University of Sheffield

Experience of victim services following the change to local commissioning

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A thesis submitted in partial fulfilment of the requirements for the degree of Doctor of Philosophy

The University of Sheffield
Faculty of Social Sciences
School of Law

20 December 2024

Acknowledgements

The journey for this thesis began in 2017, long before I met my now husband. From the very start, he has been by my side – supporting me when I postponed one of our first dates to submit my application to the university and being the first person I shared the news with when I was accepted. He has stood by me through the challenges of getting this research off the ground, my struggles with motivation, the upheaval caused by the Covid-19 pandemic, two house moves that had to work around the thesis, and multiple job changes. While he may not have fully understood the intricacies of my research, his unwavering support and encouragement have been a constant source of strength. And, of course, he even married me along the way. For all of this and more, I am eternally grateful. Thank you.

This has been a long journey, and my supervisors, Joanna and Dave, have been there throughout. Despite them both moving on from the university, they have stuck with me with their words of wisdom and encouragement. Their knowledge and expertise have been invaluable throughout and I certainly would not be submitting this had I not been lucky enough to have them both as my supervisors and would like to express my deepest gratitude to you both. Thank you.

I also wish to thank the two OPCCs who agreed to participate in this research, and the organisations and people they work with to support victims of crime. Without all of your input it would not be possible to understand what goes into supporting victims of crime, and the nuances such varied roles bring. Thank you.

Finally, the greatest thank you and appreciation must go to the victim participants in this research. To trust me with your stories and your experiences meant so much to me I cannot put it into words and this thesis would not have been possible without you. Making sure that you have a voice and that it is not just listened to but actually heard has become my objective in not only my thesis but the work I do elsewhere, and I will ensure that the voices of the most important people, those most affected by crime, are always at the heart of the work that I do.

Abstract

This thesis explores the victim experience of victim services commissioned by Police and Crime Commissioners (PCCs) in two areas of England. Victims of crime, staff and volunteers from victim support agencies and representatives from PCC Offices participated in interviews and focus groups to better understand the changes that have taken place around the commissioning of victim support services, and the victim label.

Benefits of localised commissioning of victim support services were minimal, with the most significant being the opportunity to ensure that victims of crime are always in receipt of the best possible services to support them. Typically, victims of crime engage with just one victim support service and were not referred between victim support agencies. Short term contracts made it difficult for victim support agencies to plan ahead, with a lack of certainty often leading to additional stress and workload for services supporting victims and competing for contracts.

Findings indicate that there are a variety of characteristics associated with victims of crime. Many victims of crime are not opposed to the use of the word 'victim', but the decision to use this should be made by them, not the people working with them, and should flex to their needs. Victims of crime are keen to share their story in the hopes of making a difference and helping to improve services for future victims of crime.

The Covid-19 pandemic necessitated a move to remote working, with many victim support services taking a step back from in person support, as they did not consider their support an essential service. Since the end of the pandemic, it is unclear whether these services have returned to their pre-pandemic methods of working, but the decision as to whether an individual is supported in person or not should remain with the victim of crime.

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Declaration

I, the author, confirm that the Thesis is my own work. I am aware of the University's Guidance on the Use of Unfair Means (www.sheffield.ac.uk/ssid/unfair-means). This work has not been previously been presented for an award at this, or any other, university.

The authors experience of engaging in this thesis was shared at the 2022 GERN and an article about this can be found:

Edwards K (2023) "Researching Victims and Victim Services in England and Wales" in *GERN Research Paper Services No 7: Making Strategic Choices in Social Science Research*, eds Antoinette Verhage, Tom Vander Beken, Christophe Vandeviver, Jacques de Maillard, Fabien Jobard, Joanna Shapland, pp229-254, Maklu: Apeldoorn-Antwerp

Appendices

List of Abbreviations

APCC	Area A PCC
BBC	British Broadcasting Corporation
BPCC	Area B PCC
CJS	Criminal Justice System
CPS	Crown Prosecution Service
DA	Domestic Abuse
EU	European Union
HM	Her Majesty (until September 2022)/His Majesty (from September 2022)
HPA	Home Protection Agency
ICB	Integrated Care Board
MOJ	Ministry of Justice
MP	Member of Parliament
NHS	National Health Service
[1]OPCC	Office of the Police and Crime Commissioner
OL	Operational Lead
[1]PCC	Police and Crime Commissioner
[1]PFCC	Police, Fire and Crime Commissioner
PHSO	Parliamentary and Health Service Ombudsman
PRSRA	Police Reform and Social Responsibility Act
RJ	Restorative Justice
RJC	Restorative Justice Council
SA	Sexual Abuse
SL	Strategic Lead
SPOC	Single Point of Contact
UN	United Nations
UK	United Kingdom
VPS	Victim Personal Statement
VSS	Victim Support Service

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[1] These terms may be used interchangeably

Chapter 1

Introduction

In 1986 Professor Joanna Shapland posited that there is a "mismatch between the victims' expectations of the system and the system's assumptions about victims' needs" (1986a:215). Over the last 40 years a raft of guidelines, policies and codes have been introduced and updated in an attempt to improve this mismatch. Almost 30 years after this statement the victim support system in England and Wales went through a significant change, moving from nationwide generic and local services to a localised approach, overseen and commissioned by Police and Crime Commissioners (PCCs), allied to some national services. In 2024 the Victims and Prisoners Bill became law, bringing the Victims' Code into legislation and putting responsibilities on a number of statutory organisations to collaborate to deliver support to victims of crime. This research took place in the build up to the Victims and Prisoners Act 2024 and looks to better understand local commissioning under PCCs.

The change from national to local commissioning for victim support services took place 10 years ago, and there has been very little evaluation or research which had been undertaken exploring these changes. Those victim support services commissioned by PCCs were expected to support victims and tend to their every need (MOJ 2012a), with PCCs expected to know what victims of crime in their area need which may be immediate, long term or continue long after the crime had taken place. As Goodey (2005), however, highlights, "different victims have very different needs" (p121) so how were PCCs to go about tackling this to ensure that all victim needs would be met? This is especially pertinent given that Goodey (2005) pointed out at that time that "victim-centred justice programmes often evolve without or with very little direct critical input from victims" (p117). This research uses semi-structured interviews to explore the recent system changes alongside the needs of victims and considers whether the understanding of victims' needs actually lines up with what victims need. It also aims to explore victims' own perceptions and experiences, alongside those of service providers and commissioners of victim support services.

The research has taken place against a backdrop of significant change including the updating of the Victims' Code (2019/20), Brexit (2020) and the Covid-19 pandemic (2020-2023, Rigby and Satija 2023). This means that the results and discussion cover the normal operations of the organisations from victim and agency perspectives, but also changes wrought by the pandemic, as some victims received support during the pandemic, whilst others received support before the pandemic. There is also an additional chapter covering both results and discussion around the pandemic itself. This research therefore aims to explore two fundamental questions:

1) What is the experience of victims of services commissioned by their local Police and Crime Commissioner?
2) What is the victim label and who adopts it?

Chapter 2 looks to better understand the background of victims, through *Conceptualising Victims of Crime*. From here consideration is given to the Christian origins of the word victim. This chapter explores who is the victim, drawing upon Nils Christie's (1986) ideal victim and the roles of feminist theory and narrative victimology in our understanding. Whilst this chapter considers the origins of the word victim it does not seek to identify the most appropriate label to be used, as this is done in the results and discussion, focusing instead on understanding the effects of such a label on victims of crime and those around them. This chapter finishes by considering the background and development of victim support services in England and Wales.

Chapter 3 explores the development of *Policy and Legislation*. Policy and legislation relating to victims of crime dates back to the UN General Assembly of 1985 which "recognised that the rights of millions of people around the world" were not being "adequately recognised", that is, individuals around the world were suffering from harm. In England and Wales in recent years we have had the introduction of a Victims' Code in 2015, a Victims' Strategy in 2018, a consultation on the proposed Victims' Code in 2019 and a new Victims' Code in November 2020. This was subsequently followed by the proposal of a Victims and Prisoners Bill in 2023, a Bill which was rushed through when the Conservative government called a general election for the summer of 2024, and this chapter considers what made it from the Bill into the final Act and the implications of this.

Chapter 4 explores *Contracting and Commissioning Services,* what commissioning actually means, how it is supposed to work and the reason that commissioning has moved into the world of victim support services, starting with the introduction of Police and Crime Commissioners in England and Wales in 2012, who took over responsibility for the commissioning of local victim support services in 2014.

Chapter 5 sets out the *Methodology* of the research, setting out the methods which were considered alongside a breakdown of the potential agencies and participants for this research and what it was like attempting to engage and engaging with these different groups, including the ethical questions concerned. Ultimately interviews were undertaken with victims of crime, agencies offering support to victims of crime, and representatives of the local Police and Crime Commissioners. As a result of restrictions imposed because of the Covid-19 pandemic these changed from planned face-to-face interviews to predominantly online (with two telephone) interviews.

Chapter 6 sets out the *Results* from the fieldwork, starting first with the results from the victim participants, before moving on to the results from the agency participants. The *Results* are lengthy and focus on understanding victim experience from the perspective of victims of crime, staff and volunteers working with victims of crime, and representatives from the Office of the Police and Crime Commissioner.

Chapter 7 is a significant, unanticipated chapter which focuses on the impact of *The Covid-19 Pandemic* on victim support services, covering both the results and discussion. The first Covid-19 lockdown began as this research reached a point at which fieldwork was about to commence. As a result of the pandemic and the adjustments being made

across the country a number of agencies requested that the fieldwork be put on hold until they had a better understanding and grip of managing their services during a pandemic. This worked well as the university simultaneously placed a hold on in-person fieldwork being conducted, which in turn led to a reconsideration of the method for the interviewing participants.

Chapter 8 is the final chapter, exploring the results of the research through the *Discussion* and addressing the two main research questions. When it comes to choosing an appropriate label for a victim of crime, it is important to consider the views of the individual and their preference. Therefore for this research, based on the feedback from victim participants, 'of crime' has been added where required to refer to individuals who have been a victim of crime in an attempt to remove the negative connotations associated with the word 'victim'. Whilst commissioning in and of itself has potential, the lack of funding from central government to support commissioned providers to deliver support services leaves victims of crime wanting. Consideration is given to the limitations of this piece of work, including the inability to generalise these findings. It does, however, highlight a need for further research to explore all support for all crimes, including the police and courts.

At the time of writing we are lacking in research exploring the commissioning of victim support services in England and Wales, although there has been some completed by Hall (2018) exploring whether local commissioning met local needs, and Simmonds (2019) exploring the impact of local commissioning in the southwest of England. Furthermore, it is impossible to gather accurate data on victimisation. Police statistics are just those offences recorded by the police, that is, those crimes reported to the police. Many victims, for their own reasons, choose not to report crime. The Crime Survey for England and Wales (which replaced the British Crime Survey) is just a sample of the population of England and Wales and therefore has limitations (Davies 2013). With it being impossible to find accurate victimisation data, how do we know that the processes and services in place to provide support to victims of crime are doing what the victims need, if the data is incomplete? What are the current services for victims in England and Wales doing? Are victim support services in England and Wales meeting local need? Are victim support services in England and Wales failing victims?

This research, whilst not generalisable due to the small sample size, gives insight into the experience of victims of crime following an offence taking place and aims to better understand victim needs and whether those responsible for the commissioning and delivery of victim support services are giving victims what they need, or just what it is thought they need and/or what they think they should need.

Chapter 2

Conceptualising Victims of Crime

To better understand victims of crime, victim experiences and victim services, this chapter will provide a very brief review of the literature on victims. To start this chapter will explore the origins of the word 'victim' and who we call a victim, before considering the effects of victimisation. The focus then turns to the history of studying victims in England and Wales and the support that has been available to them, before considering the impact of the devolution of funding (as considered in Chapter 4) on these support services for victims of crime. Finally, this chapter will explore what has been found on victim views in relation to victimisation and whether they consider themselves a victim.

This chapter is deliberately brief and will not go into too much detail around victims of crime and victimisation, choosing to focus instead on the key points in history. This is because Chapter 3 focuses on the policy and legislation in England and Wales about victims of crime, which shape victim experiences and are informed by our understanding of victims, as set out in this chapter.

There is some disagreement as to the exact date, but Benjamin Mendelsohn first coined the term 'victimology' in the 1940s (Sparks 1982, Rock 1986b, Kirchhoff 2010; Daigle 2013, Eigenberg and Garland 2015, Walklate 2017, Godfrey 2018), acknowledging the importance of looking at victims and offenders together (Daigle 2013). The definition of victimology has been, and continues to be, largely contested, especially when considering whether its role should be entirely academic, or whether it should be looking to support and assist victims of crime. Goodey (2005:10) cites the World Society of Victimology as defining victimology as "The scientific study of the extent, nature and causes of criminal victimization, its consequences for the persons involved and the reactions thereto by society, in particular the police and the criminal justice system as well as voluntary workers and professional helpers", whilst Daigle (2013) provides an all-encompassing definition of victimology as "the study of the etiology (causes) of victimization, its consequences, how the criminal justice system accommodates and assists victims, and how other elements of society, such as the media, deal with crime victims" (p1). Together these definitions cover all there is relating to the consideration of victims of crime and provide a good overview for this research.

The origins of the 'victim'

van Dijk (2009), Fohring (2018b) and Galona (2018) trace the word 'victim' to its Latin origin, *victima*, the word for sacrificial animal. van Dijk (2009) sees the origins of the word *victima* being in 1536 when it was used to describe the sacrificial nature of the crucifixion of Jesus Christ. Upon further exploration at the time, and again today (see below), this sacrificial offering continues to be used as an explanation for being a 'victim' (*victima*). van Dijk (2009:1) was of the view that the labelling of individuals as 'victims' originated with an individual's association with the suffering of Jesus Christ, further linking victims

by affording them "a social role of passivity and forgiveness", which we shall return to later. Galona (2018), in disagreeing with some of van Dijk's (2009) research, highlighted that these origins first started in the 15th century and that the word victim underwent significant change from the 'sacrificial lamb', shifting the focus to suffering.

Galona (2018) explored in detail the origins of the words *victim* and *victima* and the changes which took place in the understanding of these words over time. In the 1650s there was a shift in the definition/explanation of the 'victim', moving away from the sacrificial nature to a "person who is hurt, tortured or killed by another" (Online Etymology Dictionary 2019), becoming a "metaphorical label for a harmed party" (Galona 2018:83). A further shift occurred in 1718, where 'victim' meant the oppression of individuals "by some power or situation" or the injuring or suffering of an individual "in the pursuit of an object, "or from gratification of a passion or infatuation, or from disease or disaster", as an individual can be a victim of more than just a criminal act (Online Etymology Dictionary 2019, Merriam-Webster 2019).

The sacrifice of Jesus Christ has transformed over time from being the sacrifice of an individual for humanity to focusing on the pain and suffering he went through for humankind, himself a victim because he was harmed (Galona 2018). In the beginning he was offered as a sacrifice, a *victima*, but today he is a victim because he suffered. Galona (2018) used not only the example of Jesus Christ for her analysis, but also his comparison to Socrates, as undertaken by Voltaire, using the figural, metaphorical application of the word 'victim' (*victima*). Simply, Socrates was a classical Greek philosopher who stood trial in 399BC for corrupting young minds and impiety (Wilson 2007). He was found guilty and sentenced to death by poisoning (Wilson 2007) whilst Jesus Christ was sentenced to death on the charge of claiming to be "King of the Jews" and he was crucified for his crime (Watson 1985). Both individuals labelled as 'victims' due to their suffering were, technically, convicted criminals. They are presented as innocents of "unjust trials" and "figures who suffered death because of their desire to reveal the truth" (Galona 2018:84). So, as Galona (2018:93) points out, the figural use of the word 'victim' here has been applied to the individuals being prosecuted, the accused, not the harmed party, "blurring … the border between a victim and a perpetrator". These two examples of the use of the word victim in the figural sense throw a bit of a spanner into the use of the word victim today (discussed below), but the blurring of the boundary between victim and perpetrator is not unusual, with victimisation used as one of many possible causal explanations for offending behaviour (Victim Support 2007), with early frameworks and typologies developing in such a way as to assign some responsibility to victims for the actions against them (see Mendelson 1956 and Sparks 1982).

In exploring the victim label and its effects, the history of the word victim to van Dijk (2019) is most relevant in the Christological tradition that victims deal with the harm, they manage it in silence. This is why he is drawing a link between the Christian origins of the word 'victim', as used to describe Jesus Christ who suffered his persecution in silence, and the expectation of submissiveness, "passivity and forgiveness" placed upon victims of crime today (Weisstub 1986; van Dijk 2009:1). Van Dijk (2008) believes that in labelling an individual a victim in the same way as Jesus Christ, the expectation is that they must

follow his example of not retaliating against those who made them so (explored further in *The Effects of Victimisation* below).

Who is a victim?

The word victim is an all-encompassing word covering a wide variety of individuals with the term "crime victim" being attributed to individuals' actual experiences of crime victimisation, a term which is only assigned after an event has taken place (Hope 2018). 'Victim' is a word which has been contested as to whether it is a label applied by others or the person's own view of themselves, something which participants of this research have been asked about (see Appendices A, B, C and D). Understanding of the word victim is important for all, but especially those it is used to describe. If they have a certain understanding of the word victim that may be how they see themselves, or how they think others see them.

The Merriam-Webster Dictionary (2019) provides three definitions/explanations which act as a starting point for who people may assign the word 'victim'. The first is someone "adversely affected by a force or agent" such as someone who is "injured, destroyed or sacrificed under any various conditions" or an individual "subjected to oppression, hardship or mistreatment" (Merriam-Webster 2019). The second is, again, an individual "adversely affected", but this time it is one who is "tricked or duped" (Merriam-Webster 2019). The third is "a living being sacrificed to a deity or in the performance of a religious rite" (Merriam-Webster 2019), in line with van Dijk's explanation (above) of the victim as "someone or something slaughtered and offered as a sacrifice to the gods" (2008:13).

To be a victim is to be 'socially labelled' (van Dijk 2020), hence an identity which is dependent upon a 'transgression', carried out by a 'transgressor' who is more powerful than the victim, and includes directly or indirectly individuals and agencies associated with that individual and what has happened to them (Rock 2002, Walklate 2017).

Christie (1986) proposed that in order for an individual to truly be regarded as a victim – that is someone who is more likely to elicit sympathy and not someone who is more likely to be a victim – they need to fit six key criteria:

1) The victim is weak, that is they are perceived to be weak due to being very young or very old or even female; this individual is perceived to be more vulnerable;
2) The victim is going about their ordinary, everyday business, they are not doing something which would put them in harm's way but something as normal as going to work;
3) The victim is blameless, that is the victim has not done anything to bring this upon themselves, they are an innocent caught up in harm's way;
4) The victim is a stranger to the offender, there can be no prior relationship between the two parties with the weak, blameless victim being set upon by a complete stranger at random for no reason;
5) The offender is 'big and bad' in comparison to the victim. This could relate to a teenager picking on a younger child, a man picking on a woman, the offending party should be bigger and badder than their meek victim;

6) The victim has the right combination of power, influence or sympathy to elicit victim status without threatening, that is they exhibit the right number of the above not to threaten the idealised image of the victim as the innocent.

Christie (1986) used the example of the little old lady who met the criteria to be considered an 'ideal victim', but another example is the victims of the Manchester Arena bombing in 2017 who embody the ideal victim, meeting all six of the criteria, but an individual does not need to fit all six criteria to be considered an ideal victim.

An individual who is a victim may be a primary (direct) victim, an indirect victim or subject to secondary victimisation.

The primary victim is an individual who has been specifically, directly impacted by a crime (Walklate 2017) with the crime having immediate impact and causing immediate harm (Rothe and Kauzlarich 2018). For example, the primary victim of an assault who has a broken arm as a result would have to attend hospital for treatment and possibly take time off work to heal and recover from the aftermath.

An indirect victim is a more far-reaching label, with a broader range of individuals likely to fall within this group (Rothe and Kauzlarich 2018) and is someone impacted in some way by the crime which has taken place (Hall 2010, Walklate 2017). For example, a murder victim is the primary victim, however their friends and family, and even the friends and family of the offender, are indirect victims of the crime as this affects them too, often through leaving them bereaved, or even seeing their loved one's life picked apart by police/courts (Hall 2010, Walklate 2017). Indirect victimisation is about experience, whilst primary (direct) victimisation is about the direct impact of those actions (Walklate 2017).

Secondary victimisation is similar to indirect victimisation in that it relates to an individual's experience. However, the experience in question here is the experience they have whilst going through the criminal justice process, which can feel as though they are being victimised all over again (Rock 1986a, Condry 2010, Kirchhoff 2010, Walklate 2017). Secondary victimisation occurs when these individuals feel let down by the agencies they come into contact with (Walklate 2017). When engaging with the criminal justice system an individual is often required to describe and relive and re-experience what happened to them and the effect this had on them. If they are not properly supported by criminal justice agencies this can result in them being revictimised and suffering from secondary victimisation (Shapland et al. 1985; Fairclough and Jones 2018). This is particularly true when an individual is left "feeling challenged, undermined and accused of 'not telling the truth'" (Walklate 2017:39). This may be the case when an individual is first speaking with the police, and later when giving evidence in court (Walklate 2017), especially for cases involving sexual offences, when they may find the environment (court) to be quite intimidating. In order for an individual to suffer from secondary victimisation, they do not have to have been the victim of a crime – as shown above, they could be a witness to the offence, they may have suffered from indirect victimisation or they may not have suffered any victimisation as a result of the crime but simply have been called as a witness to attest to something but the treatment and

experience of the process is such that they experience secondary victimisation (Condry 2010, Fairclough and Jones 2018).

A further insight into victimisation comes from the discovery that an individual, business or place may be a repeat victim (for the purpose of this research the focus is on the individual) which demonstrates "that a small proportion of the population experience a great deal of crime" (Goodey 2005:59) and provides the opportunity to identify more accurately who is being victimised. This is interchangeably referred to as repeat victimisation or revictimisation, however there are distinct differences between the two (Daigle and Fisher 2013). When talking about a repeat victim, this may be used to describe an individual, business or place (Farrell 1992), whereas revictimisation is used only to describe offences against an individual (Daigle and Fisher 2013). Repeat victimisation may also be referred to as multi-victimisation and recidivist victimisation (Farrell 1992).

To be a repeat victim the individual would have "experienced two or more incidents of the *same type* of victimization within a short time frame" (Daigle and Fisher 2013:372). This timeframe could be anything from within a few days to up to a year. When referring to revictimisation, this is "the experience of *more than one violent victimization, usually in the same violence category, over a relatively long period of time*" (Daigle and Fisher 2013:372), although it has been suggested that the process of giving evidence itself may be a further example of repeat victimisation (Fairclough and Jones 2018).

