groups, or they may be being groomed or coercively controlled – these individuals have little space to report these crimes through fear of those controlling them.

#### 6.2.4.6 Personal / family reasons

It was reported that, for some in the LGBTQ+ community, family pressures can prevent crimes being reported. Some members of the community report feeling that they may be disowned by their family if certain information becomes known to them, or they worry they may be bullied by their family if they disclose being the victim of some crimes. The desire to also protect families and those around them, prevent some people from reporting crimes to the police.

#### 6.2.4.7 Cultural issues

Cultural issues can prevent reporting a crime where, in some cultures, it may be considered a sign of weakness to talk about being a victim.

Lack of knowledge and understanding of cultural issues by services, and the way people are treated when they report a crime, was thought to be integral to under-reporting of crime amongst BAME communities. In the case of harmful domestic abuse for example, safeguarding issues may not be considered by the services – the risk involved to the individual of reporting this crime are sometimes not accounted for which results in negative experiences for victims after the crime is reported. They will therefore not report future crimes given previous negative experiences.

#### 6.2.4.8 Confidentiality concerns

Whilst relevant to many of the under-represented groups consulted, not understanding the law and the data protection act are considered to be a reason why some in the BAME community do not report crimes. They do not understand that the professionals they speak to, even professionals within the same community as them, cannot talk to others in their community and reveal the content of their discussions.

#### 6.2.4.9 Language barriers

Language can prevent some from reporting a crime – if people do not speak English they may simply not know how to report an incident.

Access to language is also a very important determinant to whether deaf people report crime in the first instance, and whether the crime is reported correctly/sufficiently. The stakeholder explained how deaf people can be concerned whether the professionals they are reporting to are deaf aware and how lack of deaf awareness amongst professionals will impact on whether or how the crime is reported.

### 6.2.5 Referral pathways

Community organisations were asked to explore about making referrals for victims of crime onto specialist and other services.

#### 6.2.5.1 Where community organisations refer to

The majority of the third sector organisations consulted refer clients onto further support services where a higher level of, or more specialist support, is needed. The community organisations referred into included:

* Cleveland Police
* VCAS
* Mind
* Citizen Advice
* Community Safety Partnerships
* Harbour
* My Sisters Place
* Safeguarding officer in education authority
* Safety planning support
* Sexual Assault Referral Centre
* Social care

#### 6.2.5.2 Referral system overhaul

Whist recognising that referral pathways are in place that provide victims with access to specialist and dedicated support, there was a consensus amongst the organisations who regularly refer into specialist services that the whole referral system needs redesigning. A ‘system overhaul’ which focuses on improving the victim recovery journey is needed and one that addresses how the system is better managed from the perspective of the victim. Stakeholders identified three main areas for referral system redesign:

Person led referral process

Referral pathways must be person centred. Within the current set-up an individual, having been referred onto several support providers, becomes embroiled in a complex process which they can find difficult to navigate. How the victim is referred into a support services will directly impact on their perceptions of that service.

If victims are not driving the referral process they will not engage as it can feel like power and control has been taken away from them, and that the process is happening to them and not with them. The referral process must be made alongside and with the approval of the victim.

Enabling individuals to decide how they want to prioritise their recovery and to decide which services to access will increase engagement. Victims should only be referred into services if they both need and want that specialist approach. They should not be referred simply to tick a box if they are not ready for, or do not want that specialist support.

Consistent referral structure

There is a need to streamline the referral process so that there is a consistent referral structure in place. Currently, “everyone operates on different procedures,” and stakeholders report that they find that the procedures often change. Thus one representative explained how she embarks on a time consuming process of phoning and phoning until she reaches the correct person. However, she sometimes finds that particularly within the voluntary sector, the funding has ended, the project is no longer operating and thus the referral is no longer appropriate.

Another stakeholder commented that as the referral processes keep changing she just picks up the phone and speaks to the service provider rather than filling in forms.

Barriers within the referral process

The complicated nature of the funding means that the associated barriers are not helpful in the referral process. For example, living in the wrong place, or not meeting the criteria for support, presents barriers for victims who may end up accessing ‘best fit’ services rather than ensuring best engagement and specialist support is given.

### 6.2.6 The support needs of victims of crime

Throughout the interviews with stakeholders a number of common support needs were identified. These are explored below.

#### 6.2.6.1 Person-led services

It was stated that victims need supportive services which focus on them as an individual and the way in which they would like to deal with the situation. Victims want to be offered choices in their recovery journey and to feel empowered in the process, not led by the process.

A person-centred approach would accommodate the fact that reporting crime is not always what the victim wants – victims are not always driven by the need for a successful prosecution. Services must acknowledge and provide for this and address other needs that the individual has rather than focussing on criminal justice outcomes.

#### 6.2.6.2 Whole systems approach/consistent advocate

It was emphasised that the victim’s journey should be a smooth process: they should not have to talk to six different people and relive their story again and again which can lead to service disengagement.

Stakeholders said that the system should focus on building trusted relationships, and supporting those relationships. The need for a consistent advocate with whom victims have built up a relationship who help victims navigate their way through the complexity of multiple providers was emphasised.

Victims need advocates to help them access the correct support, and to stay with them until the right support is realised. The advocate should help victims attend appointments with other support providers, as a means to maintaining engagement.

#### 6.2.6.3 Fast access to services

Stakeholders noted that victim services must be able to provide timely support to victims and have the capacity to action the referrals made into the service. Victims do not want to be told that they have been added to a three month waiting list; rather they often expect and need immediate attention.

One interviewee noted that it can be damaging to both victims recovery and perception of the system when, as one victim explained, the perpetrator was able to access services before her.

#### 6.2.6.4 Better signposting

Victims understand that not all services will be right for them or be able to address their specific needs. However, it was agreed that victims need effective signposting from those they initially contact for support. One victim described how she was, “passed from pillar to post,” as she was continually signposted to agencies that were not the right one for her needs or simply told services could not help her. Victims need to be referred to the right service for them. They do not want to access a service (possibly after a lengthy wait) to be told that they do not meet the criteria for their support.

#### 6.2.6.5 Professionals to better understanding the indicators

It was felt that victims of exploitation do not always recognise that they are a victim – it can sometimes take people years to recognise the control they are under. The onus therefore cannot and should not be on people to recognise and report such crimes. Instead there is a need for better understanding and raised awareness of the indicators of such crimes amongst professionals.

One stakeholder said that, in terms of sexual exploitation, girls are spotted more easily, and people feel more comfortable identifying girls at risk. The behaviours that can alert to boys being sexually exploited are not well understood by professionals and there is a need therefore to raise awareness of these indicators amongst professionals.

If victims of exploitation can be picked up quicker, and the appropriate referrals made, this would lead to better outcomes.

#### 6.2.6.6 Diverse representation

A recurring theme when consulting with the community representatives was the need for more diverse representation within support services.

Victims need to know that the people supporting them understand their issues and have an in-depth knowledge of cultural, community, and local issues that impact them as an individual. Whilst recognising that full representation is probably unlikely, victims must feel that the providers know the problems and concerns of their community. Victims would feel more comfortable reporting a crime and engaging with the services if there is a person from the community representing the community.

Ensuring diverse representation also extends to the police where victims are keen to see more representation amongst the staff; one stakeholder considered it especially important for instance that people with hearing loss are represented within the police force.

One stakeholder said that the victim services needs to have a public facing Inclusion and Diversity officer who must be known in the community to reach out and ensure support. An Inclusion and Diversity officer would ensure the services are more aware about issues within the LGBTQ+ community and be better informed and confident in using the correct terminology which would help to better engage with victims from the LGBTQ+ community.

#### 6.2.6.7 Guidance and education regarding the criminal justice process

Many victims need to understand the criminal justice process. Stakeholders agreed that there is a lot of misunderstanding around the process of reporting crime and how the judicial system works which prevents many from reporting crimes. It was therefore felt that victim services should provide information that explains, in appropriate ways, how the criminal process works and that this information should be disseminated to communities.

Moreover it was noted that communities need to be reassured by the police and victim service that it is worth reporting crimes.

Referring to a point made above, it is also essential that dissemination of information about the criminal justice system should include the message to victims that reporting a crime and/or accessing support services will not impact their asylum process or visa applications.