The biggest differences between repeat victimisation and revictimisation are the category of crime and the time between the incidents. As already mentioned, repeat victimisation occurs over a short period of time, up to one year, falling within one developmental period for the victim, whilst revictimisation may occur over a number of years, spanning childhood and adolescence, into adulthood (Daigle and Fisher 2013). Over this period the crime type is likely to change, however if it still falls within the same crime category, it would be considered revictimisation (Daigle and Fisher 2013). For example, an individual who was the subject of child abuse when they were young and then intimate-partner violence as an adult would be considered to have experienced revictimisation as they fall within the same crime category (Daigle and Fisher 2013).

A further term used when considering an individual who has experienced victimisation is polyvictimisation which is used to describe an individual who "has experienced multiple forms of victimization", usually occurring in one developmental time period (Daigle and Fisher 2013:373). For example, an individual who is bullied and mugged during their childhood would be referred to as a polyvictim, whilst near-repeat victimisation occurs within a set spatial area, usually because of crime displacement (Daigle and Fisher 2013).

van Dijk (2008) believes that moving away from the term 'victim' "will serve as a part of the solution to the problems faced by crime victims" (Pemberton 2012:14). Terms being used far more widely now are that of the 'harmed' party, a 'wronged' individual or a 'survivor' (van Dijk 2008). These words say that someone has had something bad happen to them but they are not a victim, they are not weak, they are not ashamed or helpless as

the word 'victim' would have one think, they are a party to proceedings (harmed/wronged), separated from the individual who did the harm but not with a label which elicits sympathy or pity, or they are a 'survivor', someone who has had something bad happen to them but they have survived. They are stronger than that one bad person, that one bad act, and they have overcome it, they will overcome it. If they reject this victim label they are no longer seen as weak, and someone else does not have to make decisions or do things for them, instead they have been taken seriously, they can be offered support, they can be given a voice (van Dijk 2008). As Hopkins Burke (2014:94) points out, "Labelling theorists fundamentally argue that no behaviour is inherently deviant or criminal, but only comes to be considered so when others confer this label upon the act". This may therefore also be the case when labelling an individual a victim, that is, an individual may not be a victim unless society recognises them as such. Mawby and Gill (1987) also pointed out that an individual's status or behaviour increased their chance of being a victim.

For many, particularly within the feminist movement, the term 'victim' is problematic (Walklate 2007) as it "is associated with a powerful stigma and may draw blame, derogation, weakness and shame" (Fohring 2018b). Often associated with sacrifice (as explained above), the term 'victim' is gendered in many languages towards the female, for example, *la victime* in French (Walklate 2007). According to Walklate (2007:144) "the links between the word victim and being female implies that the passivity and powerlessness associated with being a victim are also associated with being female". This has led to those within the feminist and gendered violence movement preferring to use the term 'survivor' as opposed to 'victim' to describe an individual who has been harmed by crime (Pemberton 2016).

Gupta (2014) posits that the use of the term 'survivor' became popular in the 1980s as it was used to describe individuals who had experienced domestic and/or sexual violence. For many it was a move away from the negative, helpless passivity of the term 'victim' and instead celebrated those who had 'survived' what had happened to them (Gupta 2014) and resisted victimisation (Walklate 2007). Papendick and Bohner's (2017:1) research supported this as participants found the term 'survivor' to indicate "more positivity, strength and activity", in comparison to the term 'victim'. Where participants were directed that this label had been applied by the individual themselves, the English-speaking sample viewed this positively, as they perceived those survivors to have "long-term psychological stability" (Papendick and Bohner 2017:16).

Fohring (2018b:152) points out that despite proponents of the term 'survivor' being able to highlight the negative characteristics associated with the term 'victim, they often fail to provide the empirical evidence needed to support this. Furthermore, as Walklate (2007) indicates, having the almost opposing terms of 'victim' and 'survivor' further complicates things as actually neither term, however distinct they may be, captures the actual process of victimisation or helps to truly understand what it means to have been the victim of a crime. As Gupta (2014) points out, "the insistence of 'survivor' does a disservice to feminism: 'survivor' celebrates the individual, but 'victim' recognises the enormity of the system we are up against, and its brutalising potential". Their research does, however, assume that there can only be one label or the other, and fails to

adequately consider whether this may change. King (2023) found that when it came to self-labelling as a victim or survivor this was not fixed, rather they were two separate constructs which were continuous, meaning that an individual may self-label as a victim at one point in time and as a survivor at another. This supports Fohring's (2018b:159) findings that her research participants found the notion of victimhood to be "multi-directional", with an individual moving not just into a state of victimhood following a crime, but also into non-victimhood and back again.

From a quick search online a Reddit thread was found asking what people within the community thought about being called 'victim' or survivor' in relation to Post Traumatic Stress Disorder (PTSD) (Reddit 2023). Upon reviewing the responses, it appears the decision of whether or not to use the 'victim' or 'survivor' label is, to the individual concerned, a personal choice. For some there are negative connotations and stigma associated with the idea of being seen to have been a victim, including being viewed as weak and powerless (see Walklate 2007; Gupta 2014; Fohring 2018b). For others it is as simple as the fact that that is the legal definition so that is what they are. For yet others it was about quantifying their experience by what had happened to them, for example "people who have experienced …" (Reddit 2023).

What ought to be considered, when considering the use of the term 'victim' and what this means, is not only what this means to the individual to whom the term is applied, but also to those around them, whether these be friends, family or professionals. As Strobl (2010:3) points out, "becoming a victim presupposes the successful communication of a harmful experience" but when someone has gone through a traumatic experience, as many victims of crime have, it is unlikely that this can be successfully communicated to and/or understood by others who simply cannot adequately understand this experience. However, taking a constructivist approach to this, the understanding of the victimisation depends upon the individual to whom it is being communicated (Strobl 2010; Kirchhoff 2010). Thus for individuals working in victim support services, supporting victims of crime, it could be assumed that they would already have some understanding of what an individual who has been a victim of crime is experiencing (Strobl 2010).

Thunberg (2020) asserts that in order for an individual to be a victim they must "identify with and claim victimhood" (Marshall 2024:159). Furthermore, this victimhood should be recognised and affirmed by others (Strobl 2010). Whilst this sounds simple and straightforward, the reality is anything but, with Fohring (2018b) and Marshall (2024) pointing out that there are many motivations involved in the process of identifying as a victim, not least the role played by friends, family and peers in this decision making. This shows that victimisation is both personal and subjective (Fattah 2010).

In research in Scotland that actually asked victims of crime what they thought about the word victim, Fohring (2018b:154) undertook semi-structured interviews with victims of crime and asked participants "'Do you/did you consider what happened to you a crime?', 'Do you/did you consider yourself to be a victim?' and 'How does that word [victim] make you feel?'". Fohring (2018b:155) found that responses to the word 'victim' were "overwhelmingly negative" and there was a "distinct disconnect between how an incident of crime is labelled and how a victim identified themselves", with an

acknowledgement of the incident as wrong and illegal, but denial of victimhood" (p151). Participants in this research were aware "of the negative societal reactions to victims" (Fohring 2018b:155) and whilst one recognised that this was wrong, others took "steps to distance themselves from the stereotype" (Fohring 2018b:156). For those who did not meet the stereotype of the ideal victim this makes sense, as they would not receive the sympathy and support offered to those who do (Christie 1986) but it is important to note that individuals in this research made a conscious choice not to accept the victim label when they had been harmed. One participant shared that whilst they recognised that what had happened to them had been a crime, they did not consider themselves to be a victim of that crime as they did not meet their own pre-conceived notions of victimhood, likely influenced by the 'ideal victim' (Fohring 2018b). As Fohring (2018b:160) points out, her findings "add to our understanding of avoidance of the victim label" that it may not be because of the stigma attached to the label, but because they are strong and do not need the label. This does not, however, consider Hopkins Burkes (2014) assertion that it is when others apply the label that the associations of the label are recognised.

There is nothing wrong with an individual's choice to reject a label assigned to them as a result of an experience, however in England and Wales we now have a Victims and Prisoners Act (2024) and victim support services which are commissioned by Police and Crime Commissioners (see Chapters 3 and 4 for more detail). Here it is clear that the term being used is 'victim' but if someone rejects the victim label in favour of that of being a survivor, or a person who was harmed/wronged, how can they access victim services in their area when victim services require an individual to acknowledge that they are in fact a victim? Participants in this research have been asked about the acceptance/rejecting of this victim label, which is given further consideration in the results and discussion.

Victimological Theories

As there has been more attention given to victimisation and the view of victims and victim identity, so theoretical perspectives have multiplied. Starting with individual victims of conventional crime, then leading to considering victim identities, and views of different specialist forms of crime including abuse and state crime. Initial studies on the role of the victim and their interaction with the criminal justice system took into account views of victims themselves, but as victimisation surveys developed, so experiences of victimisation were tied in with policies on prevention and more quantitative and sometimes positivistic studies on the prevalence of victimisation as opposed to the views of the victim (Francis 2017).

Critical victimology was developed by Mawby and Walklate (1994:177) who encouraged the "critical evaluation of the influence of positivism on victimology and assumptions emanating from such research". Francis (2017:95) describes critical victimology as being about "understanding the complex interplay between agency and structure, and of how individuals' actions and experiences take place in particular material conditions". Critical victimology shows that becoming a victim is a social process which requires recognition (Marshall 2024). Cultural victimology, in turn, has developed from critical victimology (Walklate et al. 2019). Arfman et al. (2016) take the view that victimhood

should be a "cultural object of study" (Francis 2017:99) for three reasons: 1) that law is "punishing the poor"; 2) legal definitions are culturally embedded and 3) because there is a public aspect to victimhood, embedded within our cultures (Arfman et al. 2016:2-3). Cultural victimology has, itself, led to the development of the idea of a narrative victimology.

The positivist school of thought is focused on obtaining data from that which is measurable, such as the rates of crime recorded within victimisation surveys (the Crime Survey for England and Wales) and police recorded data. Through this data patterns and typologies of victimisation have been established and have been used to help inform policy (Walklate 2015), however there is ongoing critique about the lack of focus on victims' experiences (Cook and Walklate 2019). This is where Pemberton et al. (2018) and others feel that a narrative victimology comes in.

In contrast to positivist victimology, narrative victimology does not focus on measuring the nature and extent of crime, rather it is focused on the experience of the individual who has been harmed (Cook and Walklate 2019, Pemberton et al. 2019). Narrative victimology examines the victim experience through the victim's story, told in their own words. This may be referred to as their biography, life story, personal testimony or narrative and these terms are often used interchangeably, but the key focus of this is understanding through their story what happened, the impact this had on their lives, how it impacted their lives, what actions they took as a result and may inadvertently highlight, through the telling of their story, the points of most significance to the victim (Hourigan 2019, Walklate et al. 2019).

For Pemberton et al. (2019) a narrative victimology is needed to help supplement the existing body of research within the field of victimology as victimology is focused upon the mechanics of victimisation as simply being set within the cause and effects of a crime. This recognises that an individual was harmed and was affected as a result of that harm and subsequently need restoration to the person they were before the crime was committed against them (Pemberton et al. 2019). What Pemberton et al. (2019) are proposing with their viewpoint of the narrative perspective is that victimisation is more dynamic and not simply an act and its effects, but rather an ongoing part of an individual's life story, likely to change the individual's sense of self and therefore the trajectory along which their life story was travelling. This break in the life story of the individual has lasting impacts along the course of their life story, leading to Pemberton et al. (2019:398) questioning "whether it makes sense to separate the victimization from its aftermath".

Whilst many have written in the last decade about not only a narrative victimology but a narrative criminology as well (see Presser 2013), Pemberton and colleagues make a number of suggestions and assertions about the use of and potential benefits to the study and understanding of victimology when it comes to taking the approach of a narrative victimology. Pemberton and Aarten (2018), for example, compare the victim narrative to the perpetrator narrative and allege that there is an exaggeration from the victim and a minimisation from the perpetrator:

> Victims see the event as an injustice, exaggerate the impact, minimize the context and extend the time frame of the event forward and backward in time, while "perpetrators" tend to find justifications for what happened, attribute the event to outside causes, minimize the impact on the victim and see the event as a moment in time (p543).

Whilst some (see Walklate et al. 2019; Hearty 2021) have applied the narrative victimology to selected case studies to further explore the theory, here Pemberton and Aarten (2018) push a stereotype of offenders minimising the impact of their actions and victims exaggerating it. This view is in direct contrast with Shapland et al. (1985) who found victims of crime downplay or minimise the impact, and Fohring's (2018b) finding that victims did not accept that they were victims. Furthermore Pemberton et al. (2018) posit that they offer a "novel approach to the difficulties experienced by victims" (p404) and write with authority about the victim narrative without application, or the voice of the victim.

Hourigan (2019) points out that whilst the subfield of narrative victimology itself may be in its infancy, the narrative of victims has been used in a wide-ranging array of research studies from trauma to policy to restorative justice at least from the 1980s. Attempts may be seen sometimes in the presentation of victimisation data, and the inclusion of a case study or in the well publicised cases which have been used to inform policy change, for example the introduction of Sarah's Law and Clare's Law in England and Wales. These specific cases, however, could be said to "count more" as a result of the socio-political context at that time (Walklate et al. 2019). As can be seen later in this chapter (see *The History of Victims' Roles and Support Agencies in England and Wales)*, early work with and about victims and victimisation was about the victim's voice, before the system took over and focus shifted to the differences between the two, before the victim's voice was used for political purposes to enable more punitive action to be taken. For those who have been the victims of domestic abuse, the Domestic Abuse Commissioners Office has started to make some changes, setting up "Voices at the DAC … a virtual platform for victims and survivors of domestic abuse to stay connected to relevant policy, research and practice development" (Domestic Abuse Commissioner 2024). Furthermore, the statutory guidance issued under the Domestic Abuse Act 2021 for the delivery of support to victims of domestic abuse in domestic abuse safe accommodation services included a requirement for someone to represent the voice of victims on local authority domestic abuse partnership boards (Department for Levelling Up, Housing & Communities 2021).

The Effects of Victimisation

Victimisation is far reaching. This means that victimisation affects not only those directly harmed and their behaviours, but also the reactions and behaviours of those around them and whom they come into contact with. Understanding the effects of victimisation helps to identify victim needs, and thus identify services to support victims with those support services based on need (Mawby and Gill 1987) and, as Shapland (1984) and

Shapland et al. (1985) point out, need is based on what an individual understands they ought to need based on societal responses to what an individual should need in those circumstances. Therefore, if their experience is that they should not expect anything, they may understate their need (Mawby and Gill 1987).

It is, however, important to consider that the effect of a crime does not necessarily signify a need for which a victim requires support (Shapland et al. 1985). Rather, they may be a measure of what the victim felt was important enough to be mentioned at that time. Despite this, the identification of effects and therefore need to alleviate these effects should not be discounted and could help distinguish between different levels and different types of need (Shapland et al. 1985). Some of these may require specialist intervention whilst others may be helped by the informal support of family and friends (Brickman 2003). When it comes to unmet needs, however, the most prevailing unmet needs in this early research were around a lack of information about their case. Some, such as burglary victims, had a need for more practical support such as changing locks and Brickman (2003:149) proposed "adding or supplementing service components that aid victims with their immediate and tangible post-crime needs". When it came to understanding support for victims and addressing their needs, issues identified included a lack of acknowledgement by the police of less serious crimes; a lack of understanding of the service/programme and what it was able to offer; a lack of awareness of the support available; services not meeting need and services reaching out to offer support victims too late (Brickman 2003).

Goodey (2005:121) explains that "in the aftermath of crime different victims have very different needs" and this may be in the short term or longer term (Shapland et al. 1985). Needs may range from the practical to the emotional, the material to the social, and just like no two individuals are the same, no two victims are the same and even when similar crimes have been committed i.e. two burglaries, two assaults, no two reactions, impacts or needs are the same (Goodey 2005). In keeping with this, Zweig and Yahner (2013) broke down support for victims into the following all encompassing areas: safety and crisis intervention; individual advocacy; emotional support; legal advocacy; child advocacy and financial compensation.

Maguire and Corbett (1987) highlighted that the topic of victim need is problematic and rather than discussing an individual's needs they found themselves discussing the effects of the crime. This makes sense as the need is what is required to resolve the issue, whilst the effect is the outcome of the crime for the victim concerned by that, therefore one victim may have a different need for addressing that effect compared to another. For example, one person in need of practical support following a burglary may need someone to come in and resolve it for them, whilst another may have friends/family who can physically do that for them but require advice/guidance as to the best course of action to secure their property against future victimisation.

Shapland and Hall (2007) explored the effects of victimisation, and highlighted the following as the most commonly occurring effects of victimisation, falling within the ranges of practical, emotional, social and material needs:

- Physical injury as a direct result of the incident, requiring support in addressing the injury, but could require ongoing support if serious;
- Shock at what has happened, often a short term effect which could dissipate over time, but which may also grow into distrust and a lack of faith in those around them that something like this could happen;
- Guilt about the fact that they have been a victim, often assigning blame on themselves for being in some way responsible for what has happened to them, but also guilt for the impact this may be having on those around them, again blaming themselves. This can sometimes lead into short and long term feelings of fear of this potentially happening again, and anger at themselves for their failure and others who they blame;
- Financial loss from the incident itself e.g. damage to property, theft of items, from repairs, time off work undertaking work needed or because of injury, costs of travelling to the police station or court to make statements or give evidence, cost of claiming through insurance and cost of implementing additional security measures;
- Psychological effects which may be short term as a direct result and lead to incidences of anger and fear but could lead to longer effects of depression and anxiety which can include trouble sleeping and constant replaying and reliving of the incident;
- Consequential effects, that is the changes in an individual's perceived threat of victimisation, as a result of what has happened to them, leading to changes in behaviour; and finally
- Social effects which may involve an individual changing their behaviours, avoiding friends and family and social situations they no longer feel comfortable in, often as a result of the fear of finding themselves revictimised.

The Crime Survey for England and Wales talks about the impact of crime using similar categories: physical harms, emotional or psychological harms; financial or economic harms and privacy (ONS 2022c). In 1987, Maguire and Corbett found that the most frequently identified effects of crime were anger, fear and worry. The most frequently identified emotional impacts of crime in the Crime Survey for England and Wales from April 2012 to March 2023 across all incidents of violence were annoyance, anger and shock (ONS 2024), showing nearly 40 years later that there are still very similar impacts/effects of crime on victims.

There is no right or wrong way for an individual to experience these effects; there are multiple factors – both internal and external – which will impact how an individual is affected by an incident, when they feel this and how long they experience it (Shapland and Hall 2007). As Lens et al. (2017) point out, the consequences of similar crimes may result in different experiences for the victims of those crimes but this should be considered in the support and assistance that is offered to the individual affected.

These effects directly impact the individual who has been victimised, however, victimisation may also be indirect with these effects also felt by those around them – friends, family, colleagues and the community in which they live (Shapland and Hall 2007). These effects have been seen to be powerful, especially in relation to homicide,

however, it is almost impossible, as with direct victimisation, to predict who will suffer which effect, and the extent to which it will impact them. The effects of victimisation may vary from person to person depending on a variety of external factors including whether they have been a victim of crime before, other events in their lives and whether they have informal support networks in place already (Brickman 2003; Walklate 2017).

In addition to what could be termed the 'normal' effects of victimisation, because these are experienced by many victims, additional effects surround the reactions and behaviours of those individuals around the victim.

Fohring (2018b:152) highlighted that to be a victim is to have a stigma attached to you, one which brings "blame, derogation, weakness and shame" on an individual, and has even led to the "prosecution, ostracization or even a violent death" of these individuals. These negative reactions to victimisation can be seen in the public naming of footballer Ched Evans' alleged victim online, forcing her to change her name and move on numerous occasions (Press Association 2014b) and the stoning to death of a 13 year old girl in Somalia for reporting that she had been raped (Howden 2008).

Reactions to victimisation are not always this extreme, however they are also not always positive or supportive. In order to be afforded the status of victim an individual must first achieve it, starting by recognising that they themselves "have been victimised" and by "claiming the victim label" (Walklate 2017:35 and 36). Identifying as a victim ensures access to support services (positive), but may lead to an individual being considered to be weak and vulnerable (negative) (Fohring 2018a), with victims weighed down by the "negative imagery that connotes their status with that of the 'weak' underdog" (Goodey 2005:11). This can lead to an assumption that victims are not in fact people capable of making their own decisions, but individuals to be treated as "objects of our guardianship" (Weisstub 1986:196), for whom decisions should be made in a misguided attempt to protect them from further harm. This decision making can be seen in agencies deciding, for example, not to make an offer of restorative justice known to a victim to 'protect' them, instead of returning the power to them to make a decision for themselves (see Banwell-Moore 2019); or in the real life example described by Reemtsma (1996, as cited by van Dijk 2009) where someone who had been a victim was to present at a conference only to discover, upon arrival, that organisers had made the decision to remove him from the list of speakers without consulting him because they did not consider him fit to participate because of his experience, when in fact he had been looking forward to it.

Following the initial victimisation incident, the victim is usually offered sympathy and support (van Dijk 2009). However, some people will react to an incident of victimisation through avoidance of those directly affected, as experienced by family members of those killed in the Sandy Hook School shooting who recalled "Friends disappeared, their children's friends stopped inviting them over to avoid difficult conversations and explanations" (Cacciatore and Kurker 2020:6). Victims of crime may be viewed as being either deserving or undeserving (Walklate 2017). A deserving victim is an individual who easily acquires the victim label, someone who perhaps cannot be held responsible for what has happened to them, the 'ideal victim' as identified by Christie (1986), whilst the

undeserving victim may be an individual who can never be viewed as being a victim because they themselves have already been labelled an offender. For example, an offender in prison serving a sentence for committing a crime who is then the victim of an assault is unlikely to elicit the sympathy to allow them to acquire the victim label because they are undeserving of this, as per Mendelsohn's 'most guilty victim' (Walklate 2017). As Walklate (2017) points out, to be a victim is something which one must achieve. This is a process which requires the individual to recognise that they have in fact been victimised. They must then claim this label and embrace this new identity of the victim. However, as van Dijk (2020) indicates, the rules as to how a victim should behave are decided by society, through the social labelling of an individual as a victim. Much like the way in which labelling theory assigned specific behaviours to those labelled deviant, those labelled victim have similar expectations thrust upon them (Becker 1997, van Dijk 2020). To fail to behave as the label requires the victim to behave leads to the withdrawal of compassion and sympathy which experiencing victimisation would otherwise elicit (van Dijk 2020).