People also need to understand at what point they can reach out and access the services. One representative explained how a series of micro aggressions can accumulate to something deeper so people need to know at what point they can access support before the situation overwhelms them.

#### 6.2.6.8 Improved communication

Communication between police and victim services and victims was felt to be critical.

Specific points of communication noted included when a perpetrator is found not guilty, victims need clarification around why a not guilty verdict was given and to understand what transpired.

Similarly, victims need a full explanation in the case of a no further action response from the police. This is especially important for children who may not understand why they made the disclosure and the dramatic consequences of this. If children are then told that there is no further action they do not understand why the people who did something bad have not been punished and think they have not been believed and they need to understand why.

Given the diverse communities in Cleveland, victims need to receive information in their priority language. It was noted that provision should include communicating with people using British Sign Language (BSL) as well as community languages for those whom English is not spoken.

#### 6.2.6.9 Community promotion of victim support services

It was stressed that community organisations could be used to promote victim services given their reach into various communities. However, aligned to the point above, such communication needs to be done through use of different community languages.

It is essential that services take into account that, if people cannot read or write their own language, it is unlikely they can read or write English. Translating leaflets and so forth into English is not therefore always the answer to disseminating information within communities.

Other interviewees felt that videos translated into appropriate languages and appropriate dialects within those languages would open up awareness and access for some victims. It was suggested that the videos frequently put out by the police on social media need to make provision for a wider audience. Victims using BSL would welcome subtitles on these videos as a quick and efficient way of disseminating information to this community.

#### 6.2.6.10 Reassurances around confidentiality and anonymity

There is a fear of reprisal following the reporting of a crime. Victims need assurances around anonymity and that the perpetrator will not be made aware of who has made the allegation. One victim explained how she was surprised when the police phoned her and used her name despite requesting anonymity. Further education around how the process works, around anonymity, confidentiality and the data protection act would go a long way to helping more people feel confident to report crimes.

# Gaps in provision

Professional stakeholders were asked to explore whether gaps exist in current services for victims. The results are set out below thematically.

## 7.1 Thematic analysis of gaps

### 7.1.1. VCAS

There was a consensus among those interviewed that VCAS has improved the victim support service in comparison with the previous service which was largely office-based and a signposting service. Feedback on the range of services, responsiveness, performance, and outcomes has been continually positive. However, there were some areas of concern which the needs assessment has highlighted.

VCAS has expanded to provide a wide range of services and support with limited staffing levels. Interviewees tended to note that VCAS has a “can do” and “want to develop further” approach which, is to be applauded, and there are desires amongst other services also for them to do more (e.g. further expansion resulting from the control room pilot). It was felt however that, within its current resources, VCAS is at or near full capacity and it would be unfortunate if its current high levels of performance were impacted due to taking on too much without the necessary resources.

Moving forward and maintaining the levels of performance has been dependent on the working relationship of key individuals within organisations, such as the police and VCAS management. This is to be applauded but raises concerns if these key personnel were not in place.

### 7.1.2 Duplication in provision

It was noted that there is a degree of potential duplication in relation to the provision of some victim services and that work was being carried out by VCAS that could be passed on to other organisations. It was noted that VCAS could signpost some clients to other services thereby freeing up their capacity. One example raised was in relation to Brake, a national charity for the seriously injured and relatives of the deceased following a road traffic accident. Brake is one of the services that VCAS can (and do) signpost victims onto but Brake noted that they receive a lower level of referrals than they would expect from the Cleveland area compared to other police force areas. If VCAS were to signpost appropriate referrals directly to Brake it would free up system capacity.

### 7.1.3 Preventative work

A number of stakeholders felt that there is scope for more focus on work around prevention. It was noted that VCAS have provided awareness sessions (such as work with Action Fraud and drop in sessions for example) but that there was scope to extend this preventative work and to deliver more. Similarly, all the domestic violence providers stated that they would like to participate more in prevention work in the community to identify and offer support to prevent further escalation of needs before they become acute. They noted however that they have neither the funding nor the capacity to undertake this at the current time. This is explored more below.

Stakeholders noted that, within the current system, there is potential for lower impact incidents to be missed or not addressed due in part to the deficit in prevention work and the focus on having to deal with higher risk incidents. It was therefore noted that cases that potentially could have been addressed before they became acute.

It was felt by some interviewees that there is scope for more involvement of NHS services and more participation in prevention work. Equally victim services said that they were keen to have their services publicised to a greater extent in health settings.

### 7.1.4 Domestic abuse preventative work

Domestic abuse providers feel that there is a lot more that could be done regarding prevention. A lot of the work undertaken by the charities is at the crisis stage. They feel that they are currently set up to be ‘reactive’ services and would like to undertake more community based preventative work to avoid cases becoming acute. Unfortunately they do not have enough resources or operational capacity to undertake this role.

### 7.1.5 Domestic abuse commissioning

A number of stakeholder felt that the current landscape of domestic abuse provision is highly fragmented. Providers noted that governance and domestic abuse meetings are based on local authority boundaries rather than pan-Cleveland. Each local authority also has its own reporting structure which can present operational issues. This means that there is not a consistency of provision across the area.

A number of stakeholders therefore indicated that there needs to be a more coordinated domestic abuse commissioning strategy for the whole of the Cleveland PCC area which should include more emphasis on prevention.

Providers noted that statutory authority funding can be short term in nature and that they therefore have to spend a lot of time searching for additional funding. Providers stated that they have to regularly supplement any statutory funding they receive with their own fundraising. They regularly bid for relatively small funding streams. This all detracts from capacity for service delivery and makes staff retention that more difficult. The myriad sources of funding and differing commissioners of that funding often brings with it a further mix of reporting requirements.

The ‘myriad’ of contracts and funding often brings with it varied and numerous reporting requirements. These can be disproportionate compared with the value of contracts. It was felt that this issue is particularly pronounced among statutory organisations. All this also takes time away from service provision and makes staff retention more difficult.

Each domestic abuse provider and VCAS were asked their views as to whether there should be an integrated domestic abuse/victim support service model in place. There was unanimously no local appetite for this model to be progressed.

Support for domestic abuse victims was seen as a specialist area which required staff to be in post who were highly trained and experienced providing bespoke services. It was felt that these specialisms would be in danger of being dissipated if an integrated model was to be adopted. Also, they did not see any resulting benefits in any increases in system capacity. The domestic abuse providers’ caseload was already high and it was felt that more tangible improvements would result from greater investment in prevention initiatives/strategies.

VCAS also considered that they did not have the skills and expertise required to provide a domestic abuse service. Like the domestic abuse providers their existing caseloads were already high and there clearly is already an understanding that there is demand and scope for more of their services within Cleveland.

The interviews undertaken highlighted that there was little direct contact between the domestic abuse providers and VCAS, but there was scope for this to be improved upon. For instance, VCAS would and could on occasions be needed to provide more generic support to a domestic abused victim (e.g. home security equipment, fraud avoidance advice) that would not impinge on the domestic abuse providers’ support. VCAS may want to appoint a domestic abuse lead from within their staff who can be the single point of contact for the domestic abuse providers.

### 7.1.6 ‘Evolution’ of crime

A number of those interviewed felt that victim services needs to take better account of the changing nature of crime. In particular stakeholders referenced the large increase in fraud and cyber-crime.

We note that VCAS have attempted to address this and the specialist police units were very complimentary about their input. It remains the case however that wider stakeholders feel that the response to victims of cyber-crime represents a gap in current provision.

### 7.1.7 Local authority provision

The local authority boroughs can have differing ways of working which can cause difficulty for services working across boundaries. There does not appear to be a lot of co-ordination between individual borough community safety teams.

### 7.1.8 Domestic abuse referral pathways

All the domestic abuse charities interviewed raised the issue of the police paperwork provided when a referral is made. All mentioned that the referral appeared to be an internal police document which contained a lot of information that was not required, was sometimes incomplete and difficult to find the information that they needed. It was also difficult at times to track down the police officer who had completed the referral. This resulted in the charities spending a lot of time chasing for missing information, understanding what they have been provided with and obtaining the information that they need.