Should a victim fail to live up to the stereotype of being vulnerable and helpless, they can find that the support and empathy that was offered is gone with their recognition as a victim in social or policy terms not being straightforward (Walklate 2017). This stereotype requires the victim to take a passive role whereby their reactions are restricted, they cannot seek revenge on their offender, and they must simply accept what has happened to them as society labels them a victim by way of acknowledging their suffering (van Dijk 2008). Those who demonstrate anger, are unforgiving of their offender or find some inner strength may fail to live up to the 'ideal victim' expectation and may therefore lose the compassion, respect and support previously on offer to them as an individual who has been wronged (van Dijk 2009).

van Dijk (2009) highlights three common threads identified from the consideration of the autobiographical accounts of high profile victims who would be considered to be at odds with the preconceived, stereotypical view of victims as helpless, passive and forgiving. First, there is the unexpected discovery of inner strength in being able to deal, not only with the victimisation incident/s but the aftermath also. This can be seen in the secondary victimisation of Natasha Kampusch by the media as initial outpourings of sympathy for the terrible experience she had been through were replaced with aggression and hatred as she and her mother were publicly accused of being accomplices in her own kidnapping as she sought to stay strong and balanced in the aftermath of her return, with this assertiveness not portraying her as the victim she was claiming to have been, and Ms Kampusch herself rejecting that label:

> I am not a victim simply because other people say I am. Other people cannot make you a victim, only you can do that ... I want to be taken seriously and for the events of my case not to be swept under the doormat (van Dijk 2009).

Second, there is the anger, vengeful thoughts and refusal to entertain the forgiveness of the offender, which provided a "surprising healing power" to some (van Dijk 2009:10); and finally, the third thread is the engagement of victims of crime in supporting other victims through charity work, donations, establishing of foundations and more. This was

seen in the work of Ger Vaders, a survivor of a terrorist train hijacking in The Netherlands who was very vocal and active when it came to improving services for victims:

> I felt strongly that things should be done differently. That we should get rid of the way we are treating victims as losers, dependent children. As if such experiences turn you from one day into the other into a retarded person. To be a victim seemed to mean that others were free to decide what I had to think, feel and do. Humans always remain individuals. They deserve respect (Vaders, cited in van Teeseling 2001, cited in van Dijk 2009:16).

Here, Vaders highlighted decisions being made for him, across a variety of spectrums.

An unfortunately common reaction to victimisation is scapegoating or victim blaming, most often seen following sexual offences against a woman such as 'she was drunk', 'she was wearing a short skirt', 'she shouldn't have walked home in the dark', offering those who proffer such blaming tendencies the opportunity to reassure themselves that they live in a just world and that the age old teaching seen everywhere that "good things happen to good people, bad things happen to bad people" (Pemberton 2012:45) can be applied here, albeit slightly differently. Here the implication is that because something bad has happened to them they must be bad themselves, or, as seen in the example above, irresponsible, and they are partially to blame for the crime that has taken place against them (Pemberton 2012).

Victim blaming can come from anyone and anywhere – a person's social environment, officials, the media – and sometimes is provoked by the resilience shown by the victims in coping with what has happened to them (van Dijk 2009). It could be argued that the strength shown by the McCanns and focus on their other children following the disappearance of their daughter Madeleine in 2007 led to elements of victim blaming because they did not show stereotypical victim behaviour in public, instead making an effort to keep their daughter's name in the public domain. As Jacoby (1983, as cited by van Dijk 2009) points out, the assertiveness of victims may be resented by the public at large who do not want to be reminded about a bad thing that happened and want the victim to stop sharing about it.

So what is the expected reaction and role of the victim? "A good victim is before anything else someone who is negatively defined: not intelligent, not visible, not verbal, not angry. The only permitted mode is: keep sobbing and be silent" (Mrs Lamplugh: cited in van Teeseling 2001, cited in van Dijk 2009). Many victims fail to live up to this stereotype, particularly those who have suffered very serious offences. For example, when kidnap victim Sabine Dardenne from Belgium spoke out publicly against the narrative put forward by the offender, amplified by the media, and later taken up by the prosecution of a group of highly placed individuals kidnapping and abusing children and he simply carried out their orders, the prosecution and some of the media turned against her and made her out to be an unreliable witness (Dardenne 2004, as cited by van Dijk 2009).

Similarly, here in the UK John Tulloch, a survivor of the London bombings in 2007, spoke out against the narrative which had been created of him and his views:

> *I was indeed the man of the photograph but at the same time, I was much more than just victim. I am someone with a personal opinion, while victims only serve to convey the prevailing political agendas of the media. And that is exactly what happened when The Sun put my wounded face on its front page* (Tilburg Research, March 2008, as cited by van Dijk 2009).

Historically, the media have played a large role in the secondary victimisation and victim blaming of victims of crime who have failed to toe the line as far as they are concerned, assuming an individual's personal life and experiences as public property, there to serve up to the masses as they see fit, evidenced by the change of the media from sympathetic and supportive to aggressive when access is not readily available to them (Reemtsma 1997, as cited by van Dijk 2009).

In highlighting the stereotypes of how a victim is expected to behave and react, van Dijk (2009) has highlighted a pattern for secondary victimisation. Those who are victimised receive sympathy and support from those around them and the public at large. If they accept this sympathy and support, do not interfere with investigations or make critical statements but simply continue to comply with the expectation of victims as being vulnerable and helpless then this sympathy and support will continue. However, should a victim show resilience towards what has happened to them, criticise officials or criticise the handling of a case, reclaim their autonomy as a person or even demonstrate understanding for why an offender did what they did, as Ger Vaders, the survivor of a terrorist train hijacking in The Netherlands did (van Teeseling 2001, cited in van Dijk 2009), then that sympathy and support is removed and instead they experience secondary victimisation as they are accused of sympathising with the offender and even being involved.

The causes of the effects of victimisation are not simply limited to the direct impact and subsequent effects of a crime carried out against an individual, but the wider effects created by the views, behaviours and reactions of those around the victim and wider society. All of these must be taken into consideration by service providers, Police and Crime Commissioners and policy makers in identifying the needs the effects of victimisation create and the services best placed to manage these needs. It is not as simple as saying 'this person has been the victim of burglary, they need counselling' as there are other effects and other needs at play which other services, such as restorative justice, could help to address, but also it fails to consider the impact processes after an incident of victimisation can have.

The History of Victims' Roles and Support Agencies in England and Wales

The focus on victims across England and Wales today is on a need to be inclusive of victims within the criminal justice system, reduce harm, avoid revictimisation and support them. This has all come about from the Western focus of crime being an act committed against the state, with the victim sidelined to the role of witness, despite being harmed physically, emotionally, psychologically or financially (Rock 1990).

For centuries prior to the twentieth century, legal proceedings were implemented by victims and victims were involved in the "prevention, prosecution and detection of crime" (Godfrey 2018:14), with responsibility for justice falling on the victim (Daigle 2013). Without victims, there would be minimal recorded crime prior to the late 19th century (Godfrey 2018).

Shifts in focus led to crime being considered "an offence against God and the King's peace", as opposed to the individual victim (Godfrey 2018:14), with the conflict being "taken away from the parties directly involved" (Christie 1977:1). Subsequent monarchs took this further by attempting "to increase the role of the state in the prosecution of offenders" (Godfrey 2018:14), with the state increasingly taking over cases instigated by the victim, making it the property of the state, rather than the victim (Christie 1977). Whilst earlier punishment often included financial compensation being paid to the victim, the state also required fines, including fines to victims who withdrew their complaint and the threat of fines to 'encourage' victims to appear in court (Godfrey 2018).

For a time, the state only pursued "major offences which threatened the economic or political well-being of the ruling elites" (Godfrey 2018:15), using high profile offences (particularly treason) to reinforce its authority. Any other cases therefore had to be pursued by individuals and were therefore privately funded, and also saw the erosion of community support for victims of crime (Godfrey 2018). A number of groups/agencies were set up to tackle offending and support victims, for a fee (Godfrey 2018).

In the 19th century Jeremy Bentham argued for a utilitarian system, a system which "would provide for the victim, either from the offender's estate or, if impractical, from the state" (Mawby and Gill 1987:36). In time, the uniformed police (initially established in England in 1829), which took over from the former watchman system, in the absence of a state prosecutor, became the main instigators of criminal prosecutions (Godfrey 2018). This pushed victims further out of the process (Godfrey 2018) to the role of merely witnesses (Rock 1990), with all offences now "regarded as the concern of the State, its prerogative and duty" (Antilla 1986:239). This approach has continued to this day.

The need for support and what support is needed "depends on both the type of definition employed and the definer" (Mawby and Gill 1987:28). Support services for victims of crime took some time to develop, with most support still expected to be drawn from family, friends and the local community.

Victim Support

The agency Victim Support started as a locally-based group/project in Bristol in 1970, the "Bristol Victim-Offenders Group" (Mawby and Gill 1987, Mawby 2016, Newburn 2017, Shapland 2018), before Bristol Victim Support was launched in 1973/4 (Mawby and Gill 1987, Simmonds 2013, Mawby 2016, Simmonds 2016, Davies et al. 2017), finding there was significant demand for support (Hoyle 2012, Newburn 2017). A number of areas across England and Wales followed Bristol's example, setting up their own, locally-based victim support service, following the Bristol model of having in place a paid

coordinator overseeing volunteers who would deliver the services (Mawby 2016). The idea was that once a referral was received, the coordinator would assign the case to one of their volunteers who would then do a cold call visit to the victim's house (Simmonds 2013, Shapland 2018).

The approach taken by Victim Support allowed for them to offer support at four distinct levels (Maguire and Kynch 2000, Mawby and Simmonds 2008, Mawby 2016). Firstly, they provided personal support including reassurance from volunteers that someone from the community does care and is able to support the victim (Mawby 2016). Secondly, they enabled the provision of immediate practical help when this was needed, for example changing locks on a front door that had been kicked in, direction to crime prevention advice etc. (Mawby 2016). Third, they provided information and advice on what services etc. may be available to victims in these circumstances whether this be something like compensation or additional security measures (Mawby 2016). Finally, volunteers were able to act as a link between the victim and the police and provide the victim with details of the progress of the case (Mawby 2016).

Maguire and Corbett (1987) explored the effects of crime and the work of Victim Support Schemes, noting that the early schemes "had no political aims or hidden agendas" (p2). Their aim was to simply 'reach out' to a victim of crime, "rather than leaving it to victims to ask for help" (Maguire and Corbett 1987:2). In their research, Maguire and Corbett (1987) found that the initial reaction of those approached by the Victim Support Schemes was favourable, although 5% reported that they felt embarrassed, 7% reporting feeling 'irritated' or 'annoyed' by it, and 10% shared that they were suspicious of the approach, with telephone approaches being the most likely approach to generate annoyance. This early scheme started with just one short visit, with participants reporting that it was helpful to have someone to talk to about "the emotional impact of the offence" (Maguire and Corbett 1987:72). Over time the scheme and services changed to offer support over a longer time period (Maguire and Corbett 1987).

Finally, Maguire and Corbett (1987:209-210) posited that there were three approaches which may be taken to offer support to victims of crime:

1) That it be seen as a 'charitable act' as they provide "a humanitarian response to people in trouble"
2) That it be seen as a necessary service provided by statutory organisations or large voluntary organisations such as Citizens Advice
3) That it be a 'rights'-based approach where "it is incumbent upon the state to ensure that certain responses are made to <u>all</u> victims, <u>regardless of needs</u>[2]".

Since 1987, all of these approaches have been taken, from the independent charities set up to offer support, to the funding of Victim Support to help all victims who were automatically referred to them, to the introduction of the Victims and Prisoners Act 2024 which places duties on statutory organisations such as the police and local authorities,

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[2]Emphasis in original text

and finally brings into law victims' rights under the latest Victims Code (see Chapters 3 and 4).

Victim Support saw rapid expansion from one scheme in 1974 to 30 in 1979 when a national association was set up (Rock 2004, Shapland 2018). Around this time, the Home Office also promised £10,000 of funding a year for the next three years, before the Home Office agreed to a £9 million grant over three years in 1986 (Rock 1990, Simmonds 2013, Simmonds 2016). Following the establishment of the National Association of Victim Support Schemes, expansion continued and by 1989 there were almost 300 schemes operating across England and Wales (Simmonds 2013, Shapland 2018).

At first the referral process was one where the police selected the victims they believed were in need of support, reminiscent of the 'ideal victim', before moving to a process of "'automatic' referral" for "suitable categories of cases" (Mawby 2016, Shapland 2018:203) on an 'opt out' basis (Simmonds 2016). Taking into account scope and experience, referrals were initially received for burglary victims and victims of violence (Mawby 2016, Simmonds 2013, Simmonds 2016, Newburn 2017, Shapland 2018). After a time, specialised training became available for volunteers and Victim Support were then able to offer their services "to all serious cases with an identifiable victim" (Simmonds 2016, Shapland 2018:204).

As Victim Support schemes increased, so did the number of referrals received – at quite a rate. In 1979 there were 18,000 referrals, increasing to 65,000 in 1983 and 257,000 just three years later (Rock 1990). As the number of referrals and workload increased, Victim Support had to rethink their approach to victims of crime and, instead of cold call visits, started to telephone and write to victims of crime, sending them leaflets and information about the support services available to them (Hoyle 2012, Mawby 2016, Shapland 2018), though they confined themselves to individual victims of crime and small shops.

By the year ending March 1999 Victim Support had an income of over £13 million, with all but £275,000 coming from the Home Office (Mawby 2016, Shapland 2018). Part of this funding was for the running of the new Witness Service, providing trained volunteers to support victims of crime and witnesses of crime at court (Shapland 2018). With such significant funding from the Home Office, and a contract for the Witness Service, Victim Support had to account more for what the service was that they were delivering with the funds provided (Mawby 2016, Shapland 2018). As accountability became more of a focus for public services generally, the National Audit Office suggested to the Labour government in power at the time that a solution to blindly funding one service could be found through the introduction of a competitive bidding process. However, the Labour government at that time favoured a management approach, focusing on centralising these services so that they were "more directly accountable to central government" (Mawby 2016:209, Simmonds 2016), quite different to the Coalition government focus in 2014. This new government bidding focus led to a restructuring of Victim Support to reflect more the criminal justice areas already established and as a cost cutting measure (Mawby 2016, Simmonds 2016). Further change took place in 2007 when Victim Support members voted to create a single national charity, with a regional structure to allow local representation (Mawby 2016). Victim Support saw a significant increase in their income

with a 50% increase from the government in 5 years, and in 2010/11 Victim Support had an income of £57.8 million with £45 million of this from the Ministry of Justice, ringfenced for three years (Mawby 2016), whilst other victim services had to actively search for funding to support their work as more specialised services ran alongside Victim Support (Simmonds 2016). At this time, Victim Support had around 6,500 volunteers with 2,600 involved in the community, 3,000 in the Witness Service and 200 in administrative and fundraising roles (Mawby 2016).

Whilst Victim Support has been the only national agency providing generic support to victims of crime, setting the groundwork for where we are today, there are other agencies providing national, but focused, support services to victims across England and Wales. They include Rape Crisis (supporting victims of sexual abuse), Women's Aid (supporting victims of domestic abuse), Refuge (supporting victims of domestic abuse), and SAMM (supporting individuals bereaved through murder or manslaughter).

Over time local organisations have been providing this specialist support, whilst working closely with national organisations. They too have had to actively seek funding to enable them to offer specialised support to victims of crime. Some of these have their own local helplines as opposed to national ones, although the national specialist support is still available.

Since 2012 the Coalition and subsequent Conservative governments have made significant changes to the funding of the voluntary, not-for-profit sector (see Chapter 4). In the past, agencies were awarded grants, as Victim Support once were, towards the delivery of a service. However, the Coalition and Conservative governments moved towards a competitive tendering process, whereby agencies must submit details of their planned services and full costings in competition with other agencies to be awarded the funding. This was not only happening in victim services but was already attempted for probation with the privatisation of half of probation and payment by results (though this is a slightly different model). However, the reform of probation was not successful and probation returned to a more state-run system at the end of 2020 (BBC 2021b). Contractual power was also decentralised for support services and crime reduction more generally, as from 2013 the government devolved funding to locally elected Police and Crime Commissioners for victim services (Shapland 2018). The devolution of funding for victim services meant a change to a system whereby most services are now provided on a localised basis, with some exceptions for larger, national services (Hall 2018).

Summary

The origins of our understanding of the victim lead far back into history and it is important to understand the origins to help better understand the meaning of the word today. The changes in meaning have been slight but effective, from the suffering of Jesus Christ as a sacrifice for the sins of others, to his suffering of the sacrifice itself making him a victim (van Dijk 2009, Galona 2018). Understanding the meaning of the word victim and its

connotations are key to understanding the choice of words being used today as society fails to recognise its most appropriate use and it is instead linked with negative connotations such as weakness. Many are keen to highlight the role of the victim voice, with Simmonds (2018b) finding individuals often make a conscious choice as to whether or not they are a victim, or prefer not to use that term.

In 1987 Maguire and Corbett pointed out that there was a good case for the government being responsible for ensuring there were adequate services available for individuals suffering as a result of being a victim of crime. The changes in support for victims in England and Wales hopefully mean that support is available for all victims of crime, not just those deemed worthy of it. We turn to look at this in the context of the devolution of the commissioning of services for victims of crime in the next chapter.

Chapter 3

Policy and Legislation

The commissioning and delivery of victim support services has undergone significant change in the last ten years, moving from a largely government-led national system of support to a more localised approach. The previous chapter briefly explored the historical background of the development and understanding of victims and victimology, their needs and victim support services. This chapter will consider the legislative and policy changes including ongoing amendments to the Victims' Code and the long-awaited introduction of a victim's law. The chapter covers government proposals up to May 2024, when the Victims and Prisoners Act became law.

This chapter is rather unique in that it was written, developed and updated in real time as consultations took place and updates were released in relation to the Victims' Code and the Victims and Prisoners Act 2024.

Declarations, Charters, Codes, Consultation and the Law in England and Wales

The UN General Assembly of 1985 identified and "recognised that the rights of millions of people around the world who suffer harm as a result of crime and abuse of power have not been adequately recognised". They therefore published the Declaration of Basic Principles of Justice for Victims of Crime and Abuse of Power (UN General Assembly 1985), which required Member States to take steps to reduce victimisation through community efforts towards crime prevention, and to provide support to victims. This Declaration highlighted what Member States should do, however these were essentially voluntary procedures, designed to be operationalised by Member States.

Whilst the origins and exploration of the term "victim" were discussed in the previous chapter, it is important to consider here the legal definitions, starting with the UN Declaration which defined victims as being:

> Persons who, individually or collectively, have suffered harm, including physical or mental injury, emotional suffering, economic loss or substantial impairment of their fundamental rights, through acts or omissions that are in violation of criminal laws operative within Member States (Annex A, Paragraph 1 1985).

An individual may be considered a victim even if the perpetrator is not "identified, apprehended, prosecuted or convicted" (Annex A, Paragraph 1 UN Declaration 1985) and this highlights the need for victims to be treated with compassion and respect, irrespective of the situation. The term victim is not so narrow as to only include the individual harmed but extends to include their immediate family and individuals who may have experienced harm in attempting to assist a victim or who witnessed a crime (UN

Declaration 1985). It is important that both of these points have been noted in legislation as it ensures that all those potentially impacted by a criminal offence are catered for.

In operationalising the UN Declaration, in England and Wales the first Victims' Charter was launched in 1990 and was seen as being a significant step in ensuring the better treatment of victims (Attorney-General et al. 2001), followed by a subsequent Charter in 1996 before the Code of Practice for Victims of Crime first appeared in 2006 and was subsequently updated in the Codes of 2013, 2015 (Simmonds 2019) and 2020. In May 2024 a further draft Code was being considered for consultation, in line with the Victim and Prisoners Bill which was introduced in March 2023. Since this was made law at the end of May 2024 (see below) it is hoped that the new government has continued revisiting the Victims' Code.

Published in 1990, *The Victim's Charter: A Statement of the Rights for Victims of Crime* set out the rights and entitlements of victims. The revision in 1996 was *The Victim's Charter: A Statement of Service Standards for Victims of Crime* (Criminal Justice 2004, Davies 2015). This is a significant shift from the rights a victim is entitled to, to service standards they may expect to receive.

The Domestic Violence, Crime and Victims Act 2004 stated that a Code of Practice for victims was to be issued. This led to the introduction of the Code of Practice for Victims of Crime in 2006. The Code of Practice set out the following rights of victims which included:

- The right to be kept informed i.e. of the progress of the case, when a suspect is arrested, charged, bailed or sentenced, when the perpetrator is released from prison;
- The right to request extra support in court;
- The right to be referred to victim support services including receiving information on restorative justice;
- The right to make a Victim Personal Statement (VPS) (Domestic Violence, Crime and Victims Act 2004, Victim Support 2019, MOJ 2019a).

The Code of Practice was revised in 2013, with the aim of improving victims' contacts with criminal justice agencies "by providing them with the support and information they need" (Police.uk 2013) and included the clarification of the entitlements of victims "and the obligations of criminal justice agencies" (Victim Support 2019). Specific updates included the right for victims to make a VPS and read their own VPS in court (should they wish and the court support this) (Police.uk 2013, Victim Support 2019). On the surface this seems like an upgrade, that victims may read their own VPS in court, however the 2013 Code still needed to include the right for victims to make a VPS because they were still not always being offered this opportunity (MOJ 2015a).

An updated Code of Practice for Victims of Crime was launched in 2015 (see below), as a direct result of the EU Directive 2012/29/EU, a legal act of the European Union and hence binding on Member States to put into national legislation (the UK was at that point

a Member State). The EU Directive offered an updated definition of a victim in that a victim means:

a natural person who has suffered harm, including physical, mental or emotional harm or economic loss which was directly caused by a criminal offence (Article 2 EU Directive 2012:65).

The Directive therefore requires victims of crime to be recognised and be "treated in a respectful, sensitive and professional manner without discrimination" and individuals subject to such a violation "should be protected from secondary and repeat victimisation, from intimidation and from retaliation", receiving "appropriate support to facilitate their recovery" and "sufficient access to justice" (Paragraph 9 EU Directive 2012:58). The EU Directive (2012) confirms that family members may be considered victims which is important as they may have witnessed the crime or been significantly impacted by it themselves, however the Directive also allowed for Member States to restrict who the rights within the Directive could be extended to, for example they may only offer information about the release of the offender to the direct victim or their immediate family members. This meant that there was a chance that some victims of crime may not be offered support

Additionally, the EU Directive 2012 sets out the very basic, minimum rules to which a Member State should adhere. For instance, Member States are directed on their requirements for supporting victims of crime, but it is left to the discretion of individual Member States how this would be carried out. A deadline of 16 November 2015 was set for Member States to have implemented the minimum requirements, and this was met in England and Wales, and drafted into policy in the Code of Practice for Victims of Crime 2015 (the 2015 Code). The EU Directive 2012 is "unequivocally binding on EU Member States" (Hall 2018:221) and this was the case for the UK as long as it remained in the European Union. After Brexit took place in January 2020 it was unclear whether EU Directives would continue to apply. The European Union (Withdrawal) Act 2018 "took a 'snapshot' of EU law as it applied to the UK at the end of the Brexit transition period on 31 December 2020 and provided for it to continue to apply in domestic law" (The Law Society 2024). As the EU Directive 2012 was not listed in a government schedule for revocation in 2023 it is still believed to be applicable until the UK introduces its own legislation (Gov.uk 2023b).

The 2015 Victims' Code

The 2015 Code sets out on its first page a summary of the key entitlements a victim of crime may have, including a written acknowledgement that they have reported a crime, to make a VPS and to be informed about various stages of criminal justice: the police investigation, decisions to prosecute, details of court hearings and outcomes and any appeal against conviction or sentence (MOJ 2015a). These follow the entitlements set out in the EU Directive 2012. This section appears to be for victims themselves to refer to as the entitlements are listed in terms of – "You are entitled to" (MOJ 2015a:i). However, the writing of the 2015 Code is at times confusing. Sometimes it reads as

though it is written for victims themselves, at others as though it is written for service providers and agencies involved in supporting victims of crime. This seems to be an attempt by the government to ensure it is relevant to all parties: both the agencies required to abide by the 2015 Code and victims of crime themselves whose entitlements are set out within the 2015 Code. Upon consideration of this document, a recommendation for changes to make the 2015 Code more accessible would be to have an individual document for victims summarising the key information for victims of crime, with the full, detailed Code available should they require it. In July 2019, the government realised the need for change and launched a consultation on amending the 2015 Code (see 2019 Victims' Code Consultation).

The 2015 Code was updated as "a key part of the wider Government strategy to transform the criminal justice system by putting victims first, making the system more responsive and easier to navigate" (MOJ 2015a:1), implementing the relevant provisions of the EU Directive 2012 and establishing the *minimum* standards a victim of crime should expect from victim services to which the 2015 Code applies. Interestingly, a number of public sector and statutory agencies are required to provide services in line with the 2015 Code, however it specifically states that "other organisations, including voluntary sector organisations, may provide victim support services for victims but they are not covered by this code" (MOJ 2015a:2). This therefore raises some concerns in relation to the delivery of victim services if voluntary sector agencies are not required to deliver these in line with the 2015 Code, meaning victims of crime could receive a substandard service. It could be assumed that the voluntary sector organisations commissioned by PCCs deliver in line with the 2015 Code because they are a commissioned provider. Or it may have been included as a contractual obligation within the commissioning contract. However, where there are non-commissioned services within the voluntary sector providing support to victims of crime, there is no obligation to fall in line with the 2015 Code. An example of such an organisation would be Women at the Well, a charity based in Kings Cross which supports women who have been the victims of sexual exploitation (Women at the Well 2019). Although outside the scope of this research, it would be interesting to know if these non-PCC commissioned services follow the Victims' Code and if they meet, or even go beyond, the minimum requirements. The 2015 Code again includes the entitlement of a victim to make a VPS (MOJ 2015a). This is unsurprising given the continued failure to follow this requirement, with just one in six victims (16%) in 2017/2018 offered the opportunity to give a VPS by the police in a review of data taken from the Crime Survey for England and Wales (Victims' Commissioner 2018).

2018 Victims' Strategy

The 2015 Code was followed by the publication of the *Victims' Strategy* in September 2018. This Strategy detailed the government's plans to strengthen the Victims' Code and consult and explore the introduction of "victim focused legislation" (HM Government 2018). This included the delivery of a Victims' Law (HM Government 2018) as well as holding agencies to account for compliance and developing "a new delivery model for victim support services, coordinating funding across government" (p8). In 2023 a draft

Victims and Prisoners Bill finally made it to Parliament (see Victims and Prisoners Bill 2023 below).

When PCCs took over commissioning of victim services in 2014, many commissioned pilot projects and reports to explore victim needs in their areas before launching their own services based on the outcomes of those pilot projects and reports (Hall 2018). With this in mind, surely four years (per the 2018 Victims' Strategy) is too soon for the government to be looking at changing the delivery model if there are no reports on the implementation of the original model? Or was this consultation expressly to look at how and where victim services are to be funded in the future? Simmonds (2019) highlights the need to evaluate the model at a point when it is established to gain further understanding and do justice to this work; 2018 seemed like the right time to settle in and evaluate rather than changing the model of delivery without thorough evaluation. This is in line with Shircore and Ladbury's (2009:286) evaluation of commissioning for NHS services which highlighted the fact that longer timescales allow for "meaningful public engagement", increasing the chances of success for a programme/service, whilst saying that there needs to be time for a service to gather momentum and for capacity building as the public may struggle to access and benefit from new services. When programmes/services are short-term it does not allow victims and other agencies time to adjust and become comfortable with a service. All these points are further supported by Gash et al. (2013) who point out that these agencies must be given the opportunity to "prove their worth – and grow" (p4), whilst the poorly performing providers should be brought to a close with minimal disruption for the service users requiring that service.

2019 Victims' Code Consultation

Before a new Victims' Code can be enforced, the Domestic Violence, Crime and Victims Act 2004 requires it to be published in draft form for consultation (MOJ 2019a). In July 2019 the MOJ launched a consultation (as promised in the *Victims' Strategy*) on proposals for the revision of the Victims' Code to run for eight weeks. The MOJ stated that "this consultation is the first stage in delivering our commitment to consult on a strengthened Victims' Code, that will be both clearer, and more responsive to the changing nature of crime and victims' needs" (MOJ 2019a). The consultation set out key points of the Victims' Code which were in line with the EU Directive (2012), noting that agencies were failing to adequately live up to the delivery of victim entitlements under the 2015 Code.

The purpose of this consultation was to obtain feedback on the proposals they were making for change, as well as the views of "victims, charities, criminal justice agencies and anyone else with an interest" on what issues the MOJ should be focusing on (MOJ 2019a). Furthermore, the MOJ were seeing this as an opportunity to reduce the risk of secondary victimisation through the criminal justice process (a serious issue at potentially high risk of occurring), by obtaining feedback from those most directly affected and involved in these processes (MOJ 2019a). They highlighted that their intention was then to consult later in 2020 on a Victims' Law, however this was delayed as additional consultations took place on the 2019 iteration over 2019 and 2020.

The 2019 Victims' Code consultation highlighted the key principles underpinning the MOJ's approach to updating the 2015 Code as being to ensure that victims "receive the information and support they need, when they need it" (MOJ2019a), that the victim's experience of the criminal justice system not be an experience which retraumatises them (secondary victimisation), and finally, that whatever the outcome of their involvement with the criminal justice system, they would be satisfied with the treatment they received.

A number of changes in relation to victims' experiences and services had taken place since the 2015 Code. These included:

- CPS Speaking to Witnesses at Court Scheme – requires prosecution staff to ensure they provided essential information to individuals who appeared as prosecution witnesses at court to allow them to have more of an understanding of what they could expect when they appeared in court to give evidence;
- Justice After Acquittal National Standards of Support – required both the police and the Crown Prosecution Service to follow a set of standards to ensure complete transparency when liaising with the family or representative of a victim after an acquittal for murder (CPS 2019);
- Review of the Parole Board Rules and Reconsideration Mechanism: Delivering an effective and transparent system (MOJ 2019b) – this review came about following the decision to release convicted rapist John Warboys who was jailed indefinitely in 2009 and has led to victims being given the right to challenge parole board decisions through the MOJ (BBC News 2019, Helm 2019);
- It was promised that there would be greater responsibility on PCCs to monitor compliance with the Victims' Code, to be developed with a view to implementation taking place throughout 2019 through "phased implementation of a national compliance framework" (Gov.uk 2019, MOJ 2019a). To date, this has not happened.

As already mentioned above, the 2015 Code was a confusing read, and feedback from victims to the MOJ during the consultation was that the structure and length of the 2015 Code was not "user-friendly" with the language used lacking "empathy and practical information" (MOJ 2019a). It seems to be quite a clinical document, very factual, and informative as it is for everyone but perhaps a victims' code ought not to be one document for everyone but multiple documents detailing the information required for different groups of people, as already intimated above.

The MOJ therefore proposed there be separate guidance to the Victims' Code to be "aimed at victims and practitioners", with additional guidance for practitioners, adults and children/young people (MOJ 2019a). However, they were also proposing changing the overall structure "to a smaller number of overarching rights" (MOJ 2019a). This may be considered to be unlikely to make the Victims' Code more user-friendly, rather it could see victims losing their entitlement to specific rights under the Victims' Code. In the 2015 Code these rights were set out to be as specific as possible to ensure compliance with the EU Directive and the expectations of victim agencies, and therefore providers were accountable. However, if they were to have, for example, one overarching right

such as "the right to be heard", this would take away the more specific entitlement to the right to provide a VPS, rendering it more difficult for victims or agencies to know whether the entitlement had been met. It consequently would lessen the onus on the police to ensure they were offering victims the opportunity to make a VPS. The lack of specifics in terms of how a victim may be heard, could mean it is argued they are "heard" if they utilise a specific victim service. The risk of a simplified Victims' Code, however, was that it may result in victims of crime missing out.

There were plenty of questions which could have been included in the 2019 consultation. The focus of the MOJ seems to have been on accessibility, to the Victims' Code and to the entitlements within as well as making it clear that victims of crime did not have to report the offence to the police (MOJ 2019a). Of concern is the focus on simplifying the Victims' Code when the MOJ were supposed to be working towards a Victims Law. Drafting legislation is rarely simple but may be simplified for explanation; the concern at the time of writing (2019) was if the Victims' Code is being simplified how will the MOJ ensure everything is covered in legislation when the time comes?

Response to the July 2019 Consultation

In March 2020, the response to the 2019 consultation was finally published, together with the MOJ's proposals for revising the Victims' Code (MOJ 2020a). The first part of this document set out the questions to be addressed as part of a further consultation. The second provided a summary of responses including a breakdown of respondents to the 2019 consultation, as well as responses to individual questions set out to show the percentage in agreement/disagreement with the question and a very short description of some areas highlighted by respondents which were then briefly addressed by the MOJ. Further published documents include an Equalities Statement and Impact Assessment, as well as the new proposal for the Victims' Code (no longer titled the Code of Practice for Victims of Crime).

Responses to the 2019 consultation came from 231 different organisations/individuals including PCCs, police forces, members of the public and voluntary organisations (MOJ 2020a). These responses included:

- 76% of respondents agreeing there is a need to strengthen communication to victims from the point an individual is charged with an offence;
- 79% agreeing that a victim's preference in relation to frequency and method of communication be recorded as part of the initial contact, with a need for the victim to be able to update this as things progress;
- 75% agreeing that more discretion was needed as to when a VPS is offered to victims;
- 84% agreeing that victims should be provided with a copy of their VPS;
- 80% agreeing that the right for a victim to access practical and emotional support needed to be clearer in the Revised Victims' Code;
- 65% of respondents agreeing with the changes proposed to the eligibility categories for access to specialist support under the Victims' Code; and

- 65% agreeing that PCCs, together with their local criminal justice partners; should adapt the guidance for victims to explain what is available to victims locally (MOJ 2020a).

There was no breakdown of the groups who responded positively or negatively to a question i.e. whether they were a victim of crime, OPCC or criminal justice agency. One has to assume that the MOJ could review that information as it would have provided further insight into the responses, for example, whether criminal justice agencies and PCCs agreed that they ought to adapt the guidance or whether victims of crime felt that the right to access support ought to be clearer.

The March 2020 Proposed Victims' Code

The Victims' Code proposed for the March 2020 consultation was just 19 pages in length, compared to the 93-page 2015 Code. The 20 summary entitlements of the 2015 Code were also condensed into 12 "Victims Rights" (Appendix E). This was in line with the government proposal to change the structure of the Victims' Code and instead have a small number of overarching victim rights. The proposed Code clearly set out the 12 Victim Rights (Appendix E), with each broken down into what may be included within that Right, the role service providers should play at each stage, the timescales to which they were expected to adhere, and the stage within the criminal justice process where a victim was entitled to receive that Right. Although referred to as "rights" rather than entitlements, these were not yet rights embodied in primary legislation as there was no formal victim legislation in 2020.

The March 2020 proposed Code was rewritten from having a target audience of anyone and everyone in the 2015 Code to being aimed specifically at victims of crime. Whilst 82% of respondents to the previous consultation had been supportive of this change, one has to question the additional workload this would put on agencies and practitioners in needing to be aware of and abide by a Victims' Code, as well as having a separate document setting out information and guidance which, despite being promised has not materialised (MOJ 2020a). The decision to publish a targeted Victims' Code also negates the previous recommendation for PCCs and local partners to adapt the generic guidance to explain local service provisions to local victims of crime as this would be an exercise in duplication as the proposed Code is aimed at victims of crime and written in softer language. A more formal, revised Victims' Code, written to guide everyone, would have worked better, with PCCs and local partners then writing their own, simplified guidance for victims, personalised to their local area.

The proposed Code continued to identify a number of providers with specific obligations, with PCCs being identified as the agency best placed for ensuring compliance with the March 2020 proposed Code. This was a concern because, whilst PCCs are commissioning services to provide a service to victims of crime, some PCCs have kept services in-house – should an agency really oversee compliance for a service they themselves are delivering? Is this not a conflict of interest? Of further concern is the fact that there was no reference to victim support services, simply service providers,

although this could be because highlighting 'victim support services' may be considered as narrowing the field of services/agencies which need to engage with the Victims' Code.

The proposed Code included the same breakdown of organisations which were expected to provide services and meet the rights of victims, as set out in the 2015 Code, with four differences. The 2015 Code included the First Tier Tribunal (Criminal Injuries Compensation) (MOJ 2015a). This was not included in the proposed Code. Secondly, the order in which agencies were written had changed (MOJ 2020a). In the 2015 Code these service providers were written in alphabetical order, as many lists often are, whilst the proposed Code was not. The new list is grouped – first the police-related services – PCC, Police, Witness Care Units – then the courts, then the prisons and probation, then review and compensation bodies followed by the UK Supreme Court and Youth Offending Teams (MOJ 2020a). It could be suggested that this was done in this way because it reflected the order in which a victim may come across these agencies. A second reason could be that the first agencies are more involved with victims of crime and would have more they need to do under the proposed Code, so they appeared higher up the list. The list of "other service providers" has not changed. The third difference is that PCCs and the Victims' Commissioner have their own standalone sections, setting out their roles and responsibilities in relation to the Code (MOJ 2020a), whereas previously this blended in with the rest of the 2015 Code.

For this new iteration, the process for a victim of crime to make a complaint had not changed from the 2015 Code, something which it is felt should have been updated. There was no resource or Right under the proposed Code for an individual to make a complaint through the OPCC, despite the fact that the OPCC has the responsibility of commissioning many of the services providing support to victims of crime (MOJ 2020a). Rather, the 12th Right of a victim of crime was the Right to make a complaint to the service provider and then the Parliamentary and Health Service Ombudsman (PHSO) if they were unhappy with the outcome from the service provider (MOJ 2020a). According to the PHSO (2020) a complaint should first be made to the agency concerned, and if an individual is still unhappy after that, they should contact their Member of Parliament (MP) and request their complaint be referred to the PHSO. Surely a victim of crime should be able to make a complaint to the commissioner of a service, if they are unhappy with the outcome from the service provider?

Finally, the 2015 Code noted that "other organisations, including voluntary sector organisations, may provide victim support services for victims but they are not covered by this Code" (MOJ 2015a:2 no 11). The proposed Code made no reference to this. There was a section on "other service providers", but this simply highlights that the proposed Code for them is limited to their involvement in "investigating and prosecuting specific types of offences committed in certain circumstances" and includes agencies such as the Health and Safety Executive who bring their own cases when there has been an incident requiring their investigation (MOJ 2020a:4). There is no reference to voluntary agencies commissioned by PCCs to deliver a service to victims, or specialist or other services who offer a victim support service. These agencies therefore do not have to abide by the rights and entitlements of victims under the Victims' Code, a gross oversight, particularly given that much, even most support is provided through the

voluntary sector who should be held to the Rights and obligations under the Victims' Code.

The 2020 proposed Code was very brief, and whilst there was reference to young people (under the age of 18) this was mainly in relation to having an offender under the age of 18 and what this meant for victims. In the 2015 Code there was an entire Chapter (16 pages) addressing the entitlements of children and young people and the duties of service providers to this group. Whilst this is very similar to the entitlements for adults, not tailoring this specifically to young people and their parent/guardian could make them feel excluded and confused because things are different when there is a young person involved. The MOJ have talked about having separate guidance for young people and practitioners, but this should have been done alongside the proposed Code for adults, or as already suggested, should have remained the detailed Victims' Code for all, with separate guidance/breakdowns to follow on a localised basis. Failure to make this change for young people at the same time risked causing further harm because there are differences in service provision and experiences of young people. There is now, however, an 8 page leaflet titled "The Victims' Code: U18s. Young Victims of Crime: Understanding the support you should get" (MOJ 2021b). There is, however, still no information about the duties of service providers, which was included in the 2015 Code.

Response to the March 2020 proposed Code

As significant changes were proposed to be made to the Victims' Code, the government launched a further consultation immediately following publication. This consultation was scheduled to run from 5 March 2020 to 16 April 2020 (Gov.uk 2020) but was extended to 28 May 2020 as a result of the Covid-19 pandemic (MOJ 2020b). This consultation was to be the last before the government moved towards the introduction of a Victim's Law, leading to the publishing of the latest Victims' Code (November 2020), which went live on 1 April 2021 (Victims Commissioner 2020).

The 2020 consultation asked seven overarching questions about the proposed changes to the Victims' Code. This resulted in 315 responses being submitted, a 36% increase on the 2019 consultation, with the majority of respondents being members of the public (131, double the number who responded to the 2019 consultation), criminal justice practitioners (57, again an increase on the 2019 consultation) and voluntary organisations and charities (41, a reduction of around 40 responses on the earlier consultation) (MOJ 2020a, MOJ 2020c). Whilst it is positive to note the increase in responses, particularly from members of the public, it is disappointing to note the lack of engagement from statutory criminal justice agencies, especially as compliance with the Code is a duty of a number of statutory organisations, as mentioned above, and their input would have been beneficial. Although 57 individual practitioners responded, there were only 41 responses across Government departments/agencies (12), OPCCs (24) and police forces (5) (MOJ 2020c). It is surprising that more OPCCs, who are responsible for the commissioning of victim services, did not contribute, particularly in the light of the fact the Code identifies them as being best placed to ensure compliance. One would anticipate them wanting some input if they are to have increased responsibilities.

Of consistent concern within the proposed Code was the lack of detail in relation to information about and rights to access restorative justice, with this issue raised in relation to almost all the responses to questions put to the public by the MOJ in this consultation (MOJ 2020c). As a result, Rights 3 and 4 were redrafted as the MOJ acknowledged the earlier changes left out key details around processes (MOJ 2020c) and the redraft made clearer the potential impact and benefits of RJ. Access to RJ is not a right on its own, but is included within the 12 Rights for victims.

In answering whether the proposal to restructure into 12 overarching rights was the correct one, 187 (59%) agreed and 25 (18%) disagreed, whilst 17 (5%) commented but did not indicate agreement or disagreement, and 85 (27%) did not answer the question (MOJ 2020c). Popular responses included agreement that the breakdown into 12 overarching rights not only made it clearer and easier to understand for victims, but this restructuring also helped criminal justice practitioners. Some respondents highlighted the simplification would help support monitoring and compliance with the Victims' Code, although no examples have been given and it is unclear how this will be monitored (MOJ 2020c). Responders expressed concern in relation to the lack of support specifically for those who have been the victim of false allegations or traffic incidents, and some were of the view that the offer/availability of special measures, that is, measures which may be requested by a victim when testifying in court such as pre-recorded video, removal of formal wigs and gowns and no press or public in the court room (MOJ 2020d), alongside restorative justice, ought to be one of the 12 overarching rights (MOJ 2020c).

Some respondents to the consultation still considered the March 2020 proposed Code to be too long and too complex (at 19 pages), however, the MOJ acknowledged that whilst a lengthy document, a shorter version would also be published (MOJ 2020c). From what the researcher could see, the MOJ (2021a) have published a leaflet titled "Victims of Crime: Understanding your rights" which is 16 pages long and talks through what victims can expect from reporting to providing a VPS, to decision to prosecute, to court and trial, to victim contact scheme and parole, to compensation and making a complaint. The leaflet rarely talks about these things being a right but more what they should expect to happen on this journey. In addition, where one clicks on the leaflet to open it, it is actually titled "Victims of Crime: Understanding the support you can expect", which is telling in that it does not allude to victim rights. Comments were also made about referring to 'rights' as opposed to 'entitlements' which they were previously and the change in terminology was felt necessary by the MOJ to "send a clear message to both victims and criminal justice practitioners" (MOJ 2020c:9) about accessing and receiving these services, should an individual choose to utilise what is available to them. It was hoped that this would lay the groundwork for becoming a legal right. When a victims' law was introduced however, as explained later in this chapter, the legislation which we now have simply codifies the need for and conditions around the Victims' Code, the contents of the Victims' Code are not in the legislation itself.

The 2020 consultation asked whether the rights identified by the MOJ covered "the most important needs of victims" (MOJ 2020c:10). 118 (37%) agreed, 31 (10%) did not answer and 166 (57%) disagreed. Of the 37% who agreed, reasons given included the fact that

every step of a victim's journey would now be covered and that the "concise nature" and "improved structure" would not only "help victims to better understand their rights" but the inclusion of timescales would help to better manage expectations (MOJ 2020c:10). Of the 57% who disagreed, feedback included "the need to ensure that victims not only receive their rights but that they receive a quality service" (MOJ 2020c:10), regardless of their immigration status. It is unclear from this whether any changes would be made as a direct result as it is concerning that just 37% of respondents agreed that the identified rights covered the most important needs of victims and should not be considered sufficient.

Of note is the fact that some questioned whether additional agencies such as "Action Fraud, Coroners, the Foreign, Commonwealth and Development Office" and the National Health Service (NHS) ought to be included as signatories to the Code (MOJ 2020c:10). In addressing this the MOJ pointed out that Action Fraud are part of the City of London Police and were therefore included. The Foreign, Commonwealth and Development Office supports those affected by crimes committed outside the UK and therefore the support will vary depending on the laws and practices of the country in which the offence takes place, although they could be clearer on the support that can be accessed in the UK and that this would still be available to a victim of crime on their return (MOJ 2020c).

The MOJ have, however, following agreement from the NHS, added them to the list of service providers to which the November 2020 Victims' Code applies (MOJ 2020c), specifically in relation to Sexual Assault Referral Centres where victims of sexual offences can receive support for both physical and mental harm, irrespective of whether the offence has been reported to the police. This is great news for those utilising those services, but what about other offences which result in physical and mental harm, particularly those which are hidden, for example, domestic abuse? Why are the NHS not required to support all victims under the November 2020 Code? And it remains unclear why commissioned services are not included. Do they simply consider this an extension from the duty on OPCCs? Why is this not explicit in the Code?