In contrast, domestic abuse providers noted that other organisations will use the services own referral forms

Domestic abuse providers also noted a number of inappropriate referrals from the police as they tend to classify the need to refer on the actual incident rather than the victim’s needs. As such it was felt that some of the referrals they receive could be dealt with differently rather than automatically referring to a domestic abuse service. Some police referrals do not follow the Home Office definition of domestic abuse. They may, for example refer a one-off dispute which may have mental health causes as domestic abuse, which results in a referral.

### 7.1.9 Awareness of domestic abuse provision

Domestic abuse services all consider that there is a need to raise awareness of their services in general health settings, such as GP surgeries and hospitals. This would be seen as both raising awareness of the services available as well as helping with prevention.

### 7.1.10 Capacity of domestic abuse provision

There are clearly capacity issues for the services provided by the domestic abuse charities, particularly with regard to IDVA and counselling support. They also do not have any significant capacity to undertake any meaningful prevention work in the community, highlighted the impact resulting from lack of guaranteed funding and longer term contracts.

### 7.1.11 Support for low level mental health conditions

A number of stakeholders noted that many victims of crime would benefit from accessing lower level mental support. However it was also noted that capacity is an issue – that is, there is not sufficient support available locally to meet the demand for these services. Counselling capacity was said by a number of providers to be inadequate and current services have to operate waiting lists, which is not ideal. Furthermore Covid has impacted by creating a backlog of cases resulting in care packages taking longer, impacting on caseload capacity.

It was also noted that the thresholds for IAPT and CAMHS act as a bar to victims accessing services - that is, the mental health needs of victims are not sufficiently acute to enable them to access these services.

### 7.1.12 Restorative Justice

Restorative Justice services reported that their caseloads are predominantly white British. They suggested that further work is required to ascertain how the service engagement with other cultural groups can be increased.

# Best practice

This section provides examples of a range of models for victim service provisionwith particular interest in models that adopt co-located and partnership approaches. Some examples of best practice are also set out in relation to specific groups of victims (including children and young people and victims of hate crime).

## 8.1 Voice Northamptonshire

Voice in Northamptonshire is a hub for victims’ services which opened in 2016.

Voice offers a free, confidential support service for anyone ‘affected by crime, life-changing fire incidents, or serious road traffic collisions’ in Northamptonshire. Their services are available to ‘anyone of any age’ living in Northamptonshire, whether a crime has been reported to police or not, and regardless of when (or where) it happened. No referral is needed and individuals can contact the service directly. Voice occupies independent premises which are located near to the Northamptonshire Rape Crisis office.

The team comprises over 40 full-time staff and volunteers. They offer general, emotional and practical support for all victims and witnesses, as well as specialist support for victims of sexual violence and domestic abuse. All services are available under one roof, meaning victims can get the right support quickly, easily and in one place. Voice also has specially trained and experienced staff who work with children and young people of all ages to help them recover from crime.

Staff speak to individuals on the phone, via video-call and in person to help them ‘cope, recover and thrive.’  They also link with partner agencies from across the county to ensure that every person is assisted in the most effective way and is supported throughout their experience. Support from Voice is not time-limited and the staff work with victims for as long as they need it.

In the past 12 months, staff and volunteers have supported more than 15,000 people of all ages and backgrounds from across Northamptonshire. This includes those who have directly experienced crime as well as people who have had to deal with witnessing crime and going to court as a result. They have also helped friends and families of victims of crime, who have been affected by what happened to their loved ones. Every year, Voice states that it:

* takes part in over 20,000 phone calls – an average of 55 a day
* meets with around 1,200 victims face to face

Voice states it can provide ‘a safe, neutral place for you to voice your fears, worries and emotions’.

### 8.1.1 Examples of Voice’s work

#### 8.1.1.1 Anti-social Behaviour – assisting a family

A family was suffering from repeated anti-social behaviour from neighbours, which was affecting their happiness at home. Voice understood that the anti-social behaviour often seemed like minor incidents and occurrences, but they were having a profound and serious effect on the individuals’ happiness and mental and physical health.

* Voice liaised with the police to provide the family with CCTV for their property so that any incidents could be captured on camera and used as evidence.
* Voice provided emotional support to the adult family members who were stressed and anxious about the anti-social behaviour that they were being subjected to.
* Voice liaised with other agencies. The staff spoke with both the police and the anti-social behaviour officer to help create a co-ordinated approach to the problem. The inter-agency work between Voice, the police and the local authority ensured that the family were listened to, supported and provided with practical ways to prevent further anti- social behaviour from happening to them.

#### 8.1.1.2 Burglary – supporting a 24-year-old female

Voice helped a 24-year-old female to cope and recover from the trauma of a burglary. The offenders had smashed the back door window to gain access and stolen jewellery during the break-in. Having seen her bedroom following the break-in, in which her personal belongings had been ransacked, she was struggling to sleep and not feeling safe at home describing feeling violated by the crime. The victim requested face to face support from Voice at a location close to her home address. She received support over a two- month period**.**

#### 8.1.1.3 Assault – helping a resident who was assaulted outside the Northamptonshire area

A Northamptonshire woman was assaulted while in a neighbouring county.

Voice gave the woman emotional support to help her recover from the assault and to feel better after the scary incident. It became clear to a member of staff at Voice that the woman was confused about the incident and this was impacting her ability to recover. As she was unsure about what was happening with the investigation, Voice liaised with Bedfordshire Police to ensure the woman was kept fully informed with the criminal proceedings. As a result the woman felt much more comfortable with everything that was happening in the investigation and was therefore able to recover more quickly.

#### 8.1.1.4 Burglary – supporting an elderly male

Voice allocated a specialist support worker when an elderly man had his house broken into.

Burglars smashed the glass of a rear patio door before stealing a safe, jewellery, and the owner’s vehicle, which was parked on the driveway.

Many of the items taken were of significant sentimental value to the victim, as they had belonged to his late wife. Voice made contact with the victim within 24 hours of receipt of a referral from Northamptonshire Police, where the victim had asked for ongoing emotional telephone support.

The victim was allocated a specialist support worker and was encouraged to talk freely and confidentially about the impact of the crime and his feelings. He was also offered advice on safety and home security and provided with free safety products for use at home. The case was closed following a number of telephone support sessions and the victim reported improved feelings of safety, health, wellbeing and support and was better able to cope with the trauma of the event.

#### 8.1.1.5 Domestic Abuse – helping an elderly victim

Voice was contacted by a mental health nurse who was supporting an elderly woman who had suffered 30 years of domestic abuse, was experiencing physical and mental health problems and who had presented as suicidal. Voice carried out a telephone needs assessment which revealed that the woman was extremely distressed, wanted to leave her husband but was terrified and isolated with no friends or family to reach out to.

A member of staff spent a number of sessions listening to the woman and gradually worked with her in seeking help from domestic abuse charities Eve and Women’s Aid to find temporary accommodation in a refuge. Eventually she obtained bed and breakfast accommodation and was accompanied to her former home to collect clothing and belongings. Voice staff kept in touch regularly with the woman to check on her, to see how she was coping in her new accommodation and how she was feeling. They also spoke regularly with other agencies for many weeks to ensure that she was supported at all times. In time the woman started to build a new life for herself.

#### 8.1.1.6 Childhood Sexual Abuse – support for a historical case

Voice supported a woman who had suffered historical childhood sexual abuse by a family member 40 years ago.

After the case was referred to the Crown Court for trial, Voice contacted the victim to explain the role and the process. After discussing the woman’s concerns, it was agreed that the Witness Care worker would keep the victim updated throughout the process. This involved letting the woman and her family know about any court appearances so that they could attend if they wanted to. Once the trial date was set it was also arranged for the woman to make a pre-court visit so that when she appeared in court she was already familiar with the room and the proceedings. Voice also provided emotional support speaking with the woman regularly in the run up to the trial to make sure she was coping with her thoughts and feelings and had a supportive person to talk to.

The defendant was found guilty on six counts of indecent assault and was sentenced to seven years in prison.

## 8.2 Cambridgeshire Victim and Witness Hub

The Cambridgeshire Victim and Witness Hub is a free service which supports victims, witnesses, bereaved relatives, parents or guardians of victims under 18 years of age and employees of a business where it has been a victim of crime. Anyone living in Cambridgeshire who has been affected by a crime is eligible to access the Victim and Witness Hub services.

The Victim and Witness Hub co-locates mental health nurses, IDVAs, domestic abuse outreach workers, staff from the court-based witness service, a specialist support worker for young people, restorative justice co-ordinators and a team of community volunteers.

Individuals who are supported include:

* victims of crime, whether they wish to report the crime to the police or not
* victims or witnesses attending court.

People do not have to have reported a crime to the police to access this support.

While the Victim and Witness Hub supports all victims of crime, it prioritises those who are entitled to support under the Code of Practice for Victims of Crime.

The Hub also accepts self-referrals. Self-referrals are available to anyone who has been a victim of crime regardless of whether the crime has been reported or when it occurred.

### 8.2.1 Staffing

The Victim and Witness Hub is based in Peterborough and is made up of:

* A Head of Department
* Two Victim and Witness Care Delivery Managers
* Twenty trained Victim and Witness Care Officers (a number of whom act as champions for specific types of crime, such as hate crime)
* Three Business Support Officers
* A team of 9 trained community-based volunteers
* A specialist Victim and Witness Care Coordinator for Restorative Justice
* A specialist Victim and Witness Care Coordinator for migrant victims of exploitation

The Victim and Witness Hub is supported by a number of commissioned services to assist in providing the best support for victims and witnesses. The Hub also has access to victim pathfinders including, a Community Psychiatric Nurse, and a specialist Victim and Witness Care Coordinator which provides quick access to specialist support for the most vulnerable victims.

The Victim and Witness Hub offers:

* personalized help including emotional and practical support from Victim and Witness Care Co-ordinators
* Practical advice and guidance from Victim and Witness Care Co-ordinators via the telephone
* Access to specially trained Victim and Witness Hub Community Volunteers, both face-to-face and on the telephone
* Support to access existing services provided by partners, voluntary and community organisations including The Bobby Scheme and mental health care providers
* Referral to additional relevant external organisations
* Referral to the court-based Witness Service who provide free and independent support for victims and witnesses attending court.

If an individual reports a crime to the Victim and Witness Hub they will be asked questions to find out how they have been affected by it. This might include information about an individual’s personal circumstances to see if any extra or particular support might be needed.

The Hub emphasises that the after-effects of crime are not just emotional and individuals may need help dealing with practical issues such as arranging to secure or repair a broken window; understanding the criminal process or preparing for courts and trial.

### **8.2.2** [**Victim and Witness Care Coordinator**](https://www.cambs.police.uk/information-and-services/Victims-and-Witnesses/Hub-staff)s

End-to-end support I provided through the Hub’s Victim and Witness Care Co-ordinators. One victim of assault reported: ‘It has been really good to have one point of contact for the victim care side of things and the court updates. Previously I had so many different people it was hard to keep track of everything. Being able to speak to a single contact who can provide not just practical support but emotional support was priceless. It had a very positive impact on me and certainly set me on my way to getting my life back on track.’

Following an enquiry, a victim or witness receives a letter or phone call from a [skilled Victim and Witness Care Coordinator](https://www.cambs.police.uk/information-and-services/Victims-and-Witnesses/Hub-staff) offering support. [Victim and Witness Care Coordinator](https://www.cambs.police.uk/information-and-services/Victims-and-Witnesses/Hub-staff)s then work with individuals to assess their needs and develop a plan to help them cope and recover from the effects of crime. They act as the individual’s single point of contact, should they need them. This support is also available to victims who do not wish to report a crime.

### 8.2.3 Liaison and work with specialist services

The hub works with a range of specialist organisations. Victim and Witness Care Coordinators can refer individuals to these services or give them information about more specialist support organisations that they can contact in their own time.

### 8.2.4 Young victims of crime

A specialist victim care coordinator is available in the Victim and Witness Hub to help young victims of crime and their families. If an offender is under 18 years of age, a victim may be contacted by the local Youth Offending Team about taking part in community resolution.

### 8.2.5 Victim and offender solution model

Victim and offender solution is a 'community remedy' which allows a victim of crime to think of a way for the offender to make amends. The request must be fair and the offender must agree to do it. Community remedy is usually for low-level crime and replaces the need for formal action if the offender agrees to carry out the requested task. Examples of where it can be used include:

* theft (under £50 and not theft from vehicles)
* criminal damage (under £100)
* common assault (not domestic) and Section 5 Public Order Act Offences

Community remedy cannot be used where the victim is vulnerable due to age, mental health or being targeted; where the offender has previously been arrested, carried out community resolution, been convicted and/or been handed a caution, conditional caution, reprimand, final warning or youth conditional caution or where the offender does not admit to the offence or shows no remorse.

Victims are advised by the Victim and Witness Hub whether community remedy could be an option for them.

### 8.2.6 Domestic abuse

There are a number of different specialist domestic abuse support options available in Cambridgeshire. The Victim and Witness Hub provide independent professional advice on getting the right support first time round. There is also a support directory which provides a list of organisations, the type of support they offer and how to contact them.

### 8.2.7 Children and young people

The Victim and Witness Hub is supported by a specialist children and young people's advocate who supports young victims of crime and their families to access specialist emotional and practical support. This could be bullying, victims of hate crime or online crime.

### 8.2.8 Victim and Witness Hub and the Bobby Scheme

Practical and emotional support is available to help victims of burglary which can be accessed through the Victim and Witness Hub who refer on to more specialist services such as the Bobby Scheme.

#### 8.2.8.1 The Bobby Scheme

The Cambridgeshire Police Shrievalty Trust is a registered charity formed in 1999 to improve community safety in Cambridgeshire and Peterborough. The Bobby Scheme was established in 2001 by the Cambridgeshire Police Shrievalty Trust.

The Bobby Scheme is a crime reduction programme which aims to help victims overcome the shock of crime and restore self – confidence, health and wellbeing. It also seeks to reduce crime and fear of crime of older, vulnerable and disabled people across Cambridgeshire and Peterborough, thereby improving their quality of life, increased independence and safety.

The Bobby Scheme fits security devices, alarms and gives expert advice on securing people’s home and staying safe. The scheme works alongside Cambridgeshire Constabulary officers to provide free and immediate help for burglary victims who are elderly, disabled or at risk of domestic abuse. For a small charge, the charity also offers security assessments to those who haven’t been a victim of crime to reassure them and help prevent them from falling victim to burglary in the future.

The Bobby Scheme helps around 50 people a week affected by burglary, theft or domestic abuse to remain in their home to recover from the trauma and take control of their lives again. The service is run by a highly experienced police-vetted and DBS-checked team and is free to victims over 60 and to all victims of domestic violence. The staff are also trained to advise, give guidance and signpost to other agencies.

The Scheme operates throughout Cambridgeshire and Peterborough and has significantly reduced the repeat victimisation rate of the people it has visited. The repeat victimisation rate in the area is less than 1%.

## 8.3 Nottinghamshire Victim CARE

Nottinghamshire Victim CARE was commissioned by the Nottinghamshire PCCin 2017 to support victims of crime across Nottinghamshire. The Nottinghamshire Victim CARE service is delivered by Catch 22. Nottinghamshire Victim CARE provide support for all victims of any crime, apart from those who have experienced domestic or sexual abuse and can offer support for all ages. Referrals can be made by police, professional agencies or by getting in contact with them directly.

### 8.3.1 Victim CARE Caseworkers

Trained caseworkers deliver one-to-one support, either over the phone or face to face. The service is tailored to individual needs and is based on active listening and includes:

* Emotional support
* Advocacy with other agencies
* Advice on target hardening and general crime prevention
* Practical support and advice
* Restorative Justice
* Support applying to CICA

### 8.3.2 The Community Points model

Consultation with victims with protected characteristics in Nottinghamshire revealed that they typically didn’t report crime to the police or access mainstream support services, and instead sought support from trusted community organisations. This led to the development of the Community Points model.

Community Points are local organisations who help local people and who can also provide extra help to victims of crime. Community Points are quality assured by Nottinghamshire Victim CARE to help victims.

Community Points organisations can help people identify if they would benefit from support, discuss what kind of support they could access, signpost them to other supporting agencies or refer them to a Victim CARE Caseworker. Through their close relationship with Nottinghamshire Victim CARE, Community Points can also offer access to target hardening items, such as personal alarms or window alarms.

Since 2017, Nottinghamshire Victim CARE has engaged with over 100 local organisations making them aware of the Community Point programme. By the end of April 2019 there were 32 accepted Community Point organisations across Nottingham City and county boroughs and districts.