The MOJ asked whether the 12 overarching rights covered "the key stages of a victim's journey in the criminal justice system" (MOJ 2020c:12). Whilst 30 (9%) did not respond, 128 (41%) agreed, although there were recommendations for the inclusion of a flowchart which the MOJ confirmed would be published online alongside the November 2020 Code (MOJ 2020c), however to date no flow chart has been added. A further 157 (50%) respondents made additional comments, including highlighting the removal of timescales for referrals to support services (MOJ 2020c). The MOJ response acknowledged that in attempting to allow greater flexibility to PCCs who were identified as being 'best placed' to guide and tailor services in their area this detail was lost, however, Right 4 was updated to reflect that victims should have a referral made within 2 working days (MOJ 2020c).

Victim Personal Statements were again highlighted as a cause for concern as the March 2020 proposed Code did not include a "trigger point" for when an individual should be offered the opportunity to make a personal statement (MOJ 2020c). The MOJ highlighted

that this decision should be up to the victim, but guidance has been included in the November 2020 Code that, for many, "the right time will be when they are informed that the suspect has been charged with an offence" (MOJ 2020c:13).

The MOJ asked whether the inclusion of more practical advice and information is the right approach to the November 2020 Code (MOJ 2020c). 45 respondents (14%) did not answer this question, whilst 117 (37%) did not agree or disagree but did make additional comments and suggestions. A further 7 (2%) specifically disagreed, whilst 146 (46%) agreed (MOJ 2020c). Many responses highlighted the importance for information to be kept up-to-date and the MOJ acknowledged the importance of this as a responsibility for PCCs and criminal justice agencies, as well as themselves (MOJ 2020c). It would be beneficial to include this as part of the November 2020 Code, not just for OPCCs and criminal justice agencies, but also for the agencies providing the support and advice to ensure expectations are clear from the start.

The proposed Code was the first time witnesses were specifically recognised as having support needs which would now fall under the Victims' Code (MOJ 2020c). This would hopefully benefit those witnesses who had been impacted by what they had witnessed, however, with the pool of potential recipients of victim support services being expanded, does this mean funding will be increased to cover this? Furthermore, has much research been undertaken into the needs of witnesses to incidents of crime – do they have the same/similar needs to victims themselves? Would services be able to cater for them? Unfortunately it was too late to consider the repercussions of this for this research as data collection had already commenced, however it will be interesting to see if/how witnesses are separated from victims in future research and in considering the statistics presented by agencies in relation to service users.

In this further consultation, the MOJ also asked whether there was any further important information which should also be included (MOJ 2020c). Additional comments and suggestions included "the importance of signposting to locally available and specialist support services", ensuring victims in custody are aware of and can access support, and a flowchart of the criminal justice journey and keeping information up-to-date (MOJ 2020c). The MOJ acknowledged the importance of this, and highlighted that this forms "an important part of PCCs' and criminal justice agencies' duties in setting out their local offer to victims" (MOJ 2020c:16). This requirement is therefore again being placed on PCCs, who will simply be duplicating the MOJ's work to highlight local provision and criminal justice agencies who, more often than not, are simply going through the motions of the criminal justice process and are unlikely to be the ones offering local support to victims.

The final question of the consultation asked for any further comments on the proposed Code (MOJ 2020c). Respondents talked about raising awareness of the Code for not only victims but practitioners as well, with the MOJ continuing to consider improving wider public awareness, and digital delivery, as well as improving "standards among criminal justice agencies and voluntary organisations" (MOJ 2020c:18), the first mention of voluntary organisations. Concerns were also raised around clarity of complaints, something picked up as part of this research, and it was stated that simplification of this

would be looked at as part of the upcoming Victims' Law (MOJ 2020c). A change has been included within the legislation to amend the Parliamentary Commissioner Act 1967 that a complaint may be made to the commissioner of a service "if the complaint relates to the complainant's experience as a victim" (Victim and Prisoners Act 2024). This is positive to see as, in considering the earlier Codes, this research highlighted the lack of resource to complain to the OPCC, who commission most victim services.

The November 2020 Code

Following the two government consultations on proposed changes to the Victims' Code, the final version of the Victims' Code was published in November 2020. The structure of this Code was vastly different to the one published in 2015 as it starts with the Summary of Victims' Rights. This is useful, however it would be an easier read if each Right was page numbered so that each summary directs the reader where to find the more detailed information, should they require it.

It then goes on to the introduction which has some issues with wording where which Right is being discussed is unclear, although it is thorough. Interestingly, it does not use the existing definition of a victim, rather it takes its own path, in recognition of those harmed not wanting to be referred to as victims (MOJ 2020c, 2020d). The November 2020 Code adds "complainant" and "survivor" to the definition, but continues with the word victim as the all-encompassing word to define "a person who has suffered harm, including physical, mental or emotional harm or economic loss which was directly caused by a criminal offence" and "a close relative (or a nominated family spokesperson) of a person whose death was directly caused by a criminal offence" (MOJ 2020d:3). This definition also includes witnesses, whilst being clearer on eligibility criteria.

The need for a duty to provide regular monthly updates was removed from previous codes, and this decision was supported by both the Home Office and National Police Chiefs' Council because it frees up police time and reduces bureaucracy and allows for the frequency of contact between the victim and the service provider to be agreed between them (MOJ 2020c). There should still be a duty of sorts on providers to have this conversation and ensure all parties are clear on expectations and should PCCs adopt hubs and have SPOCs, this role should fall on the SPOC as opposed to any and all services engaging with a victim.

Support for families bereaved by murder/manslaughter abroad is unclear as it states the Foreign, Commonwealth & Development Office will be able to refer them on to specialist support services (in that country presumably), but it does not say they can receive support here and have Rights under the Code, in fact, they expressly state overseas is different and depends on the country, but the individuals affected may be here.

Page 9 of the November 2020 Code explains the roles of Police and Crime Commissioners and the Victims' Commissioner. The inclusion and placement of them feels almost like an afterthought, as though the MOJ forgot about them but know readers may want to be aware of them. It does not actually make clear just how important these

roles are and their significance, not only to victims but service providers too. As a standalone page this should have been expanded and could have included more about commissioned support services, or even explained the other organisations referred to on the previous page and when they may be encountered. Perhaps this is something PCCs could do as part of their localised approach to the Code.

Throughout the MOJ response to the March 2020 Consultation reference was made to the fact that the Rights under the Victims' Code will "form a key part of a new Victims' Law", with consultation on this to take place following the publication of the November 2020 Code (MOJ 2020c). The introduction of a Victim's Law was promised by the government in 2018, and a consultation should have taken place in 2020. In March 2023 the Victims and Prisoners Bill was finally introduced to the House of Commons (UK Parliament 2024a) (see below) and became law in May 2024 (UK Parliament 2024b).

Delivering Justice for Victims

The government had been promising for a number of years that they would be introducing a Victims' Law and consulting on this, but this suffered significant delays. On the journey to introducing a Victims' Law the government launched a consultation in December 2021 – Delivering Justice for Victims – which ran until February 2022 (MOJ 2021e). The aim of the consultation "was to better understand the experiences of victims and harness expertise from frontline practitioners, as well as charities, specialist organisations, think-tanks, campaign groups and experts from across the criminal justice system, health services and local government" (MOJ 2022b).

The consultation explored two overarching areas: "how to improve what victims can expect within the criminal justice system" and "how to improve aspects of victim support services", focusing on three topics for each area (MOJ 2022b). This yielded a total of 602 responses with 171 being sent via email, with 431 submitted through the online portal set up for the consultation (MOJ 2022b). Responses were received from a variety of different groups including victims, members of the public, academics, frontline staff, PCCs, government departments and agencies, third sector organisations and other/not answered (MOJ 2022b). This is a marked increase in the number of responses received to the 2020 consultation on the Victims' Code (315 responses) (MOJ 2020c), and also a response was received from all PCCs across England and Wales, an increase from around half in the last consultation. After conducting an analysis of the responses to identify key themes the MOJ also helped to facilitate 39 engagement events aimed at frontline professionals and victims to discuss the consultation themes (2022b).

This consultation helped to inform the contents of the Victims and Prisoners Bill 2023, reinforcing the importance of enshrining the Victims' Code in law, alongside strengthening coordination, collaboration and partnership working to deliver more joined up victim support services (MOJ 2022b).

Victims and Prisoners Act 2024

After first making reference to a Victim's Law in 2018, in March 2023 the Victims and Prisoners Bill was finally introduced to the House of Commons (House of Commons 2023, MOJ 2024a). In May 2024 the Bill was with the House of Lords at the Report Stage when the Prime Minister called a general election for July 2024 (UK Parliament 2024a). When a general election is called the Parliament at the time is dissolved but before this happens, in an attempt to stop a bill from failing, the final stages may be fast-tracked in "the 'wash-up'" (UK Parliament 2024b). In the case of the Victims and Prisoners Bill, the third reading with any amendments put forward for discussion took place within the House of Lords, before returning to the House of Commons for 'ping-pong' the following day between the two Houses to address any disagreements (UK Parliament 2024b). By the end of the second day the Bill had been agreed and received Royal Assent meaning that the Bill became an Act of Parliament and is therefore now law (Gov.uk 2023a, UK Parliament 2024b).

This is a somewhat disappointing end to a piece of legislation which has been years in the making, being rushed through in two days to make it law, but it is also a relief that there is finally a victims' law.

The original proposed Bill was split into three main parts: Victims of Criminal Conduct, Victims of Major Incidents, and Prisoners, with a final part around regulations and financial provision (Victims and Prisoners Bill 2023). By the time it became an Act of Parliament this had changed, with the introduction of "Inflected blood compensation" in the wake of the infected blood scandal report coming out around that time (BBC News 2024b). The final Act therefore has four parts: Part 1: Victims of criminal conduct; Part 2: Victims of major incidents; Part 3: Infected blood compensation; and Part 4: Prisoners (Victims and Prisoners Act 2024).

It is disappointing that we are unable to have a Victims Act and that it must be a Victims and Prisoners Act. Why are victims of crime not given the recognition they deserve through their own Act, why must it be shared with those who caused them harm?

The purpose of the Victim and Prisoners Act 2024 is "to make provision about victims of criminal conduct and others affected by criminal conduct; about the appointment and functions of advocates for victims of major incidents; for an infected blood compensation scheme ...", as well as some provision around prisoners (UK Parliament 2024a).

For the first time, an Act of Parliament provides a definition for what is meant by the term "victim". This is set out in Part 1 of the Victims and Prisoners Act 2024:
> (1) ... "victim" means a person who has suffered harm as a direct result of –
>   (a) being subjected to criminal conduct, or
>   (b) one or more of the circumstances mentioned in subsection (2).

(2) The circumstances are –
  (a) where the person has seen, heard, or otherwise directly experienced the effects of, criminal conduct at the time the conduct occurred;
  (b) where the person's birth was the direct result of criminal conduct;
  (c) where the death of a close family member of the person was the direct result of criminal conduct;
  (d) where the person is a child who is a victim of domestic abuse which constitutes criminal conduct (Victims and Prisoners Act 2024).

Part 1 of the Act further sets out what is meant by "harm" and "criminal conduct":
  (a) "harm" includes physical, mental or emotional harm and economic loss;
  (b) "criminal conduct" means conduct which constitutes an offence (Victims and Prisoners Act 2024).

Part 1 further explains that it is immaterial whether an offence has been reported or an individual has been charged with or convicted of an offence; it would still be classed as "harm" and "criminal conduct" (Victims and Prisoners Act 2024). This means that someone may be recognised as a victim regardless of whether an individual has been charged or convicted of an offence so this means that victim services will continue to be available to them, as they do not have to have an identified offender to receive support.

The Victim and Prisoners Act 2024 codifies in law the need for and conditions surrounding the Victims' Code, rather than setting these out within the law itself. In including the Code it recognises the importance of rights for victims of crime, whilst having them set in a Code which is far easier to update than legislation. This Code must be issued by the Secretary of State. The Victims and Prisoners Act 2024 sets out the basic requirements for the Victims' Code:

  (a) Information to help them understand the criminal justice process;
  (b) Access to services which support them (including, where appropriate, specialist services);
  (c) The opportunity to make their views heard in the criminal justice process;
  (d) The ability to challenge decisions which have a direct impact on them.

In addition, the Victims' Code may restrict the victims to whom provisions may apply, but may also expand the provision to include individuals alongside the victim (Victims and Prisoners Act 2024).

As with previous iterations of the Victims' Code (as discussed above) future Victims' Codes will require consultation to take place in relation to drafts, specifically with the Attorney General, the Commissioner for Victims and Witnesses and the Welsh Ministers and, once drafted, must be published for a specified time to allow for feedback to be made in relation to the draft (Victims and Prisoners Act 2024). The draft Victims' Code will then need to go before Parliament before it can be bought into operation.

Failure to "act in accordance with the victims' code" (Victims and Prisoners Act 2024) does not make an individual liable to civil or criminal proceedings, but any failure to act may be taken into account when determining a question in proceedings. Furthermore, the Code will make reference to actions being completed by "the criminal justice body" which includes the CPS, local youth offending team, the Lord Chancellor, the Secretary of State and the chief officer of police for the police area (Victims and Prisoners Act 2024). Under the Victims and Prisoners Act 2024 these criminal justice bodies must:

(a) Take reasonable steps to promote awareness of the Victims' Code among users of those services and other members of the public, and
(b) Keep under review how those services are provided in accordance with the Victims' Code.

The Victims' and Prisoners Act 2024 sets out who can record, share and collect information in relation to support services for victims of crime, as well as the period of time over which they can be collated, frequency of reporting and the characteristics and experiences of those utilising the services. This means that the only services required to promote awareness of the Victims' Code are large statutory entities and, realistically, in a smaller localised area this means it is just the police (through the responsibility being on the chief officer) and the CPS. This is likely to be because the Code and this Act cannot put a statutory duty on other organisations in the way it can a statutory organisation like the police, but it should encourage the supportive working of these organisations, or at the very least have the requirement to raise awareness placed on the elected Police and Crime Commissioner who is also responsible for the commissioning of victim support services. There is, however, the inclusion of a responsibility on the "elected local policing body for a police area", in this case the Police and Crime Commissioner, to keep under review how these bodies provide services presumably through PCC-led needs assessments, ensuring the regular review of victim needs within a PCC area in accordance with the Victims' Code. However the only entity which falls under this elected body would be the chief officer of police, other organisations such as the CPS and youth offending team do not fall under the PCC's jurisdiction and they are therefore not required to report this to them, but the Act continues to reference "criminal justice bodies", as listed in section 6(6) which does not include any of the victim support services which may be available in a local area (Victims and Prisoners Act 2024).

The Victims and Prisoners Act 2024 further includes provision around the publication of compliance with the Victims' Code for criminal justice bodies, as well as placing a requirement on the Secretary of State to issue guidance around raising awareness of the Victims' Code, how information is collected, how information is shared and steps to be taken by an elected local policing body to make the public aware of how they may access this information.

Moving away from the Victims' Code, the Victims and Prisoners Act 2024 places a duty to collaborate in relation to the provision of victim support services on a variety of organisations and authorities within a police area. These organisations include:

- The local policing body;

- Integrated care boards (ICBs);
- Local authorities (these may be a county council, district council, unitary authority, the Greater London Authority or the Council of the Isles of Scilly);
- "Relevant victim support service" which may be a service providing support to victims of crime such as one providing support in relation to "conduct of a sexual nature", serious violence or domestic abuse (Victims and Prisoners Act 2024).

This is a very limited description of "relevant victim support service" and therefore does not apply to individuals who may have been the victim or a burglary or fraud which would not fall under any of the identified categories. This means there is no encouragement for agencies to collaborate to provide support to these other groups, focusing their collaboration on the categories of crime the government has chosen and therefore deemed most worthy of collaborative efforts of support – domestic abuse, serious violence and sexual violence. Mallios and Markowitz (2011), focusing on sexual violence, point out that "when systems work together in a collaborative way to provide a coordinated response to sexual violence, they work better and smarter, encourage victims to access services, are more effective in holding offenders accountable, and ultimately, protect victims and communities". This is supported more generally by Zweig and Yahner (2013:342) who shared that "most victim services providers and researchers believe that, like victims' safety and outcomes; victims' satisfaction with services and the criminal justice system can be enhanced when community and legal agencies work together in a coordinated fashion to service victims' needs".

The Victims and Prisoners Act 2024 contains a requirement for the relevant authority within a police area in England to prepare, in consultation with victims and interested parties, a strategy for each of the three identified areas: domestic abuse, sexual violence and serious violence. This should be published and regularly reviewed, with a revised strategy being prepared as well. In order for the relevant authorities to undertake collaborative working, as well as the development and publication of a strategy to address these areas, the Secretary of State must issue guidance for these authorities (Victims and Prisoners Act 2024).

Section 15 of the Victims and Prisoners Bill 2023 focused on domestic and sexual abuse, requiring that the Secretary of State issue guidance about the role of Independent Domestic Violence Advisors and Independent Sexual Violence Advisors, the support they will provide, how they should work with others and the required training and qualifications for these roles. This requirement was however removed from the final Act, requiring the Secretary of State to issue guidance about specified victim support roles which may be "specified in regulations made by the Secretary of State" but was not specific within the final Act, as it was in the proposed Bill. The reasoning behind this is unclear; its original inclusion highlighted the importance being placed upon the offences by the government, especially in the light of the requirement for the relevant authorities to develop specific strategies for these offences, but its removal perhaps shows consideration of the importance of ensuring that there is guidance around specific roles supporting other victims as well.

The Victims and Prisoners' Act 2024 includes amendments to earlier legislation such as the Domestic Violence, Crime and Victims Act 2004 to make changes in relation to the Victims' Commissioner. These changes place requirements on the Victims' Commissioner to submit reports and comments and a duty on the government to respond to any recommendations that may come from the Victims' Commissioner. It will be interesting to see the implementation of this in the coming months and years, with the Victims' Commissioner releasing the Annual Victims' Survey 2023 in August 2024, with a key finding that just 19% of their respondents had heard of the Victims' Code of Practice (Murray et al. 2024).

The 2020 Response to the proposed Victims' Code highlighted concerns being raised by those responding to the consultation on the lack of clarity around complaints. At the time the MOJ stated that this would be looked at as part of the upcoming Victims' Law (MOJ 2020c). The Victims and Prisoners Act 2024 has made amendments to the Parliamentary Commissioner Act 1967, however it is unclear which agencies fall under this and would require further clarification in the Victims' Code.

Part 2 of the Victims and Prisoners Act 2024 focuses on the appointment of independent public advocates for victims of major incidents. This means that an individual may be appointed to advocate for individuals where a major incident has led to the death or serious harm of a significant number of people and "includes physical, mental or emotional harm". The Act sets out the requirements and qualifications for someone to be appointed as an independent advocate and their role and functions.

Part 3 of the Victims and Prisoners Act 2024 sets out a requirement for the establishment of an Infected Blood Compensation Authority and a compensation scheme in the light of the Infected Blood Inquiry report which was published on 20 May 2024 (Infected Blood Inquiry 2024).

Part 4 of the Victims and Prisoners Bill (2023) gives consideration to public protection decisions about prisoners, including giving consideration to the protection of any victims of that prisoner.

The introduction of a Victims and Prisoners Act is a monumental achievement for victims of crime, but it still only puts requirements on statutory organisations who are not always the ones helping victims of crime. With the potential for a new Victims' Code on the horizon hopefully this will go on to place requirements on organisations commissioned to deliver services to victims of crime to ensure that victims are receiving what they should be receiving. The inclusion of Prisoners within this legislation is disappointing, victims of crime should have been given their own Act.

Another New Victims' Code?

With the introduction of the Victims and Prisoners Act 2024 , the government is once again proposing changes to the Victims' Code (MOJ 2024a). Following the most recent Victims' Code going live in April 2021 the government is not proposing a complete

rewrite, rather they are looking to make changes to ensure that it reflects the legislation from the Victims and Prisoners Act 2024 once this is brought into force (MOJ 2024a).

The key changes proposed are:

- Ensuring that the Code reflects the four overarching principles in the Victims and Prisoners Act;
- Updating the definition of a victim, in line with the Victims and Prisoners Act, to include individuals who have experienced or witnessed criminal conduct, those who have been born as a result of rape and ensuring that the Code reflects the Domestic Abuse Act 2021 which recognises children in domestic abuse cases as victims in their own right;
- Clarification of which rights relate to all and which are specific;
- Updating the Code to reflect the new duty on relevant bodies to promote awareness of the Victims' Code;
- Updating the Code to reflect the new duty for PCCs to review compliance of the Victims' Code in their area;
- A requirement for the CPS to meet with adult victims of rape and serious sexual offences when a case is proceeding to trial to offer further support in the light of the fact that many will withdraw before a case reaches court. This aims to provide additional support to this group;
- To amplify the victim voice through the criminal justice process;
- Ensuring that expanded entitlements in the parole process under the Victims and Prisoners Act 2024 are included in the Code;
- Including information about the digital data the police may request as part of an investigation and what they may request, why, and how it will be used and that victims have a right to not hand this information over, should they wish (MOJ 2024a).

These changes were included in the draft bill and have since gone on to become an Act of Parliament. As this has now become law it is important that the Victims' Code that accompanies the legislation is reflective of that legislation. Areas for consultation with regards to the new Victims' Code under the new Victims and Prisoners Act 2024 have already been identified:

- Victim Personal Statements – consideration is to be given to whether clearer opportunities for the use of these can be identified. VPS's seem to be a real sticking point for the government and the criminal justice process as improvements to these have been considered at every new Victims' Code but perhaps do not appear to be having the desired effect if they need to be considered once more. They ought also to consider the research around these statements, with Lens et al. (2014) pointing out that these may not always be beneficial to victims of crime;
- The needs of children – consideration will be given to how the Code specifically addresses the needs of children and how to strengthen this to ensure that children are receiving effective support throughout the criminal justice process;

- Data privacy – consideration will be given to ensuring that the Code is up-to-date when it comes to data privacy;
- Police interviewing processes – consideration will be given as to how to facilitate requests from victims for an interviewer of the sex of their choice (MOJ 2024a).

Since a general election was called for July 2024 the Bill has become law, the MOJ website has not been updated to reflect this, nor has it been updated to reflect the potential delays that there may be as a result of a new government being voted in. There is, however, provision within the Victims and Prisoners Act 2024 which states:

> Until the first code of practice issued under this section is in operation, references in sections 5 to 12 and 32 to the "victims' code" are to the code of practice issued under section 32 of the Domestic Violence, Crime and Victims Act 2004 that is for the time being in operation.

This is therefore referring to the most recent Code of Practice from November 2020, as discussed above.