### 8.3.3 Victim CARE Training for other organisations

Nottinghamshire Victim CARE provide local organisations with training and quality assurance so they can support victims who don’t want to access mainstream services, and signpost them towards the specialist help available.

## 8.4 Victims First Northumbria

Victims First Northumbria is a victim referral service set up in 2015. It offers free, confidential support and advice for anyone affected by crime living in the Tyne and Wear or Northumberland area, whether or not, the crime has been reported to the police or not.

Victims First Northumbria aims to create a Northumbria area where victims of crime feel confident to seek help and are provided with a choice of support tailored to meet individual needs.

Thesupport is initially by telephone from one of the trained Victim Care Co-ordinators, who work with individuals to create a ‘cope and recovery plan’ that might include emotional support from a volunteer, practical support or advice, referral to specialist services and support through any associated court case.

It is estimated that Victims First Northumbria provides support to over 22,000 people, every year.

### 8.4.1 Victims First Northumbria: One stop Shop

Victims First Northumbria provides a one-stop-shop for victims where they receive updates on their case, co-ordination of victim care, options for restorative justice and support going to court and throughout the process. They are also established referral pathways to local specialist services such as Independent Sexual Violence Advisors. The joint police/ CPS Witness Care Unit and restorative justice specialists are co-located.

A victim of crime can refer themselves to Victims First Northumbria. Referrals can also be made through call-handlers and front-line police officers or a third party if they have the victim’s consent.

All support is free, confidential and independent.

### 8.4.2 Victims First Northumbria Co-ordinators

Victims First Northumbria have a dedicated team of Victim Care Co-ordinators who are all trained in supporting victims of crime based on their individual needs. They provide practical and emotional support, to support through court and beyond, access to restorative choice and options and anything else to help empower victims to cope, recover and move on.

When a referral is received, a Victims First Northumbria Co-ordinator makes contact with the victim via their preferred method of contact: phone (from a withheld number) text, email or letter. A face -to-face meeting may also be possible following initial contact. VFN work with the victim to create a Personal Recovery Plan.

### 8.4.3 Specialist staff

Victims First Northumbriahave staff who are trained in the following specialist areas:

#### 8.4.3.1 Domestic Abuse

There is a Domestic Violence champion who provides support to victims of domestic violence. They have established close links with other specialist Domestic Violence services.

#### 8.4.3.2 Hate Crime

The Hate Crime champion has experience of dealing with clients who have experienced hate crime and with the families of these victims.  The issues surrounding communities susceptible to hate crime are often complex and the champion aims to provide support and direct victims to appropriate and experienced support services.

#### 8.4.3.3 Children and Young People

The champion for children and young people focuses on victims of crime under the age of 18, including communication with their families/carers. They provide individual support and outreach sessions in the local community including schools and colleges.

#### 8.4.3.4 Stalking & Harassment

The stalking and harassment champion works on developing support for victims, looking at new ways to improve preventative measures and support the options available to victims.

#### 8.4.3.5 ISVAs

Victims First Northumbria have three ISVAS who are all trained to support victims of serious sexual assaults and rape. There is also a member of staff who is trained as a Children’s Independent Sexual Violence Advisor.

The Sexual Violence Champion role focuses on supporting individuals who have experienced sexual violence/abuse at any stage in their life. Support is individually tailored to provide practical and emotional support to empower victims to cope and recover from their experiences. Independent Sexual Violence Advisors liaise with key partners to provide essential support to sexual violence victims.

#### 8.4.3.6 Mental Health

One of the Volunteer Co-ordinators has trained as a mental health first aider through St Johns Ambulance, and supports staff on mental health issues that arise.

### 8.4.4 Victims First Northumbria Volunteer Advocates

Victims First Northumbria have trained volunteer advocates who also offer support. They:

* provide support via telephone and have face to face engagement with victims of crime – in their own home or in an agreed location.
* are a listening ear and provide emotional support and care, based on the individual needs of victims.
* liaise with Victims First Coordinators to ensure the right support services are in place and provide updates regarding information shared, support provided and outcomes achieved.
* provide support ranging from one-off contact to support through the whole criminal justice system and beyond.
* develop knowledge of local and national services, utilizing and contributing new organisations to the Victims First directory of services where and when appropriate.

VFN volunteers can provide telephone or face-to-face support and can also help victims access specialist support from partner organisations and other services. Volunteers receive training in domestic violence, safeguarding, equality & diversity and other key areas. Volunteers are a key part of the victim’s Cope and Recovery Plan.

All Victims First Volunteers must attend and complete training before they can actively volunteer. Victims First Volunteer contribute a minimum of four hours per week for at least six to 12 months after training.

### 8.4.5 Victim Advisory Group

A Victim Focus Group ensures that the voice of the victim is heard and used to guide improvements to victim care. The responsibilities of the Victim Advisory Group are to:

* Assist in developing and shaping future victim services at Victims First Northumbria
* Improve victim experience by providing advice & feedback on the issues that impact victim care
* Provide a forum to discuss the victim experience within the criminal justice process when involved in court proceedings
* Help guide improvements in victim led approaches to Restorative Justice.

## 8.5 London Mayor’s Office for Policing and Crime – Victim and Witness Support Services

The London Mayor’s Office for Policing and Crime (MOPAC) commissions a range of support services and interventions for victims and witnesses of crime in London, and for individuals at risk of becoming involved in crime.

MOPAC has developed an innovative service which brings together elements of the support provided to witnesses before a trial with a wide range of specialist and general victim support services commissioned in London with the aim of creating a more seamless service.

### 8.5.1 London Victim and Witness Service (LVWS)

The LVWS is the main ‘front door’ for victim/witness referrals in London. The LVWS is for London residents who are adult victims and witnesses of crime. It is commissioned by MOPAC.

This new service brings together five key areas of support for victims and witnesses through a single integrated service:

* The service provides support to adult (18+) victims of crime
* Provides specialist support for victims and survivors of domestic abuse (aged 16+)
* Provides access to Restorative Justice
* Delivers pre-trial and outreach support for prosecution and defence witnesses
* Provides support for people affected by major crime incidents.

The LVWS provides dedicated and specialist support to help people through their criminal justice journey and to cope and recover from what they have experienced. They provide information about rights and entitlements under the Victims Code of Practice.  Individuals do not need to have reported the crime to the police in order to receive support.

When a person contacts the service, LVWS undertakes an assessment to find out the impact the crime has had on them. The assessment focuses on the following areas to find out what support is needed:

* Health and wellbeing
* Feelings of safety
* Ability to manage aspects of everyday life
* Housing Finances
* Confidence
* Relationships/social life
* Work, study and training
* Alcohol and drug use

After the assessment process an allocated caseworker works with the person to decide how best to support them and meet their needs either through the service or by referral on to other more specialist support from partner organisations. The range of support includes:

* Practical and emotional support and advice for adult victims of crime;
* Independent Advocacy for victims/survivors of domestic abuse;
* Access to Restorative Justice
* Pre-trial support for witnesses;
* Support for victims and witnesses of major crime incidents

### 8.5.2 Referral to Specialist Support Partner Organisations

LVWS makes onward referrals to a number of specialist organisations in London including:

* CALM Mediation Service  which can provide access to Restorative Justice
* GALOP which provides specialist support to LGBT+ communities
* Sistah Space which provides specialist support to victims from African heritage communities
* Stay Safe East which provides specialist support and expertise to victims of crime who are disabled
* St Giles Trust which provides support for those who are gang affiliated or at risk of joining gangs
* Shelter which provides specialist advice and support around housing and welfare benefits.

These organisations work in partnership with LVWS to ensure people access support tailored to their needs.

### 8.5.3 Children and Young People’s Victim and Witness Support Service

The Children and Young People’s Victim and Witness Support Service provides practical and emotional support to young victims and witnesses of crime in London.

The Children and Young People’s Victim and Witness Service supports children and young people aged four to 17 years of age affected by crime, whether it has been reported to the police or not.

Support is provided on a one-to-one basis by trained caseworkers in a confidential space that is suitable for children & young people.

The Service also provides pre-trial support for young witnesses attending court.

## 8.6 Children and Young Peoples Victim Support Services

Victim Support services support children and young people who have been affected by crime. ‘You & Co’ is Victim Support’s youth programme that helps young people cope with the impact and effects of crime.

In some areas of the country Victim Support have specialist caseworkers and volunteers who can work directly with children and offer support to help them think through their choices, safety plan, develop coping strategies, and cope and recover from their experiences. If they feel that there is another agency better placed to work with a child they will help to access these services.

Victim Support believe that the most effective way to work with children and young people is in partnership with their parents and the professionals around them, with their full consent regarding the services and support the child receives.

## 8.7 Victim Support ‘My Support Space’

My Support Space is a secure online resource designed by Victim Support to help organisations, professionals and parents manage the impact that crime has had on individuals and groups.My Support Space is also available for those supporting someone after they’ve experienced crime or trauma, for example friends, family members, colleagues or neighbours. (When registering for an account, it is possible to select whether the person is a supporter rather than a victim or witness of crime.)

My Support Space is for people aged over 16.

My Support Space can be accessed from any computer, tablet or smartphone with internet access. It uses two-factor authentication when a person logs back in to ensure that they are the only person who can access the account, even if someone knows the password.

‘My Support Space’ has a series of interactive guides which address a range of specific needs. Victim Support states that the guides are designed for people who are experiencing a low to moderate impact after crime. They emphasise that for people who are experiencing a much more severe impact after crime, or who are at risk, the online resource should only be used when the person is already in touch with a Victim Support caseworker. There is also information about where and how you can access further support, and the opportunity to register with SilverCloud, an online therapy system.

The content of the guides is designed to help individuals reflect on their feelings after crime and understand how people can support themselves during a difficult time. The guides feature videos, techniques, activities and tips and an online diary to help keep track of progress and record what works.

## 8.8 West Yorkshire Police – Hate Crime Reporting Centres

A Hate Crime Thematic Report highlighted the work West Yorkshire Police has done with partner agencies to encourage reporting and ensure that hate crimes and incidents are investigated appropriately.

Police in West Yorkshire work with strategic partners to offer alternative reporting routes for victims of Hate Crime both at a national level through reporting services such as TellMama, Community Security Trust and StopHate UK, and at a local level through Hate Crime Reporting Centres across West Yorkshire.

### 8.8.1 Hate Crime Reporting Centres

In West Yorkshire, local Hate Incident Reporting Centres (HIRCs) offer anyone who has experienced or witnessed a hate crime / incident the opportunity to report it if they would prefer not to report it to the police.

Hate Incident Reporting Centres are based at various community venues / organisations across West Yorkshire. They are locations where victims of a hate incident may choose to report an incident and have control over the nature of the report, the type of investigation and support they need.

The local Hate Crime Reporting centres were established with local authorities and partners and are regularly reviewed to ensure they are in the right locations for communities. They are managed and updated by the five District Local Authorities within West Yorkshire.

### 8.8.2 Working with partners to raise awareness of hate crime

West Yorkshire Police have worked with partners to raise more awareness of hate crime, increase reporting and support victims.  These initiatives have included the Police and Crime Commissioner for West Yorkshire, working together on a joint ‘Hate Hurts’ campaign, which has highlighted what hate crime is and what is being done to help tackle it. Hate Hurts posters, infographics, leaflets and easy-read information.   A joint project with British Transport Police has produced Hate crime information which is available in different languages The West Yorkshire police work regularly with ‘hate leads’ in West Yorkshire local authorities, and other reporting services such as Stop Hate UK, Community Safety Trust, TellMama and Bradford Hate Crime Alliance.

Members of the public and local Police Officers come together as Hate Crime Scrutiny Panels every six weeks to scrutinise how the Police have responded to hate crime / incident reports.  The Panel select a sample of reports made and look at how they have been dealt with.  Their recommendations are acted upon as appropriate.

### 8.8.3 West Yorkshire MARAC process

The force’s use of a MARAC process in Leeds for hate crime has received particular praise. Although traditionally used for crimes such as domestic abuse, extending its use to hate crime, and incorporating Victim Support, has helped to safeguard the most vulnerable victims.

# Analysis

The data set out in this report is analysed in this section using two standardised formats:

* SWOT: Strengths, Weaknesses, Opportunities, Threats
* PESTLE: Political, Economic, Social, Technological, Environmental

The analyses are set out below.

## 9.1 SWOT

The SWOT (Strengths, Weaknesses, Opportunities, Threat) analysis is set out below. This draws on the analysis of data set out above as well as data as set out in a parallel Evaluation of VCAS (also by CPI) which is provided under separate cover.

#### Strengths

* VCAS widely perceived as an effective and responsive service who address the needs of victims of crime in the Cleveland Police force area
* Victims supported by VCAS are positive about the support that they receive
* VCAS and other victim services work well alongside other support services that are available in the are.
* Strong relationship in place between VCAS and police
* Strong relationship in place between VCAS and a range of third sector organisations
* VCAS works well with those providers of services that support victims concurrently with VCAS
* Good outcomes for VCAS clients
* Current mixture of both practical and emotional help is considered to be effective and consistent with what people report that they would want in a victim service
* Evidence of VCAS proactively engaging with a range of minority communities – for instance LGBTQ+ community.

#### Weaknesses

* Limited capacity in VCAS – currently appears to be running a full capacity while there are many more victims of crime who would benefit from support
* Low levels of awareness of victim services in the wider community
* A number of third sector organisations representing vulnerable groups/those with protected characteristics are not necessarily aware of VCAS and the work that it does
* Under-representation of young victims of crime
* Under-representation of BAME victims of crime
* Under-representation of victims of hate crimes
* Perception of a lack of diversity among VCAS staff
* VCAS focus on referrals from police means it misses victims who do not engage with criminal justice agencies
* Fragmented domestic abuse service landscape
* Insufficient preventative work
* Poor referral processes from police to domestic abuse services

#### Opportunities

* VCAS has a strong ‘brand’ and reputation that it can build on to link in with a range of communities and third sector organisations to extend the work that it is doing
* Opportunities to work with third sector organisations to use them to help recruit/engage victims of crime who have not approached police
* Opportunities to work with BAME and refugees and asylum seekers to ensure that they are able to access services
* Opportunities to ensure that young people feel able to access the service and receive the support that they may require
* Learning from elsewhere in England indicates that a digital offer to victims can be blended with more traditional approaches
* The police control room pilot will further cement relationship with police and ensure a smooth pathway for victims who approach the police
* Scope to liaise and work with other specialist services rather than managing all client work – in particular onward referrals to Brake
* Outcome of Liberty and Southall Black Sister’s super complaint gives opportunity to reinforce message that the migration status of victims of crime is not germane to their being the victim of crime and that the police should not refer on to Home Office or Border Agency.

#### Threats

* Embedded norm among a sizeable minority in the community that they do not want to access victim services
* Reputation of victim services are affected by the community’s perceptions of Cleveland Police – that is, where people have a negative view of the police they are likely to carry this over into victim services too
* Lack of hate crime caseload may give the impression that this is not an area of concern for victim services among clients
* Insufficient mental health and counselling provision may hamper victims’ recovery
* Pathways for victims of domestic abuse appear to be fragmented
* Lack of uniformity/consistency of domestic abuse provision across the Cleveland area
* Tendency to categorize victims with a single label (e.g. ‘domestic abuse’) means that they may miss out on other services that would be of benefit
* Victims do not always appear to be involved in decisions to close their case – may lead to frustration and further alienation
* Lack of awareness of indicators of sexual exploitation by some practitioners
* Lack of security of funding for domestic abuse services

## 9.2 PESTLE

A PESTLE (Political, Environmental, Social, Technical, Legal and Environmental) analysis was undertaken. This draws on the analysis of data set out above.

#### Political

* The recent change in PCC may lead to change in local priorities – including how local victim services are commissioned.
* Domestic abuse provision is located at borough level (rather than at regional level) and therefore varies in relation to how each local authority chooses to structure and commission services.

#### Economic

* The impact of Covid on the economy is still not clear. There remains the possibility that budgets in the public sector may be cut to start paying for government borrowing that took place during the pandemic.
* Aligned to the previous point, the impact of the pandemic on local levels of employment is not clear. Increases in unemployment may lead to subsequent increases in levels of crime and therefore victims of crime needing support.