Summary

This chapter has been largely descriptive, reviewing what the government has been trying to do for victims of crime in England and Wales. It is important to consider the time over which these changes have taken place to get a better understanding of where things started and how little there really was for victims of crime. Early on there was at least five years between the formal charters and legislation (UN General Assembly 1985, Victims Charter 1990, Victims Charter 1996). Then almost 10 years later came the Domestic Violence, Crime and Victims Act 2004 which required a Code of Practice for Victims of Crime. These Codes were subsequently released in 2006, 2013, 2015 and 2020, before the Victims and Prisoners Act received Royal Assent in 2025. These gaps show historically policy and focus for victims of crime have been sporadic, with significant gaps in the development and implementation of these. Although there was a short space between the 2013 revision and a new Code in 2015 this is the shortest time there has been, and these years long gaps are continuing. It took a very long time for a Victims and Prisoners Act to come into fruition, and the government have still not released details of their proposals for the revision of the Victims Code under this new legislation.

With the decision to call a general election in July 2024 the Victims and Prisoners Act was able to move through the final stages to become law quite quickly. However, it is likely that the general election and forming of a new parliament will lead to some significant delays in the consultation on a new Victims' Code, as seems to be occurring.

It is quite an achievement to have reached a point where we have a law for victims of crime, but it has taken considerable time to reach this point, with significant delays along the way.

Now we have a situation where the final Act has been rushed through and does not address key points of contention from previous iterations of the Victims' Code including specific guidance around complaints, victims' personal statements, young people who are victims of crime, and making legislation around victims applicable to more than just the statutory organisations around the criminal justice system and around victims. Even if victims are aware of the fact there is legislation about victims of crime, they would still have to decipher the legislation to establish that their Rights under this legislation are actually contained in another document entirely, a document which the Victims' Commissioner found just 19% of respondents were aware of (Murray et al. 2024).

In addition, the draft Bill showed the government's plans to issue specific guidance around IDVAs and ISVAs and focusing in on support for individuals who have experienced domestic abuse, sexual violence and serious violence. Whilst this may have been removed from the final Act it does give an indication as to the then government's thinking and raise concerns that the next Victims' Code will focus on those offences, without considering individuals who have been the victims of 'less serious' crimes who may still be just as affected by the crime committed against them.

It is interesting to note the change in focus that the government has had over the years, from a focused, more detailed policy to a short, basic Code with minimal guidance. Now that we finally have legislation for victims of crime it was almost anti-climactic as there was not a lot of detail contained within it, rather it recommended further work to policies and guidance to meet what the legislation said was needed. There is still no guidance as to what support should be available for victims of crime, although "conduct of a sexual nature", serious violence and domestic abuse have been identified as areas for collaboration between key authorities including PCCs, local authorities, the police and ICBs (Victims and Prisoners Act 2024). It is unclear what this will mean for PCCs who currently hold the responsibility for the allocation of the victim support services budget (see Chapter 4) and what would be expected from any collaborations, whether this would mean some parties contributing financially whilst others contribute in other ways. The Victim Services Commissioning Guidance was published in December 2024 but was too late to be included within this thesis. Whilst it provides some guidance around commissioning support services for victims of crime, it is unclear how this links in with the Victims and Prisoners Act 2024 and forthcoming Victims' Code.

With the changes which have taken place more recently it is clear there is an interest from government in support for victims of crime. However their approach seems to change between various iterations of the Victims' Code and they do not always provide what they say they will. With the Victims and Prisoners Act 2024 being rather basic in what victims of crime are entitled to, instead referring to the Victims' Code, it is important that the new Victims' Code, when available, moves away from the current basic iteration and instead focuses on providing detailed guidance for not only victims of crime, but also personnel in the services available to provide support to them. This should also include a responsibility being placed, likely on the PCCs, for basic local information/guidance for victims of crime and their rights following a crime. This will ensure a localised approach to supporting victims of crime, alongside detailed guidance. There also needs to be further consideration into who the Victims' Code applies to as, to date, it is still only

statutory services, yet most victim support services are delivered by third sector organisations. Unless there is an expectation on PCCs to write this as a requirement into contracts, which current policy documents do not appear to say anywhere, how can we be sure that victims are receiving full access to their rights under the Victims' Code if the organisations delivering the bulk of the support to victims do not have to adhere to the Code?

The Victims' Code is about simplifying what victims of crime are entitled to, whilst the Victims and Prisoners Act is about defining victims of crime and codifying the legislation within the Victims' Code. Whether the additional guidance will be included as part of updating the Victims' Code or as something else entirely remains to be seen, but we find ourselves with a new government who victims of crime must wait for to consult on a proposed new Victims' Code to address the outstanding issues from the 2020 iteration and the gaps within the new legislation. These include guidance on how PCCs should monitor compliance with the Victims' Code and hopefully picking up areas, as identified above, which have been missed in previous iterations.

Chapter 4

Contracting and Commissioning Services

The last two chapters have provided some background to understanding the development of victimology and support for victims of crime through the introduction of Charters and Victims' Codes in England and Wales, culminating in the introduction, finally, of a law for victims of crime.

This chapter continues this theme, with a focus on the contracting and commissioning of victim support services, starting with the introduction of Police and Crime Commissioners (PCCs) and the expansion of their role following their introduction to include the commissioning of victim support services. The remainder of the chapter provides an overview of commissioning in other contexts, before returning to the changes for victim support services in England and Wales.

In January 2012 the MOJ announced that they planned "to shift away from a more centralised approach to the funding of victims services in England and Wales" (MOJ 2012a, Simmonds 2016). This saw a move to the competitive tendering of victim services across England and Wales, with delivery and allocation at a mainly local level, with some, such as the Homicide and Witness Services, remaining at a national level. The use of commissioning to fund and deliver services is not a new concept. Commissioning has been introduced across almost all areas of government services including the National Health Service and children's services, with its popularity increasing as more "private, public and voluntary sector organisations" compete for the opportunity to deliver public services (Gash et al. 2013:4, Sturgess 2018). Both the private and voluntary sectors are now "large suppliers of taxpayer funded programmes" (Gash et al. 2013:0). It is however new to victim services and puts England and Wales in a unique position in choosing to adopt this method of funding and delivery. This move was seen as being crucial in ensuring "resources are allocated where they can be most effective" (Callanan et al. 2012a:1) as local PCCs can assess victim need and then decide which services to fund to enable them to meet that need (MOJ 2012a, Simmonds 2016).

Whilst the MOJ (2013b) assert that the "commissioning process in England and Wales forms part of a strategic move towards more personalised services for local people" (p5), this new approach to victim services appears to take more of a 'one size fits all' mentality to meet the identified victim need. Another consideration could be whether it actually focuses on those who suffer the greatest impact, as opposed to a personalised service (Simmonds, 2016). Even if the MOJ, and subsequently PCCs, are attempting to individualise and personalise their approach to supporting victims of crime, needs assessments are still required but this still needs to be a generic needs assessment otherwise how can they ensure consistency across their areas.

Approaches to the delivery of services have varied from PCC to PCC (Hall 2018). Across the country PCCs have opted for different models of delivery. Some have opted for 'in

house' delivery, such as in Bedfordshire where the "Signpost Hub" is run by the police, offering "free and confidential support to anyone affected by crime" (Signpost for Bedfordshire 2020). Elsewhere, in Hertfordshire, Beacon is the Hertfordshire Victim Care Centre offering "complete 'wrap-around' provision for victims", created by the OPCC, the Constabulary and Catch 22 (Hertfordshire PCC 2020). In South Yorkshire the PCC funds a variety of different services with some offering specific support for domestic abuse, sexual violence, road traffic incidents and sex workers, as well as Victim Support who provide more general support and advice (South Yorkshire PCC 2020). Meanwhile, across Leicestershire Victim First provides independent support to victims and witnesses, coordinating "support guidance and practical help through one integrated channel rather than multiple agencies" (Leicestershire PCC 2020). What is currently unclear is how these services differ for victims, or if they do. All PCC areas do however claim to provide the same services to victims, albeit through different processes.

The Introduction of Police and Crime Commissioners

In 2010 the newly elected Coalition Government published *The Coalition: our programme for government* (Cabinet Office 2010b). This set out the Coalition government's plans to "introduce measures to make the police more accountable through oversight by a directly elected individual" (Cabinet Office 2010b:13). Police and Crime Commissioners were subsequently introduced in the Police Reform and Social Responsibility Act (PRSRA) 2011, with the introduction of 41 PCCs across England and Wales to replace the police authorities at that time (Institute for Government 2024). In London, responsibility for policing was given to the Mayor of London (Metropolitan Police 2024), leading to the introduction of the Mayor's Office for Policing and Crime (MOPAC 2024).

Section 1 of the PRSRA 2011 sets out the purposes of PCCs:

> to secure an efficient and effective police for their area; appoint the Chief Constable, and hold them to account for running the force, and if necessary dismiss them; set the police and crime objectives for their area through a police and crime plan; set the force budget and determine the precept; contribute to the national and international policing capabilities set out by the Home Secretary; and bring together community safety and criminal justice partners, to make sure local priorities are joined up (Hall 2018:221-222).

Brain (2014:41) described it as "a unique, and uniquely powerful" role. The role of the PCC was originally solely police focused, under the PRSRA (2011), with Loader (2020:10) noting that the introduction of PCCs came from "the desire to free senior officers of bureaucratic constraints ... and inject into governance arrangements an elected and publicly responsive figure able to focus police forces on their crime-fighting goals". Following a consultation carried out by the government in January 2012[3], this role expanded to include victim-related issues and services (Hall 2018).

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[3] Titled *Getting it Right for Victims and Witnesses* (Hall 2018)

This expansion in the PCC role meant that PCCs took on responsibility for "deciding and allocating the budget" for victim services from 2014 (Mawby 2016:212). In addition to responsibilities around policing, some Police and Crime Commissioners are also responsible for local fire and rescue services and are therefore referred to as Police, Fire and Crime Commissioners (PFCC) (Gov.uk nd). For the purpose of this research, as it is not focused on their fire responsibilities, PCC will be used throughout.

Introducing a democratically elected role with oversight of local policing, victim services and (in some areas) fire services increases the risk of greater inconsistency between policing areas (Edwards 2012). As PCCs are elected officials from political parties, it is likely that their priorities will align with their parties, not necessarily their fellow PCC's from other parties (Edwards 2012). This could prevent cross PCC collaboration, as well as impacting on the delivery of national services when priorities do not align and mean that individuals in one area are missing out on services which are available in another. Whilst they must consult with the public on their Police and Crime Plans, this is also likely to be driven, in part, by their political affiliation (Raine and Keasey 2012). Having a democratically elected role, however, does encourage PCCs to help develop links between the police (and services they offer) and the public. They will also face sanctions for misappropriating any funds ring-fenced for victims or the police. Additionally, they will have to show that they are added value through their management of Chief Constables and the police, as well as their commissioning of victim services (Baldi and LaFrance 2012).

The role of the PCC, whilst political, "was designed to empower communities and those who reside within them" (Joyce and Wain 2013:133, Joyce 2017) as individuals may put themselves forward for the role and would be voted in through the electoral process (Police.uk 2019). One major criticism of the PCC role is that anyone can stand for election; they do not have to have any knowledge or experience to put themselves forward and there is no quality control to ensure the best candidates are put forward on the day to be voted for by the voting public (Loveday 2018). However, many of those who stood had connections to the police or some "formal political establishment" at some point, although this is unsurprising given the original remit was for PCCs to be police focused (Joyce and Wain 2013), so it would make sense for individuals with experience of the police or politics to stand. This is also potentially useful as there was no skills training for the elected individual. They had just one week to prepare for office (Brain 2014, Loveday 2018).

When elected, PCCs took one of two approaches (Davies 2014). One was a "Police Manager" approach, where their focus and understanding of their role was to replace Police Authorities in holding Chief Constables to account. The alternative approach being a "Crime Reduction Coordinator" approach, where the Commissioner saw their role as having responsibilities which were wider than simply those matters concerning the police, to include the management of crime and justice outside of the police service and developing partnership working (Davies 2014). When responsibility for the commissioning of victim services was handed to PCCs, the "Crime Reduction Coordinators" may have found this easier to adapt to, having considered the wider

responsibility of their role from an early stage, whilst this may have been more difficult for the "Police Managers" as they had been focused purely on holding the police to account as opposed to a wider system approach.

The first PCC elections took place in November 2012, with the successful individual starting one week after the election (Brain 2014). A significant number of independent candidates stood for office (52) (Joyce and Wain 2013), who focused on the need for a local voice in policing and keeping politics out (Mawby and Smith 2013). Turnout at this election was the worst in English history at just 15.1% of those able to vote (The Electoral Commission 2013) with Edwards (2012) highlighting a lack of public awareness as one of the first problems encountered with the role. A number of other reasons were put forward for this low attendance, including the fact that the election was not held at the same time as any other elections, it was held in winter and that no one actually knew what they were voting for as this was not a heavily publicised election (Joyce and Wain 2013). This continues to be a criticism of the system surrounding PCCs as, so far, they have been responsible for funding publicity around these elections themselves, with no support from government. There were 192 candidates for the 2012 election from a number of political parties, as well as independents (Joyce and Wain 2013). The elected candidates consisted of 35 males and 6 females (Berman et al. 2012, as cited by Joyce and Wain 2013). The elected candidates were not representative of the public as no one from a minority ethnic background was elected (Joyce and Wain 2013). This is in contrast to the 2011 census which showed that 14% of the population was from a BAME background (Gov.uk 2018a). Those elected tended to be middle aged (45 to 65 years) and middle class (Joyce and Wain 2013), going against the median age of the country which at the time was believed to be 39 (Gov.uk 2018b).

The second PCC elections took place in May 2016 with a turnout of 27.3% of the voting electorate (The Electoral Commission 2016). Whilst this was an increase on the first election, there was still no money available from central government to advertise the election with this being left to candidates themselves and voters continued to be unclear over what they were actually voting for (The Electoral Commission 2016). The increase in turnout was likely due to the fact that a local election took place on the same day, with turnout at local elections often in the range of 30-40% across the country (The Electoral Commission 2019). This second election had more of a focus on political affiliation than the first, with the Liberal Democrats standing (they did not put any candidates forward for the 2012 election) and fewer independents (29) (Joyce 2017). With less than 30% turnout at the first two PCC elections, it is difficult to see how a PCC could be accountable to the public at large.

The second PCC elections saw 27 incumbents standing for re-election (Joyce 2017). Of these, 20 were re-elected to their posts (Joyce 2017). The elected candidates consisted of 32 males and 8 females and, again, almost all were white (Joyce 2017), with one being from a BAME background (Home Affairs Committee 2016). There is no data available as to why an individual may not have been re-elected, but in Bedfordshire, for example, one could question whether it was because the PCC discussed confidential police information. Specifically, the former PCC for Bedfordshire disclosed information relating to the death of an individual in custody with his partner, who then discussed with

individuals he knew (BBC News 2014a). The PCC received a written warning from the Police and Crime Panel after admitting to sharing sensitive information, but no criminal charges were brought (BBC News 2014 a and b, Press Association 2014a).

The third PCC elections were due to take place in May 2020, however these elections were postponed for 12 months as a result of the Covid-19 pandemic and took place on 6 May 2021. New PCCs were elected in 38 areas, with Wiltshire to have a re-run in August 2021 because it was discovered after the election that the winning candidate was not eligible as he had a historic driving conviction (BBC News 2021a, Danechi and Tunnicliffe 2021). Turnout data was unavailable from the PCC areas in which this research was conducted, however average turnout across the 34 where it was available was 33.2% (Danechi and Tunnicliffe 2021), an increase again on the previous two elections although, as with 2016, this election took place alongside local elections too and may explain the increase.

Across England and Wales 15 incumbents were re-elected, with the Conservatives gaining 10 PCC areas. The potential politicisation of the PCC role was becoming more evident as the Conservative party was the only party to make gains that year (Danechi and Tunnicliffe 2021). The Independent PCCs all lost to Conservate candidates, whilst Labour lost six and Plaid Cymru lost 1 (Danechi and Tunnicliffe 2021). Across England, therefore, there were 29 Conservative PCCs (85%) and five Labour (15%).   For Wales there were three Labour (75%) and one Plaid Cymru (25%) (Danechi and Tunnicliffe 2021).

A more detailed breakdown of the candidates was not available at the time of writing, but in 11 of the 28 PCC areas (29%) there were no female candidates (Danechi and Tunnicliffe 2021). Of the successful candidates, 8 (21%) were female (Danechi and Tunnicliffe 2021).

May 2024, almost 12 years after the first PCC elections, saw the fourth PCC elections take place with 136 candidates (Allen and Buchanan 2024). It is estimated that of these candidates 26% were female (Allen and Buchanan 2024). At the 2024 election, 33 PCC and PFCCs were voted in, as well as five mayors with PCC responsibilities (The Electoral Commission 2024). Whilst more detailed data was not available at the time of writing, the four incumbent mayors won their elections, with the fifth being newly introduced at this election (BBC 2024). All five mayors were Labour candidates (BBC News 2024). The PCC seats were won by 21 incumbents and 12 new PCCs (BBC News 2024), with the Labour party gaining 10 seats, whilst the Conservatives lost 10 (Allen and Buchanan 2024). Of these, 22 of the successful PCCs were male whilst 11 were female with 14 of these PCCs being from the Labour party, and 19 from the Conservative party (BBC News 2024a). Turnout at the 2024 election was lower than that at the 2021 election (23.2%) (Allen and Buchanan 2024) which may be surprising as there was a general election in 2024 with a 59.7% turnout (Sturge 2024). This again leads one to question whether a politically elected role is really representative with continued low turnout over 10 years later.

Reviewing the Commissioning of Victim Support Services

Historically, the government was providing around £151million per annum towards victim services, with Victim Support being one of the largest providers of victim services, receiving a £38million direct grant for 2011/2012 alone (Callanan et al. 2012a, MOJ 2012a). This was considered to be "unsustainable and wasteful" as the Victim Support structure was to provide generic support to everyone, as opposed to specialist support for those with the greatest need (MOJ 2012a:18). Interestingly, as far back as 1998 the British Crime Survey showed categories of victim where levels of impact/need were high but contact and visiting rates were low (Maguire and Kynch 2000) showing that despite Victim Support claims of contacting all victims, they were not. In comparison to the funding received by Victim Support, in 2011 a further 184 third sector organisations received funding through three MOJ funds – the General Fund which was set up to provide funding for frontline support, the Homicide Fund for agencies supporting bereaved families and the Rape Support Fund (Callanan et al. 2012a, Simmonds 2016).

In January 2012 the government set out a consultation in which they detailed plans for "a set of reforms which will deliver a more intelligent and coherent service for victims of crime ... a system targeted at those who are most seriously harmed by crime", as opposed to providing support "to those who do not need or want it" (Lord Chancellor and Secretary of State for Justice, MOJ 2012a:3; p10). This was to be done "through a competitive commissioning process" (MOJ 2012a:21) with the outcome of "a more flexible and tailored system of support for victims of crime, with the vast majority of decisions about what services are needed made at a local level by democratically accountable Police and Crime Commissioners" (p4).

The first part of this statement is important as it highlights the need for reform. What the second part identifies, however, is three different themes, "a competitive commissioning process" (MOJ 2012a:21), the sharing of best practice and the expansion of the role of PCCs.

The first theme to consider is that of "a competitive commissioning process" (MOJ 2012a:21) which means that in order to deliver a victim service, agencies will have to compete with each other. It was hoped that this would encourage agencies to put together the best possible service they can deliver for victims. However, they would also need to ensure that the cost of delivering these services is appealing to the Commissioner. This runs the risk of the promise of a service at an attractive price that an agency may not be able to deliver, leading to cost cutting and poor service, a risk raised by Simmonds (2019) who warned of the potential for agencies to be "set up without necessary expertise and submitting bids that would then fall short of what needed to be put in place" (p12). This process has already been seen in the part-privatisation of the probation service which took place in 2013 under the Transforming Rehabilitation rubric (MOJ 2013a). The Ministry of Justice (MOJ) created 21 Community Rehabilitation Companies (CRCs) whose responsibility would be "to manage low- and medium-risk offenders" whilst the National Probation Service remained in the public sector, managing those individuals of much higher risk and delivering court-based services such

as presentence reports (Burke and Collett 2016). Here the Coalition government posited that implementing payment by results for CRCs would lead to the development of innovative service delivery across the CRCs (Burke and Collett 2016). The process was open to organisations from any background to bid, with successful agencies taking over responsibility for their CRCs in 2015 (House of Commons Committee 2019). Subsequent feedback from agencies who applied was that they found the process to be chaotic and instructions at times unclear (Ricketts 2015). Things have not quite gone to plan with the MOJ having to amend a number of contracts within just two years to help stabilise services which were failing, and subsequently eight CRCs had gone into administration in just a few short years (House of Commons Committee 2019). In 2019 it was announced that probation services would be renationalised, with contracts ending early (in December 2020), with the management of offenders returning to the National Probation Service. In June 2021 CRCs moved back into the National Probation Service (BBC News 2021b). This highlights concerns over whether the best possible service can be delivered in a competitive process where cost is likely to play a significant part in decision making.

When considering victim services, of great concern is the importance of sharing best practice which is important to ensure victims receive the best service available. This is not new for the sector but something agencies have been doing for years, sharing their research and experiences to help other agencies and victims. Simmonds (2019), however, highlighted the exasperation of some agencies in being expected to compete one minute and work together the next, meaning smaller agencies were having to compete against each other on a regular basis to the same funder i.e. the local PCC. So, if agencies are working together and competing against each other for funding, one has to consider whether there is an incentive for agencies to share their best practice given it might be used by 'rivals' in the next competitive tender.

Loveday (2018:28) has referred to the expansion of the PCC role to include victim services as "one of the most significant indicators of central government commitment to localism". The move to a localised approach to victim services enables the commissioning of services specific to/most relevant to that area, focusing on the needs of that area. For example, it has been argued that a metropolitan city will not necessarily have the same crimes as a rural county, and the needs of victims may therefore differ, for example stealing generators and horse boxes in rural areas (NFU 2019) and mugging in the city. This move is "in contrast to New Labour's centralism and public sector growth", instead focusing on "localism, volunteerism, self-help and an altogether small and less intrusive state" (Brain 2014:41). Whilst this may have been the plan, the politicisation of PCCs is leading to a more centralised narrative as opposed to the localism agenda which was the drive for the introduction of PCCs.

The government received 350 responses to their 2012 consultation of reforms (MOJ 2012b) and, despite the majority of respondents being against PCCs being responsible for the commissioning of victim services (136 of 196 respondents), the government proceeded as they continued to believe PCCs were best placed for making decisions as to the best services for victims in their area, despite there being no published evidence that different services are required in different areas (MOJ 2012b). PCCs took

responsibility for victim services in their areas from October 2014 (Madoc-Jones et al. 2015). At the 2016 PCC elections, of the 188 candidates, 101 highlighted the importance of victims and putting them at the heart of criminal justice, yet their main focus continued to be on policing (Joyce 2017).