#### Social

* The data from the residents’ survey indicates that local cultural factors may be having an effect in relation to accessing victim services with 41% of respondents indicating that they would not seek support as a victim of crime. Moreover these social factors vary by place with those in Stockton-on-Tees most likely to say that they would not approach victim services (35%) closely followed by those in Middlesbrough (34%).
* There appears to be a reluctance among some communiities to engage with and report crime to the police. This issue was identified among BAME communities, refugees and asylum seekers and members of the LGBTQ+ community. Given the linkage between victim services and the police this represents a significant barrier to accessing victim services.

#### Technological

* The pandemic has demonstrated the willingness of users of a range of services to access services online or via digital platforms. Consideration should therefore be considered to offering blended services in the future whereby victims can opt whether to have face-to-face, telephone or digital support.
* Examples of best practice elsewhere highlight the innovative use of technology in supporting victims – note in particular Victim Support’s ‘My Support Space’ which offers a self-serve online service.

#### Legal

* The outcome of the Liberty and Southall Black Sister’s super complaint on policing and immigration (in which the complaint was upheld) has implications for local policing insofar as that Cleveland Police will need to develop a clear protocol regarding how it manages data on the immigration status of victims of crime and how and when this data is shared with the Home Office and others.
* The lack of a legal definition of sexual exploitation can make it harder to respond to this issue.

#### Environmental

* The ongoing effects of the covid-19 pandemic are likely to be relevant to victim services – this includes the possibility of further lockdowns (which have significant implications for types of crime as well as levels of crime), the creation of a new type of vulnerable community of long covid sufferers who are both potentially more vulnerable to crime and may experience barriers to accessing services, as well as ongoing economic effects that may lead to higher levels of crime (as noted above).

# Conclusions and Recommendations

## 10.1 Conclusions

A number of conclusions have been drawn from the data set out in this report.

### 10.1.1 Extent of support provided

Perhaps the key finding of this report is the extent of victim coverage – that is, how many victims of crime are supported by services currently. As demonstrated at Table 10 an average of 1.2% of victims of crime are currently being supported by victim services.

Recognising that not all victims of crime will want support, and that victims of some crimes (domestic abuse and sexual assault) will be supported by a range of specialist services, it is nonetheless clear that there is significant unmet demand for support.

The reasons for this level of unmet need are multiple and some of which are explored below. However it would appear to be the case that a significant issue is the capacity of current provision. VCAS, operating with six case workers, is inherently limited in what it can offer. We note the contrast with the models of good practice elsewhere in the country- for instance the hub in Northamptonshire that 40 staff and volunteers and the service in Cambridgeshire that has 20 staff. The size of the organisation will necessarily limit the service it can offer so it would appear that the current model of provision has an operational capacity of being able to deal with 1% of victims of crime.

### 10.1.2 What victims want

The data from both the resident survey and the interviews with community organisations is quite striking. All those consulted want personalised victim services that are tailored to the needs of the individuals and which offer a blended package of emotional and practical support. The results are striking insofar as this is exactly the kind of service as provided by VCAS as well as the various providers of domestic abuse services.

Moreover this style of support (holistic blended offer) corresponds with the examples of best practice as identified.

It can therefore be concluded with a high degree of confidence that the current style of offer aligns with what victims of crime would like to be offered and that the current offer in Cleveland is the right one.

### **10.1.3 Structure of offer**

Linked to the conclusion above, it is clear from a comparison with best practice models elsewhere around the country that the current structure of service provision (a central hub managing referrals and offering casework with onward referrals into a range of specialist services) aligns with what is currently considered to be best practice. It can therefore be concluded that victim services are currently structured in the right way.

### 10.1.4 Knowledge of victim services

It is very clear that knowledge of victim services are very low. Three quarters of respondents to the resident survey disagreed with the statement that ‘VCAS is well promoted across Cleveland’. Knowledge of VCAS was also mixed across the range of community organisations who were consulted. As such it would appear that a key barrier to accessing the service is simply knowledge of its existence and availability.

### 10.1.5 Barriers to accessing victim services

The data indicates a number of barriers to people engaging with victim services.

Perhaps the key barrier, somewhat unexpectedly, is cultural. 40% of respondents to the residents survey indicated that they would *not* seek help if they were the victim of crime. This is necesssarily a significant impediment to people utilising victim services locally.

A related barrier to accessing victim service are perceptions of the police and criminal justice agencies. 30% of respondents to the resident survey indicated previous negative experiences with police. Community stakeholders reported reticence among the groups that they represent to engage with the police.

Views of the police are material in influencing access to victim services for two key reasons. First, VCAS has entrenched its referral pathway from the police via its police control room pilot. This means it has become more dependent on accessing clients via the police. If the community however do not wish to engage with the police, this means that this referral pathway is not available to them. Secondly it would appear that there is some perception that VCAS and the police are one and the same organisation. Therefore if people do not trust the police they will also avoid contact with VCAS.

### 10.1.6 Under-represented groups

The data (both qualitative and quantitative) makes clear that there are a number of under-represented groups. Before exploring these groups, it is perhaps easier to sum up who does access victim services: currently victim services are predominantly white, middle aged/elderly and female. On the whole, groups outside of this cohort are under-represented.

**Young people**: The key group that is under-represented are young people. While those aged 20 to 29 years make up 23% of victims of crime they make up only 10% of the VCAS caseload. Those aged under 20 make up 14% of victims of crime and 4% of VCAS clients. Conversely older people are significantly over-represented: those aged over 80 make up 1% of victims of crime but 14% of VCAS clients. It is evident therefore that there is a need to better engage with young people (particularly as crime data indicates very clearly that young people are over-represented in terms of victims of sexual assault and violent assault).

**Men**: the data indicates that men are under-represented in victim services. Men make up 36% of VCAS clients but constitute 47% of victims of crime known to the police. This is likely to be related to the fact that men appear to be more reluctant to seek help. Note that the resident survey indicates that 62% of female respondents would seek help compared to 54% of men.

**BAME communities**: the VCAS data indicates that, while the ethnic profile of clients is broadly in line with victims who report to the police, when looking at the wider population some BAME communities are under-represented. In particular Asian communities would appear to be under-represented. Community organisations representing BAME communities however felt that members of their community were often unlikely to engage with the police and victim services and there was a consensus that their communities are not well served.

**LQBTQ+:** the conclusions around members of the LGBTQ+ community are somewhat more tentative as data does not exist on the sexuality of victims of crime. Data on hate crime however would tend to indicate that this community is not coming forward – note for instance that in 2020 VCAS dealt with nine victims of homophobic hate. While it is possible that their crime was categorised under a different heading (for instance captured as anti social behaviour or an assault) the very low numbers tend to indicate that members of the LQBTQ+ community are not coming forward to report and engage with victim services.

### 10.1.7 Victim services and domestic abuse

There is a consensus among stakeholders that domestic abuse and sexual assault services should remain a distinct offer from the wider victim offer. Simply put, there is no appetite locally from any practitioner or stakeholder that domestic abuse provision is absorbed into VCAS.

Note that the parallel existence of victim hub services alongside a range of specialist services is a feature in all the best practice examples – Northamptonshire, Cambridgeshire and London all use models whereby a victim hub works alongside and refers into a range of specialist organisations.

It can therefore be concluded that the current approach of separate commissioning of victim services from domestic abuse and sexual assault services should be continued.

### 10.1.8 Crime types

A number of areas of crime appear to be under-served.

**Hate crimes**: as noted above in relation to the LGBTQ+ community the numbers of victims of hate crimes being supported are very low. VCAS supported 54 victims of hate crime out of a total 1,177 clients in 2020.

**Cyber crime**: Stakeholders suggested that cyber crime is a growing issue and that is not well served at the current time.

### 10.1.9 Gaps

While it would appear that the current mixed offer of emotional and practical support both meets the expectations of the community and the needs of victims, it would appear that there is scope to offer more low level mental health and counselling support to victims of crime to support their recovery.

## 10.2 Recommendations

Following on from the conclusions set out above a number of recommendations have been made which are set out below:

### 10.2.1 PCC

1. Should the PCC wish for a greater proportion of victims of crime (above the current 1%) to be supported in Cleveland then it is highly likely that greater levels of investment need to be made in the provision of victim services. While it is not in the scope of this report to determine what the level of investment should look like, we note that all the examples of best practice that have been set out involve staffing structures far in excess of the number of staff currently employed by the current provider.
2. A number of specialist victim champions posts should be created each of whom should have a specific focus on a given community. Consideration should be given to victim champions for: BAME communities, children and young people and the LGBTQ+ community. It will be the responsibility of the champion to: liaise with groups working with this community, help market victim services to this group, provide casework and support to members of this group and provide advice for colleagues who might be working with an individual from this community.
3. Consideration should also be given to a designated domestic abuse champion. While domestic abuse provision should be kept separate (see below), a designated domestic abuse champion within the wider victim service can act as a point of liaison with domestic abuse services as well as helping to support wider needs of the victim.
4. Current domestic abuse and sexual assault commissioning arrangments should be kept in place – that is, offering a dedicated general victim service and separate specialist services for victims of domestic abuse and sexual assault rather than integrating these services into a single provider.
5. Consideration should be given to partnership arrangements between victim services and local third sector organisations using the Community Points model (see 8.3.2). This would involve training and quality assuring local organisations to provide a degree of support for victims of crime as well as signposting into victim and other services.
6. The PCC should commission an online offer for victims of crime. This should have two functions:

* Providing a ’self-service’ model for victims of crime who are experiencing low to moderate impact after crime, giving them tools and information they need to manage
* Providing a means by which they can access victim services and specialist support services (such as domestic abuse and sexual assault services)

1. The PCC should explore commissioning counselling and low level mental health interventions for victims of crime. Rather than using this commissioning to capacity build current mainstream mental health provision consideration should be given to ring-fencing this additional provision so that it is solely for use by victims of crime.
2. The current provision should make greater use of national victim resources in order to free up capaciity within the service. This should include referring victims of road traffic accidents to Brake and victims of cyber crime to Action Fraud.

Whilst the focus of this report is providing recommendations to Cleveland PCC, we feel that the following recommendations may be of interest to wider partners:

### 10.2.2 Cleveland Police

1. Cleveland Police should review the way in which it makes referals to local domestic abuse services. Specifically, the police should consider the feasibility of using the referral forms as developed and used by the domestic abuse services rather than internal police documents as is currently the case.
2. Cleveland Police should develop a safe reporting pathway for migrant victims of crime. This should link victims into local victim services and make clear to officers that the default position is (unless there are specific considerations) that information will not be shared with Immigration Enforcement. Information regarding this pathway should be shared widely with local third sector organisations working with migrant communities and particularly those working with refugees and asylum seekers.

Note that a number of recommendations have been made under the separate VCAS Evaluation report. These recommendations should be read in conjunction with those set out in this report to give a full sense of the scope of changes that have been suggested. The following recommendations build on those in the evaluation report:

1. In addition to the wider promotional work, a separate and specific hate crime awareness campaign should be undertaken. This should raise awareness of hate crime, how it manifests and provide information on how to report hate crime. Moreover the options for reporting hate crime should include options that do not require approaching the police.
2. In addition to the wider promotional work, specific messages should be developed that highlight that it is safe to approach services to seek help as the victim of crime and that anyone who is a victim is entitled to support. Messaging should stress the independence of victim services from police and criminal justice agencies.

# Appendix A: Client Satisfaction Survey

**About the satisfaction survey**

The Centre for Public Innovation have been commissioned to carry out an evaluation of the Victim Care and Advice Service (VCAS). As a client of the service we are interested to hear your opinion of the service and how effective it was. As such we would appreciate it if you could take a few minutes to complete this short survey.

The survey should take no more than five minutes to complete. Your response will be completely anonymous and there is no way we can use your response to identify who you are.

Many thanks for your help.

**About you:**

1. What gender do you identify as:
   * Male
   * Female
   * Non-binary
2. How would you describe your ethnicity?
   * White British
   * White Irish
   * White Gypsy or Traveller
   * Other White background
   * White and Black Caribbean
   * White and Black African
   * White and Asian
   * Other Mixed background
   * Asian or Asian British Indian
   * Asian or Asian British Pakistani
   * Asian or Asian British Bangladeshi
   * Chinese
   * Other Asian background
   * Black African
   * Black Caribbean
   * Any other Black background
   * Arab
   * Any other ethnic group
3. What age are you?
   * Under 18
   * 18 – 29
   * 30 – 39
   * 40 – 49
   * 50 – 59
   * 60 – 69
   * 70 – 79
   * 80+
4. What local authority area do you live in?
   * Hartlepool
   * Middlesbrough
   * Redcar and Cleveland
   * Stockton-On-Tees

**About what happened to you**

**Thinking about the incident that led you to being supported by VCAS:**

1. Were you a victim or witness to the crime/incident?

* Victim
* Witness

1. Could you indicate what type of crime/incident you were the victim of/witness to? (Tick all that apply).
   * Assault/Attempted physical harm
   * Anti-social behaviour
   * Arson
   * Breach of Restraining Order/Harassment
   * Burglary
   * Criminal Damage
   * Fatal/ Serious Road Traffic Collision
   * Fraud
   * Homicide/Suspicious Death
   * Hate Crime (race, religion, sexual orientation, disability, gender identity)
   * Robbery
   * Stalking
   * Theft (Vehicle/Shop/Person/Cycle)
   * Threatening Violence
   * Other (if Other please state below)
     1. Text box
2. Did you report the incident to the police?
   * Yes
   * No
   * Don’t know
   * Not applicable

**About VCAS**

1. How did you contact VCAS?
   * I contacted them myself
   * They contacted me
   * I was put in touch with them via the police
   * Another organisation put me in touch with them
   * A family member or friends put me in touch with them
   * Other

If you said Other, could you say how you contacted VCAS below.

1. If another organisation put you in touch with VCAS can you provide the name of the organisation?
2. Thinking about the support you received from VCAS, how far would you agree or disagree with the following statement? (Tick one option per statement).

Strongly disagree Disagree Neither Agree nor disagree Agree Strongly Agree

* VCAS understood my needs.
* I was treated sensitively and with dignity.
* I was provided with the support that I needed.
* The support I received was tailored to my needs.

1. Did you have any needs as a victim or witness that were not met?

* Yes
* No
* Don’t know

1. If you had any needs that were not met could you please describe what these were below.
2. Did VCAS put you in touch with any other organisations to help you out with any specific needs that you had?
   * Yes
   * No
   * Don’t know
3. If VCAS put you in touch with another organisation, could you give the name of the organisation?
4. Overall, how satisfied were you with the support provided by VCAS?
   * Completely satisfied
   * Very satisfied
   * Fairly satisfied
   * Neither satisfied not dissatisfied
   * Fairly dissatisfied
   * Very dissatisfied
   * Completely dissatisfied
5. If you could make any changes to improve the service provided by VCAS, what change would you make?
6. Following on from the incident you experienced would you say that you have?
   * Fully recovered
   * Partially recovered
   * Not recovered at all
   * Don’t know/Not sure
   * Not applicable
7. Was there anything that would have helped your recovery that you would have liked to have received?
8. If you have any final comments please put these in the box below.

Many thanks for taking the time to complete this survey. Your results will be used to understand how to better deliver services to victims of crime in Cleveland.

1. VCAS is not commissioned to provide support to victims of domestic abuse and sexual violence. [↑](#footnote-ref-1)
2. It is possible that this is due to sampling issues associated with the CSEW (by comparing a national household survey to a local area). [↑](#footnote-ref-2)
3. It should be noted that the ethnicity data for 2019 is limited to available information provided by the Office for National Statistics so only broad ethnic groups are used for these estimates. [↑](#footnote-ref-3)
4. The actual figure was standardised by creating a rate per 1,000 adult population aged 16+ [↑](#footnote-ref-4)
5. <https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populationcharacteristicsresearchtables> [↑](#footnote-ref-5)
6. <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/adhocs/010096reasonsfornotreportingcrimetothepoliceyearendingmarch2018crimesurveyforenglandandwales> [↑](#footnote-ref-6)
7. <https://journals.sagepub.com/doi/full/10.1177/0269758020961979> [↑](#footnote-ref-7)
8. https://www.lawgazette.co.uk/practice-points/deafness-and-the-justice-system/5070013.article [↑](#footnote-ref-8)