Furthermore, the government highlighted their focus through PCCs would be to support those individuals who had suffered the greatest impact, that is a needs-based rather than generic service, and that success would be measured through outcomes rather than outputs (MOJ 2012a and b, Simmonds 2016). So, rather than simply recording the number of interventions undertaken, service providers would need to measure the impact of that intervention on the individual, i.e. how did this intervention help a victim in the immediate aftermath of the crime or six or 12 months down the line (Simmonds 2016)? This is a significant move away from a managerialist approach of focusing on productivity and efficiency through the recording of referrals and the number of interventions conducted, instead focusing on the individual in need and their personal outcomes which cannot simply fall into a box ticking exercise (Gilling 2012).

This shift, in line with the EU Directive (2012) has led to individualised victim needs assessments being required prior to a service being offered to the victim of a crime. This is a significant move away from the generic victim services provided by Victim Support when an individual would receive some form of support until an individualised victim needs assessment identified the best specialised services to support them (see Chapter 2). According to the *Victim Services Commissioning Framework* (MOJ 2013b), shifting the focus for the measurement of success of victim services from the number of users to outcomes around the ability of a victim to "return to the life they had before the crime took place" (p5) is important, however the government fail to explain why this is important, as well as failing to take into account varying timescales for recovery and alternative influences on an individual's recovery, if recovery is even possible.

The areas of improvement of victim outcomes post intervention were established in the 2012 consultations as "eight categories of need" (MOJ 2013b:19). These categories were proposed by the MOJ and received support from the majority of respondents to their consultation (MOJ 2012b – though there is no research evidence of this categorisation) and are the 'cope and recover' outcomes service providers are working towards. These are the areas where a victim, it was thought, is most likely to experience suffering and require support after a victimisation incident and are therefore the areas in which service providers should be looking to support victims in order to improve:

1. Mental and physical health
2. Shelter and accommodation
3. Family, friends and children
4. Education, skills and employment
5. Drugs and alcohol
6. Finance and benefits
7. Outlook and attitudes
8. Social interaction (MOJ 2013b).

A service provider is therefore required to "demonstrate that their service provision can achieve improvements in any of these areas that a victim needs assistance with" (MOJ 2013b:19). It is interesting to note that the MOJ focused on these 'categories of need', as opposed to ensuring they were delivering services expressly included in the EU Directive 2012 and 2013 Code of Practice for England and Wales. For example, restorative justice, despite being a requirement of the EU Directive and Code of Practice, must demonstrate how they are able to support an individual to improve in their "eight categories of need". This is no easy task as restorative justice may not obviously be able to help a victim with education, skills and employment in a direct, practical way, however, it could indirectly by helping a victim to find the courage to make the change they need, for example taking a risk and leaving employment to further their education, or improving their employment prospects and therefore their finances, their outlook and attitudes and their social interaction.

Understanding Contracting and Commissioning

Public procurement, the name given to the purchase element of contracting and commissioning, accounts for roughly one third of public spending each year (Gov.uk 2024a). The Commissioning Support Programme (2010:7) provides a clear, succinct and understandable explanation for what is meant by the word 'commissioning':

> Commissioning is the process for deciding how to use the total resource available ... in order to improve outcomes in the most efficient, effective, equitable and sustainable way

When commissioning is taking place, it usually refers to "the authorization and funding of public services" (Sturgess, 2018:155). The best practice approach to commissioning is to have a framework, made up of the agreed principles, standards and processes to be taken forward, covering the relationship between the development of policy and service delivery to achieve the desired outcome (Commissioning Support Programme 2010; Sturgess 2018). It does not necessarily denote privatisation or an increased degree of privatisation, though it can open up markets to more diverse forms of providers (Gov.uk 2024a). In the context of victim services, this framework is rather broad, with the eight categories of need highlighted by the MOJ (2013b) (see above) acting as the outcomes, but how these are to be achieved and through what model of delivery, is left entirely to the discretion of the Police and Crime Commissioner to whom this role has been delegated, along with the authorisation to engage agencies/services to carry out work which will allow them to achieve the desired outcomes in an agreed way. Pathways have not been specifically prescribed by the state but based on assessment of the local needs of victims to allow for tailoring of commissioning to local need (Gash et al. 2013, Hall 2018). This is why across England and Wales a mixed picture of service models has developed, with some choosing to set up an internal hub to deal with initial contacts from victims and then refer to specific services as necessary, others choosing an external hub, and a third group choosing to have no hub at all.

Commissioning in England and Wales

Commissioning of services within England and Wales is not limited to one sector but has been picked up and used across a number of areas including children's services, the Department for Work and Pensions, healthcare and criminal justice. Throughout the 1980s a shift started to take place from simply outsourcing/contracting services whereby the service of an agency is acquired to deliver a specified outcome in a specified way, to commissioning where the focus is on the process used to achieve the desired outcomes by identifying the need and then developing the policy and service itself to achieve these outcomes (Damm 2012, CIPS 2019, LGA 2018, Sturgess, 2018).

In 1984, the Health Secretary suggested that rather than focusing on providing support and care to members of the public who needed it through services directly controlled by local authorities, consideration should be given to enabling engagement with all available services (Bamford 2001) which could be done by changing the funding and delivery model. A subsequent Audit Commission Report was critical of the "fragmentation and poor coordination between health and social care authorities" and argued that "local authorities should focus on being "enabling agencies" rather than seeing themselves primarily as providers" (The Audit Commission for Local Authorities in England and Wales 1986, as cited by Sturgess 2018:157). This is essentially what commissioning would do, bring together service providers to identify needs and gaps in local services and seeking to fill those through the commissioning of services. For this to work, engagement is needed from service providers, commissioners and the service users themselves as 'the locals' are better able to "appreciate the unique mix of local issues and factors" which are likely to "significantly impact on programme or service relevance or performance" (Shircore and Ladbury 2009:286, Gash et al. 2013).

Changes to funding and responsibility for services came at a time when the government was looking to reduce the ambit of the state and start to put greater responsibility on local authorities and local services to fulfil the need for greater accountability from local front-line services. The fundamentals of this can be seen across government policy in subsequent approaches and changes to delivery and delegation of authority and increased accountability for front-line services. Research, and history, have shown that policy and overall budgets on their own are not of great concern to front-line workers when these are being dictated by the wider government on a large scale (Sturgess 2018). Removing wider government involvement by delegating and allocating responsibility and accountability to services through commissioning is argued to produce more of a buy in and cooperation in achieving service aims as well as leading to an increase in innovative services (Sturgess 2018), redistributing power towards the service user and improving strategic understanding (Commissioning Support Programme 2010). Maguire (2012) however highlighted one of the pitfalls of this being the lack of evidence to support these changes, and the increased risks for the parties involved.

Commissioning is attractive to funders as "a strategic activity of assessing needs, resources and current services, and developing a strategy of how to make the best use of available resources to meet needs" (UK Department of Health 1995, as cited by

Sturgess 2018). This has been picked up in other areas of working including other government bodies and children's services, the Department of Work and Pensions (Damm 2012), and probation services. This work can be seen in the commissioning of victim services, with PCCs assessing need and resources available from the MOJ and current services available in their area and subsequently developing a model and strategy to get what they see to be the best outcome for all parties (Commissioning Support Programme 2010). The model of commissioning is a constant cycle following the method of Understand, Plan, Do and Review (see *Implementing Change*) (Commissioning Support Programme 2010). Whilst in this constant cycle commissioners are limited to the role of prescriber of outcomes, as opposed to having the opportunity to develop and deliver complex services, instead encouraging competition and sometimes collaboration between services.

The majority of services involved in supporting victims of crime are based within the third sector, so they often face significant challenges around obtaining funding, as opposed to statutory agencies such as the police, who play a significant role in supporting victims of crime, but do not face the same financial challenges as charities. Smaller agencies identified early on that they do not have professional bid writers to put everything together (MOJ 2012b) and this therefore meant the removal of staff from undertaking valuable work and their bids may not be as 'snazzy' as those done by professionals. This means that they are starting on the back foot. Shircore and Ladbury (2009), however, highlighted that the shift to localised commissioning actually allowed for the local support and growth of providers. But what do these changes mean for smaller, local organisations who are successful, and those who are unsuccessful and the implications of this for their staff and the victims of crime they support (Maguire 2012)? Early concerns around this approach to commissioning included that the services commissioned would be those which would be most appealing to the local community or of special interest to central government (Simmonds 2016, Turgoose 2016, Hall 2018). Reasons suggested included the seriousness of the offence and therefore reaction to public reactions in the short term, or pre-conceived ideas of what victims need and keeping the support for "'more typical' victims of crime at arm's length" (Simmonds 2016, Turgoose 2016, Hall 2018:219). It is anticipated that with the Victims and Prisoners Act 2024 highlighting support for victims of domestic and sexual abuse it is likely that more of a focus will be seen in these areas in the coming months.

Changes to NHS services were built around a desire to remove top-down control and make professionals more accountable (Checkland et al. 2013), as well as being "fuelled by the belief" that putting the satisfaction of client need at the centre of decision making would allow them to be more effective and more responsive to the local need (Shircore and Ladbury 2009:281). This reflected the views of the Department for Communities and Local Government (2006) who highlighted that approaches to commissioning needed "... a thorough understanding of what local people need and want as well as a knowledge of supply markets and the range of providers and potential providers who might be engaged in delivery" (p110). As commissioners, PCCs, using the Understand, Plan, Do, Review cycle (see *Implementing Change*) take on the roles identified by the Department for Communities and Local Government (2006) of:

- Broker as they direct victims to service providers;
- Facilitator as they make access to victim services easier;
- Procurer as they obtain specific services to deliver the required outcomes;
- Market regulator as they control the budget and therefore services available and agencies available to obtain that service, as well as having oversight of service outcomes, success stories etc; and
- Provider in some areas where services are in house, but also indirectly provider as they provide the funding for victim services.

These would require considerable skills and training to effectively and efficiently carry out each of these roles, never mind being in a position where they are carrying out all of these roles. This does raise concerns about a PCC's ability to do all of this fairly, especially if they are the provider as they require the skills and knowledge to do this. How can an agency fairly act as a market regulator when they themselves are a provider?

Commissioning works in a way that there can be joined up commissioning to ensure joined up working in delivery, rather than expecting joined-up delivery after the fact (Sturgess 2018) and this is where the knowledge and professional skills of local providers are invaluable in developing a plan for the commissioning of services (Shircore and Ladbury 2009). An attempt at this can be seen when the commissioning for probation services went out to tender as a number of private companies brought in voluntary sector agencies with experience to work alongside them in developing and delivering some of the new services (Robinson et al. 2015). Here, with open commissioning, non-specialist providers were able to tender, backed up by specialist agencies to work alongside them in service delivery (Turgoose 2016). Joined up commissioning and joined up working are key to effective delivery in supporting individuals, particularly those with complex needs, as it allows input from a variety of different providers with a wealth of expertise, allowing for a shared vision of service delivery (Commissioning Support Programme 2010; Sturgess 2018). This continues to be valued today as a large number of victims of crime are individuals with complex needs and joined up working allows for join decision making, identifying potential risks early and coordinated working to include information sharing, risk assessing and taking action (College of Policing 2015).

Drawing on the example of the commissioning of probation services through *Transforming Rehabilitation*, in 2013 the MOJ sought reforms to address the high reoffending rates recorded (600,000 in the previous year) (MOJ 2013a). The MOJ was looking at ways to ensure that once punished for committing a crime, these individuals received support, mentoring and rehabilitation to help them on release not to reoffend, bringing together "the best of the public, private and voluntary sectors" to achieve these aims (MOJ 2013a:3).

Under *Transforming Rehabilitation* the probation service was split into two parts consisting of the National Probation Service which would manage high risk offenders and work directly with the courts and victims of crime, and 21 Community Rehabilitation Companies (CRCs) whose role would be to manage low and medium risk offenders to include community sentences and individuals on licence following release from prison, as well as delivering rehabilitation interventions (Brooker 2015). In doing this the

government ignored feedback from a risk assessment undertaken by MOJ officials against this move (Brooker et al. 2017).

Ultimately, as mentioned earlier, the part privatisation of probation services failed. HM Inspectorate of Probation inspections found a number of failings across a wider area of CRCs. In Dorset, Devon and Cornall they found under recording of riskier cases and the completion of sentence plans without ever meeting the offender to enable them to meet targets (HM Inspectorate of Probation 2019a). In London HM Inspectorate of Probation (2018) found that they failed to meet an acceptable standard of quality for protecting the public, as well as an overreliance on agency staff. Whilst in Cumbria and Lancashire HM Inspectorate of Probation (2019b) found the CRC failed to deliver effective supervision.

Of note is that in developing their proposals for reforming the probation service, the MOJ were clear that "probation trusts [would be] prevented from being both commissioners and providers of services" (Dominey 2012:344). This is not the case for victim services as it is an option for Police and Crime Commissioners to commission their victim services in house but this would surely be a conflict of interest. It certainly does not seem like a fair, competitive commissioning landscape if it is being run in house, reducing the opportunities for competitive tendering – what if the service is not up to scratch? It would not be feasible to start all over again so does this mean if victims of crime are experiencing a poor service it simply continues, without the opportunity for an improved service to take over? And one has to wonder how would this even be identified if this is an in-house service? This is in fact the model used by one of the areas to be explored as part of this research.

Many would view the changes to victim services under the Big Society mantra as being as a direct result of the recession and the resulting practicalities of funding budget cuts and redundancies which became the norm for a time (BBC News 2010, Cabinet Office 2010, Maguire 2012, Mawby 2016). However, changes to services were also about "reducing the power and size of the state and encouraging traditions and strengths of civic society" (Dominey 2012:345). Mawby (2016:217) points out that it was also an "ideological commitment to localism and neoliberal commitments to market competition", which subsequently enabled third sector organisations to have a larger role in providing public services (Butler 2018).

The introduction of payment by results for the delivery of probation services was new to the criminal justice system, used to incentivise private sector agencies to get involved and develop innovative strategies to reduce reoffending and it certainly would not work for victim services. This is because outcomes for victims cannot easily be quantified (whilst whether an individual committed a crime after support from probation services could). Outcomes vary from victim to victim and third sector agencies cannot wait for a result to get paid and it could take years for an individual to 'achieve' an outcome which fits the eight categories of need identified by the government (MOJ 2013b). Every victim journey is unique, therefore outcomes can present themselves at different times and in very different ways.

Further concerns with commissioning highlighted as a result of the changes which took place in probation services are around the people working for the service – those on the frontline actually delivering the service. The first is the failure of the government to consider who frontline workers will be, with the focus on structures and incentives, not a lot of thought was given to frontline workers as a new service was created and staff were simply transferred from one agency to another with no real consultation (Moss 2010, Robinson et al. 2015). It is often the assumption that the successful bidder for a project must have submitted the lowest bid, as it was here with one member of CRC staff pointing out "If we are getting sold to the lowest bidder it hardly makes you feel proud, does it?" (Robinson et al. 2015:8). This is not helpful for the motivations or self-worth of CRC staff who felt they are being transferred to the lowest bidder, resulting in their skills and experience being devalued, without really having any say in the transaction, either in the bid submitted or the move itself, leading to an overreliance in some areas on agency staff (HM Inspectorate of Probation 2018).

The changes to probation services and subsequent early ending of this experiment clearly show offering to deliver the cheapest service does not work and, as Sturgess (2018) has shown, there have been a number of contracts where there "has not been an honest conversation about results and resources", leading to "providers committing themselves to undeliverable results and uneconomic prices" (p164). This further shows that payment by results does not work in supporting desistance, as well as a failure of not only the MOJ but also service providers to understand the true nature of the work and services provided (Gash et al. 2013). This is a clear example of poor commissioning, evidenced from early in the new world of probation services, made worse by a lack of leadership from the MOJ in holding agencies to account but also, perhaps, an example of what can happen when there is a lack of clear, succinct direction for pathways and outcomes, particularly in an area with outside agencies with no experience of the criminal justice process (Commissioning Support Programme 2010, Gash et al. 2013, Turgoose 2016).

Within the penal voluntary sector, a number of important implications have been highlighted by Corcoran (2009) and Tomczak (2014) which may be applied to victim support services. Third sector agencies are always looking for more funding and competing against one another for various grants and funds. As Tomczak (2014) points out, third sector organisations are often not in receipt of statutory funding and may therefore not rely upon it. For those who are in receipt of statutory funding, however, they will often still deliver other services with funding obtained from elsewhere (Tomczak 2014). However, with a competitive process being used to fund victim support services, specialist services in particular must consider this, especially if they find themselves successful in a commissioning cycle. In subsequent cycles they may find that they are competing for survival to deliver an entire service in an area or risk losing their jobs should a tender be awarded elsewhere. Corcoran (2009:32) pointed out that whilst the government may have "well-intended policies for championing voluntarism or strengthening civil society", the additional costs and responsibilities placed upon those providers may actually outweigh the benefits of securing such contracts, particularly for the smaller, specialised organisations.

Using commissioning for victim services leaves staff and volunteers with ongoing uncertainties – they do not know that another service will not come in cheaper, or if they will get enough referrals or if they will achieve enough outcomes to satisfy the commissioner. Furthermore, as Maguire (2012) points out, with the change to PCC's being responsible for commissioning local victim support services, there was/is no guarantee that they will continue to use it as it has been used in the past for specific purposes, or for similar organisations. Given outcomes take time and it may be years before someone achieves just one outcome, how can that be suitably quantified for reports in the meantime (Simmonds 2016), and is there not a risk, as Gash et al. (2013) discovered, of agencies actively engaging 'easier' victims to achieve the numbers they need to demonstrate outcomes and keeping those with more complex needs who require more time, effort and resource ticking over but not being offered the full service because it would use a lot of resource?

Additionally, the focus in relation to victim services appears to have been on funding short-term crisis intervention, particularly in relation to domestic abuse victims, often neglecting the longer-term issues which may be encountered, such as support with housing etc. (Turgoose 2016). Commissioners too often skip this important element when they put a service out to tender e.g. looking for an RJ service in this area, invitation to tender open. It is then left to the services to draw on the "skills, knowledge and experience of frontline staff" (Dominey, 2012:351) in developing a service that is fit for delivering the required outcomes, as effectively, efficiently and cheaply as possible. If a service then struggles or fails to deliver, the fault lies with them for submitting a proposal that they were unable to fulfil. However, Sturgess (2018) points out that one advantage of commissioning is that it requires both policy makers (the government) and planners (PCCs) to also understand the delivery side of things "and accept some responsibility for its ongoing performance" (p163).

Whilst it may be positive that the MOJ has not been prescriptive in the development of delivery models, allowing models to develop to suit a specific area such as the pooling of resources in Norfolk and Suffolk for one victim hub between the two counties (Norfolk and Suffolk Victim Care 2019), it has not been possible to find research to support the assertion that victims in different areas have different needs, leading one to question whether there is a need for a focus on the localism of victim services. Decisions on models may simply be based on the personal or political choices of PCCs or simply being happy with the service being run at that time and electing to keep this in place.

Considered from another angle, did the Coalition and subsequent Conservative governments consider the changes to policy and focus on Big Society and localism as innovative? Did they think it was innovative to pass responsibility, oversight and autonomy to local agents who 'know' the local issues, local needs, and are therefore better placed to develop and commission services to better meet those local needs over a generic service, commissioned by the government to offer the same thing to everyone, even though there is no research to suggest the needs vary across the country? Is this empowering the local community to make a difference (Big Society FAQs undated)? Or is it, as the Commissioning Support Programme (2010) highlights, actually a more effective way to commission and ensure applications from innovative providers to lead

with the outcomes and leave the process for achievement to them to put forward for consideration? What about those areas which have chosen to move the core services inhouse? – does this remove the opportunity for competition and encouragement to perform and deliver or risk losing the contract to another agency, or does it encourage laziness and just skating by to survive because the service is inhouse and not going anywhere? It is impossible to know whether this is what previous governments were thinking, just as it is impossible for us to know what will happen following a general election which saw a Labour government elected for the first time in 14 years (Murphy and Baker 2024). If an agency is commissioned to deliver a service for 3 or 4 years, and then the contract goes out to tender, they will have had to take into account the increased experience of their staff and include appropriate pay increases accordingly. What then is there to stop another agency from undercutting them? Costs play a huge part in decision making and, whilst one would hope that PCCs take into account the experience of a service, 'value for money' more often than not may really be talking about the cheapest option. This can be seen in London where RJ services were provided by the Restore: London Consortium before changing three years later to Calm Mediation (Mayor of London 2016).

Implementing Change

The Coalition government recognised the important role of commissioning and the need to improve commissioning, with the Cabinet Office establishing "The Commissioning Academy" in 2013 "to equip a small group of professionals to tackle the challenges facing public services, take up new opportunities and commission the right outcomes for their communities" (Gov.uk 2016), with PCCs identified as one of the bodies which would benefit from engaging in this.

Implementing democratic oversight at a local level is in line with the Coalition government's "political principle of allowing greater local discretion and empowerment" when compared to the centralist approach of the New Labour government (Brain 2014:47), however it has led to varying set-ups around the country. This is partly due to the process adopted for the commissioning of services.

In May 2013 the MOJ published the Victims' Services Commissioning Framework to help guide, clarify and support the commissioners of victim services i.e. PCCs. The purpose of this framework was "to help commissioners of victims' services and others understand the evolving commissioning landscape" (MOJ 2013b:5). The commissioning of services is not new, it is a way to ensure that the best outcomes are secured for service users, "at the best value", with ongoing review of the service to ensure the needs are being consistently achieved (MOJ 2013b:5). The Coalition government had previously implemented a commissioning process for the delivery of CRC services, although, as already discussed above, this has proven to be less than successful and after being billed as a 'revolution' when introduced proved to be poor value for money with the contracts terminated 14 months early (NAO 2019).

Part of the planning and decision-making process for victim support services which needed to be considered was what model of contract would be used, that is, would it be payment by results or a performance related grant (MOJ 2013b). Whilst both of these might be effective, value for money (as it is "using public resources in a way that creates and maximises public value" (Department for Transport 2015:7)) approaches, and thus appealing to the government, the reality of the needs of victims has to be seen as somewhat different. As already stated, it may take months, even years, for an individual to achieve their desired outcome, so would a charity be expected to support that individual for all of that time with no financial support for themselves because they have no evidence of outcomes for a considerable amount of time? This is one of many issues PCCs would have to consider whilst using this Framework, however Sturgess (2018) has pointed out that there is a "growing recognition" that this way of working may not be appropriate and commissioning may be more about capability than the ability to specify, measure and subsequently reward outcome delivery.

The Framework suggested giving consideration to "cross border collaborations" and joint service provision and suggested that in focusing on the ways they can help a victim to cope and recover, service providers should be encouraged "to work in partnership with other organisations" (MOJ 2013b:6). The need to collaborate has also been highlighted in the Victims and Prisoners Act 2024 (see Chapter 3). There has been some evidence of cross border collaboration. Norfolk and Suffolk, for example, share a Victim Care Service (Norfolk and Suffolk Victim Care 2019), although this is less a cross border agency collaboration and more a pooling of resources by PCCs. There remains little evidence of whether agencies work together, let alone how or will they work together in a landscape which encourages competition. Engagement with victim services/the delivery of victim services involves the engagement of a number of agencies from a variety of different sectors including the public sector (e.g. the police), the private sector (e.g. locksmiths for burglaries) and the third sector (e.g. a restorative justice charity). All of these agencies have different approaches to supporting victims, different roles, different methods and different interactions and these need to be taken into consideration in planning and delivering a multi-agency partnership service for victims. Furthermore, the whole point of having a localised approach and oversight of a service is because there are likely to be different needs in different areas, however if cross border collaboration is being encouraged in the Framework, one has to question whether the needs of victims do vary substantially between areas and whether there is therefore a need for localised commissioning as opposed to larger services which can be delivered across the whole country, overseen by the government. In other words, is there a service need for localisation, or is it more of a political or ideological move?

The Commissioning Framework (MOJ 2013b) provides guidance around multi-agency partnership working insofar as it highlights the importance of a partnership approach to meeting the complex needs of some victims. This is essential if they are to be fully effective and should take into account all available specialist expertise at both strategic and operational levels of commissioning (Shircore and Ladbury 2009).   The Commissioning Framework (MOJ 2013b) also highlights the positive key role PCCs can have in ensuring a multi-agency approach, but it fails to provide guidance on how to actually achieve this. Some – such as support services themselves – may consider this

to be quite positive as the need for support services and importance of supporting victims has been identified. The difficulty may be that the multi-agency partnership approach has been left to PCCs to develop, who were unlikely when victim services were devolved to them to have experience of victim services, especially those who had taken a "Police Manager" approach to their role, and may not have given consideration to referral processes and helping a victim get from one agency to another for support. So, the Framework is providing basic guidance but fails to actually advise on how to deliver a good multi-agency approach. This does allow Commissioners to make their own decisions of how to approach this and the referral mechanisms to have in place, however it could also lead to some victims missing out whilst they worked out what was and was not working for their area. Some PCCs simply included links on their websites to the "locally commissioned 'general' victim service provider", others just directed victims of crime to Victim Support's national website (Hall 2018), despite the focus on local services. Other areas fared much better. In Cambridgeshire, the PCC set up a Victims Hub where all victims were directed for information and/or referred and guided through the various agencies available to support them after having been victimised (Victim Services 2019). In the Thames Valley, Victims First was launched in 2017 to deliver free support to victims of crime with an allocated Victims First Officer (Victims First 2019). The Victims First Officer was intended to work with an individual victim to put in place a support plan. This could include referrals on to specialist services (Victims First 2019). Here, again, different approaches have been taken to the set up and delivery of victim support organisations but with the localism agenda they are creating an inward focus and potentially missing out on other examples of best practice in other areas.

The commissioning cycle requires the commissioner to undertake a framework of "understand, plan, do and review" (MOJ 2013b:5). This requires them to understand the needs of the victims in their area, plan the services which are best suited to support those needs, implement the best service and review the service provided at regular intervals to ensure the best outcomes, at the best value, are consistently achieved (Commissioning Support Programme 2010; MOJ 2013b). This is not, in this researcher's view, something that PCCs or the MOJ (for nationally commissioned services) can expect to achieve on their own; they need to work with local agencies to establish current services, needs and gaps in service requirements and what could work and what would not work. It is not enough to engage with local service providers in the first instance, individuals who have experienced crime and victim services should be consulted for their feedback on what worked for them and what more could have helped in their situation, and this is where this research is important. Simply progressing without consultation would not be effective and could cause more harm to victims of crime.

What is possibly one of the biggest flaws of this new system is that the services provided and commissioned are decided by the OPCC. This is often based on research they have been provided with, not necessarily a decision made on a whim, but they can decide who does and does not benefit from their funding to a service. When PCCs first took over victim services, in Hertfordshire the PCC was very clear that RJ should not be used for serious offences, whereas other areas felt it was suitable for all offences, meaning that victims of crime living in Hertfordshire would miss out on an offer that may be available elsewhere (Kuppuswamy et al. 2015).

The MOJ have identified that victim support services should be "targeted at those who have suffered the greatest impact from crime: victims of serious crime, the persistently targeted, the most vulnerable and intimidated" (2013b:6). This does not, however, consider what this could mean for individuals not considered to fall under these categories. Nor is it clear how one would define an individual as being the most vulnerable or the most intimidated or how this could be quantified. As a result of the vagueness in this direction from the MOJ, and the decision to switch to localised management of victim services, these decisions are left to PCCs to make decisions on and address. Of concern is that this new practice will in fact continue to prioritise those victims of crime central government (or local politicians) wish to continue to focus on such as sexual offences, human trafficking and female genital mutilation, while leaving victims of more 'typical' crimes behind, kept at arms' length to focus on the more serious (Hall 2018). In their Police and Crime Plans, PCCs identify where their focus will be for the duration of that Plan. Many have chosen to focus on sexual offences and cyber-crime and fraud, whilst in Norfolk they are also looking at supporting and protecting those living in rural communities (Hall 2018).

Much like some services within the NHS (for example, the geographical availability of IVF, Hatton 2019), victim services across England and Wales have been varied, in places sporadic and in other places non-existent. Apart from the removal of a generic Victim Support backstop of support services, it is unclear whether the introduction of PCCs has changed much in terms of the victim services available and on offer to victims of crime apart from having local oversight of most (but not all) of the commissioned services. Of note, however, is the role PCCs can play in ensuring a smooth journey for victims through the criminal justice system, working with partners in the criminal justice system and commissioned services to effectively meet needs and provide support and guidance as required (MOJ 2013b). With this role PCCs are responsible for advertising the services they wish to provide, receiving and reviewing any applications, awarding commissioning grants and then monitoring the delivery by the successful providers (Bedfordshire Police and Crime Commissioner 2023).

The implementation of a number of changes in a short space of time continues to leave a number of questions in relation to the support services available to victims of crime, their availability and effectiveness and gaining access to these. The effectiveness of moving the commissioning of victim services to PCCs to implement a localised approach is yet to be fully explored, with McDaniel (2018) highlighting that "the absence of research on the work and successes of PCCs is startling" (p23). However, Wedlock and Tapley (2016) have highlighted that the move to local oversight of victim support services through PCCs "has created an opportunity to develop and co-ordinate a range of support services to meet the needs of all victims in their area" (p5). For example, if we take the first category of need – mental and physical health – the Ottawa Charter, devised at the first International Conference on Health Promotion in 1986, requires the government to provide people with the opportunity to have greater control over their health (Shircore and Ladbury 2009, MOJ 2013b, WHO 2016). If PCCs are working collaboratively with the public to develop victim services then they are not only helping to meet the needs of victims of crime, but they are also meeting the government requirements under other charters.

Hall (2018) explored whether local commissioning is meeting local need. Here he considered PCC assessments which had been used by PCCs to inform the decisions they made about commissioning victim services. To properly service victims of crime, PCCs should have prioritised learning from victim experiences and asking victims what they want and need. One of the biggest challenges faced by PCCs when taking on the commissioning of local services was the short timeframe in which they were expected to assess local need and implement a new system, leading to a lack of victim input (Hall 2018). This means that decisions on structure and commissioning of services were made with far less information than perhaps could have been available. Simmonds (2019) has gone on to explore the impact of local commissioning on victim services, focusing on the far south-west of England, but she too points out the need for further research on a larger scale "to unpick the finer workings of local commissioning via the PCC" (p16). What she has identified in the south-west, however, is the continuing uncertainty of victim services commissioned by a politically elected officer where the PCC (and hence the PCCs priorities) may change every four years. In addition there are pressures placed upon smaller agencies in providing updated reports on service delivery and outcomes to multiple funders and the difficulties faced in identifying funding streams to support the work completed where further funding has to be acquired alongside funding from PCCs. Finally, there is the pressure of competing against agencies they are then expected to work in partnership with (Simmonds 2019).

Summary

Ultimately, what is necessary to understand the effectiveness of services is an insight into the service and the outcomes for victims in terms not of the amount of time spent supporting an individual but the real outcomes for the individuals being supported (Supporting Justice 2021). In other words the challenge is to measure outcomes rather than process. This was the original intention of the MOJ in moving to commissioning, but it has been found very difficult to measure outcomes for victims, with no research-based and validated scale on which to measure the effects of the offence on victims over time. Such research has still not been done. Similar difficulties have been highlighted in the privatisation of probation. The problem here was not the commissioning, but the motivation of payment by results about people's behaviours which cannot simply be measured in numbers and interventions but the actual detail of achieving outcomes to help them. These difficulties have been seen in the HM Inspectorate of Probation (2018 and 2019a) report findings that some CRCs were failing in their public protection duties.

The changes which have been made to the delivery of victim services across England and Wales follow the pattern of changes implemented by the Conservative party since the Coalition Government formed in 2010. This has seen a move away from managerialism and managerial accountability through target setting and performance indicators, to a focus on localism and decentralisation across the country (Raine and Keasey 2012). For victim support services this has meant a move from blanket funding to Victim Support for generic victim support services and the introduction of Police and Crime Commissioners to oversee a variety of functions around the police and victim services on a local level. The concern with making this move when it comes to the delivery of

victim services often comes down to oversight and ensuring there is adequate oversight and delivery of services for the individuals who require that service. In addition, it is not always clear whether there are sufficient services being delivered to meet the needs of individual victims, particularly across a range of offences. With the adoption of vague outcomes, as identified here, it is difficult to hold service providers to account for delivery of these (Sturgess 2018). Despite repeated changes to the Victims' Code the fundamental idea of commissioning at a local level and leaving provision to reflect the priorities of the PCC has not changed since these changes were implemented in 2015. Whether opposing changes will be made with the introduction of a Labour government in 2024 remains to be seen.

The Victim Services Commissioning Guidance was published in December 2024, as this thesis was being submitted, so it has not been included in this submission. From a review of this document, the Victim Services Commissioning Guidance (MOJ 2024b) does not give any explicit guidance or instructions on what PCCs should be commissioning. It does however focus on collaborating and co-commissioning victim support services with other commissioners, a change from the focus of this research which has focused on PCC commissioned services since they have had the responsibility for commissioning victim support services placed on them by central government.

Chapter 5

Methodology

The purpose of this research is to explore the victim experience of victim support services commissioned by Police and Crime Commissioners. This will be achieved by conducting interviews with victims of crime themselves, agencies working with victims of crime, and the Office of the Police and Crime Commissioner.

This chapter therefore sets out to explain the strategy used to conduct this research, outlining sample criteria and issues related to access, the aims and objectives of this study, the design of the research and the various ethical issues related to a study of this kind. The chapter will also describe the analytical approach utilised before describing the characteristics of the sample.

Ethical approval for this study was gained from the University of Sheffield on 3 September 2019 (Appendix F), with an amendment to include the use of video conferencing approved on 18 May 2020 (Appendix G).

Research Question

This research aims to answer two primary questions. Firstly, what is the experience of victims of locally commissioned services, that is, the services available to them under their local Police and Crime Commissioner? The second question to be answered is in relation to the victim label.

The first question is particularly relevant given Police and Crime Commissioners (PCCs) took over responsibility for local victim services in 2014 and across the country each PCC has developed their own approach to dealing with this (Madoc-Jones et al 2015, Hall 2018) (see Chapter 4).

The second research question arises from existing research literature where there is considerable debate and contention around this topic of moving from the non-victim to victim identity. Previous research suggests it is not simply about moving from 'non-victim' to 'victim', but centres around the debate of who is a victim and who decides if someone is a victim (see Chapter 2). Early in this research journey the researcher was speaking to someone who asked what they did. The researcher gave a basic explanation of this research looking at the victim experience and the person they were speaking to said good. This person then went on to explain that someone had broken into their home and been in their bedroom, and whilst it was a scary experience they had not thought of themselves as a victim until the victim support agency called a couple of days later and called them a victim of crime. Just this general informal discussion shows the potential value of this research as here, a relative stranger, told the researcher that after a crime

had been committed in their home, they did not think of themselves as a victim of crime until someone else told them that they were. This consideration had them changing how they viewed themselves. Taking an interpretivist approach, as explained later in this chapter, this research will be considering the complexity and meaning of the victim label and experience by those working and volunteering in the field, as well as those utilising the victim support services available and what this means to them (Black 2006, O'Reilly 2009).

The key research questions are therefore:

1. What is the experience of victims of services commissioned by their local Police and Crime Commissioner?
2. What is the victim label and who adopts it?

Types of Crime

The decision was made not to focus on specific crime types, allowing for a wider cohort of victims of crime. As discussed in Chapter 4, the decision on which services are commissioned and victims of crime supported is made by PCCs and they all have their own objectives, often based on local need. Focusing on specific crime types could exclude some PCC funded services, when the purpose of this research is about PCC funded services. Furthermore, Sexual Assault Referral Centres, Domestic Abuse and Hate Crime agencies, for example, support exclusive groups of victims, whilst restorative justice and generic victim support services will often work with victims who could have experienced an array of offences and as this research is about the victim experience of services commissioned by PCCs, all should have the opportunity to participate and not be excluded.

Epistemology

Epistemology is about how knowledge is composed, that is "how we come to know that which we believe we know" (Hiller 2016:100). As Pascale points out, "social behaviour is not governed by fixed natural laws; there are no social equivalents of scientific laws such as gravity" (2011:23). In attempting to understand and explain the knowledge of experiences for those involved in using and delivering victim services (Levers 2013), the positivist approach to research posits that it is possible to measure reality/truth to provide researchers with credible facts. However, the lived experiences of those who have utilised services and those who work to provide those services are unique to that person, everyone's experiences are different and the interpretivist approach posits that reality/truth is dependent on individual interpretations, and therefore there is no one reality/truth, rather there are multiple realities/truths for the researcher to consider and, in turn, construct theirs based on their subjective interpretation of the results (Bryman 2016, Levers 2013).

The interpretive approach provides an opportunity for the researcher to understand and interpret the reality/truth of the individuals being interviewed or participating in focus groups (Denzin and Lincoln 2005). In utilising multiple methods (interviews and focus groups) the researcher hopes to gain a better understanding of the different groups involved from their lived experience and a broader picture within which to interpret the rich data these methods will provide (Denzin and Lincoln 2005, Gray 2004). Understanding of the experience comes from individuals' interpretation of actions and objects, that is, the understanding of a victim of crime will be created by the experience they have of the services, as well as how they are treated now they have become a victim of crime; whilst the understanding of the volunteer/staff member in delivering the service will be created by their training, experience from colleagues and their own experiences (Gray 2004). Given the different experiences of just these two parties in the process, the method is likely to provide significantly different lived experiences and interpretations, and understanding the different meanings of the experiences is key to interpreting the data within this research (Pascale 2011).

The interpretations of the subject matter will develop as the fieldwork and analysis progresses, and patterns and commonalities are identified (Denzin and Lincoln 2005). It is impossible to hypothesise an outcome from qualitative data when the data to be collected is subjective. In utilising the interpretivist approach the researcher is not looking to understand the objective reality of services commissioned by OPCCs, but the subjective reality and its meaning as perceived by the individuals involved – the agency view can be found in their aims, objectives and published evaluations/reports (Capper 2018). This research will be shaped not only by those interviewed with their lived experiences and subjective views, but by the researcher's own experience and demographic make-up, all of which will be woven together to create the finished product (Denzin and Lincoln 2005).

The interpretive approach here allows for the researcher to consider the qualitative experiences of participants in two areas of the country, through individual interviews and focus groups, by situating them in that world (Denzin and Lincoln 2005) to better understand the victim experience of services commissioned by PCCs through the meaning and understanding created by victims of crime utilising those services, individuals involved in the delivery of those services, and OPCCs who commissioned those services, as well as the experience of moving from the non-victim to victim label (Gray 2004). In choosing this approach it is unlikely that the results will be generalisable as this research is focusing on individual and group interpretations within a specific area, overseen by a specific PCC with their own background (in this case both PCCs aligned themselves with the Conservative Party; those with a different political background may work and commission differently) (Hiller 2016).

Potential Methods

A number of methods were considered to enable the research questions to be addressed. Qualitative content analysis has been used in the thesis to examine the changes in legislation and policy over recent periods (Chapters 3 and 4). In this analysis the use of different words in consecutive policy documents was considered, together

with the length and degree of specialisation of key topics in the documents, but, because the main aim was to show differences in policy objectives, rather than the use of language per se, it was not appropriate to do a full discourse analysis. PCCs have a Ministry of Justice directed mandate to deliver specific services to victims of crime and whilst content analysis is a useful tool for the systematic evaluation of text, it would not be sufficient for this research to complete only a content analysis as the focus is on the victim experience of those services and the victim journey which needs to be informed by what the policies and legislation say, as well as the victims of crime and those working to support victims of crime (Bryman 2016). Future research could look at comparing services in different areas, with a content analysis allowing for exploration of the interpretation of MOJ directives alongside consideration of subsequent implementation (Bryman 2016).

Ethnography and participant observation (both structured and unstructured) were dismissed as viable methods for this research for a number of reasons. Firstly, structured observation involves creating an environment with its own rules and format (Bryman 2016). This does not help to address the research questions. Secondly, ethnography/participant observation, whilst potentially informative if observing a meeting with a victim of crime or the process of managing a referral or interaction/communication between the OPCC and an agency, risks the presence of the researcher influencing the behaviour of those involved and therefore not showing a true picture of perceptions of victim services under the PCC, or requires an element of deception in not telling participants the true reason for the researcher's presence as these need to take place in natural settings (Bryman 2016, Kalaian 2011). Furthermore, as this research requires engagement with a number of different groups, and this ethnography requires being immersed in a group for a period of time (Bryman 2016), this would take considerable time to actually do and is not feasible.

Questionnaires are a primarily quantitative method of research which are both quick and cheap to administer allowing data to be collected about one or more specific topics (Bryman 2016, Trobia 2011). However, whilst they are convenient and there is a reduced chance of the interviewer influencing responses when self-administered, they do not allow for the generation of interpretative data as questionnaires are often lacking in detailed responses, nor do they allow prompts or follow up questions to explore the finer details of a response (Bryman 2016). The topic of victim services is a sensitive area to address, particularly for individuals who have been the victim of crime, and questionnaires are not appropriate in these circumstances as this research is looking for rich, qualitative data based on individuals, not a concrete response which can be easily quantified (Bryman 2016). Whilst it is anticipated that access to participants may take some time, with questionnaires one cannot control who responds meaning those completing the questionnaire may not have experienced victimisation or victim services or the number of responses which may be received meaning there could be thousands of basic answers but not the detailed qualitative data this research requires, or, as questionnaires are known to have a lower response rate, could have just a few responses which may not be valid or provide any additional knowledge (Bryman 2016).

There are many benefits to undertaking qualitative interviews for research, including that these allow for the emphasis to be on the interviewee, their perspective and their point of view (Bryman 2016, Dialsingh 2011). Wholly structured interviews, however, are inflexible with a standardised interview limiting the opportunities for exploration and expansion as these interviews would follow the same set of questions, with the same wording and order for each one (Crow and Semmens 2007, Dialsingh 2011), limiting the opportunity for participants to share their "ways of interpreting and experiencing the social world" (Mason 2002:231). Semi-structured interviews on the other hand offer a far more flexible approach for both the interviewer and the interviewee (Bryman 2016, Crow and Semmens 2007, Dialsingh 2011).

Semi-structured qualitative interviews encourage discussion to go off on tangents, allowing departure from the interview guide and the opportunity to find out from interviewees what is actually important to them when it comes to exploring what a victim is, the service delivered to victims of crime and their understanding of this, as well as allowing interviewees to really collect and consider their thoughts and responses if they need to (Bryman 2016, Crow and Semmens 2007, Dialsingh 2011, Fohring 2018b, Mason 2002, Madoc-Jones and Roscoe 2011). Conducting semi-structured qualitative interviews allows the interviewer to vary the order of the questions being asked as well as the wording, adapting to the interviewee (Bryman 2016) and for the inclusion of prompts and follow up questions to assist if, for example, they are struggling to answer a broad question or if an interesting point has been made which requires further exploration (Dialsingh 2011).

The decision was therefore made to give due consideration to existing research, reports, directives etc. through content analysis and undertake semi-structured interviews using an interpretive theoretical perspective as this would allow depth of study to understand the meaning and explore the process of victim services within the social context in which they reside (Bryman 2016, Crow and Semmens 2007). This method is appropriate for all potential interviews, especially considering the variety of individuals to be interviewed as part of this research, as they are all part of this community in different ways and these interviews would produce the results of those individuals at that place in time (Crow and Semmens 2007).

This is why individual interview schedules were drafted for each group to be interviewed. In line with the semi-structured interviews these schedules were designed to act more as guides, or prompts, in that questions had been prepared, however they were not rigorously structured (Appendices A, B, C and D), allowing for adaptability to the individual being interviewed and flexibility in the delivery of the questions and the potential for further questions, exploration and probing where required (Crow and Semmens 2007, Dialsingh 2011). So if in answering one question participants also address a later question this could be skipped and perhaps probed further at the point the interviewee brings it up. Semi-structured interviews have been preferred to unstructured interviews, so that questions could be asked of participants in the same way, for example, when changing the focus from an individual's experience of services to their understanding of the word 'victim' which is central to this research (Bhattacharya 2012).

A further benefit of using interviews is that it allows participants to explore the topic of victims of crime in some depth; understanding views and perceptions are not things which just happen, they develop in a social context. This exploration helped to demonstrate and understand this (Crow and Semmens 2007) and provided some understanding of how and why people feel the way they do. Conducting a focus group/group interview is not without its challenges. The researcher will have less control than with an individual interview and there is a risk of the researcher influencing the participants in trying to assert control over the group if they start to go off topic (Crow and Semmens 2007). Whilst allowing participants to stray from the topic at hand can be beneficial, it can also be unproductive and the researcher may also need to prompt interesting points if they are not followed up with discussion, whilst the researcher will also need to ensure there is an adequate balance of participation in the group (Crow and Semmens 2007). These interviews allow for the emphasis of the research to be "on sense making, description and detail" in helping to understand the victim experience further (Bhattacharya 2012:466)

Individuals delivering the service directly to victims of crime were invited to participate in this research in a group environment. A group interview allows for a semi-structured interview to take place and follows the same format as individual one-to-one interviews (Bryman 2016). Different research methods literature suggest different participant numbers for focus groups with Crow and Semmens (2007) suggesting a group should consist of between six and eight members, Cronin (2008) suggesting between six and 10 members, whilst Bryman (2016) states that they are usually made up of four members. This research aimed to have up to five participants in each group. This was a mixture of both a focus group and a group interview. One reason for conducting group interviews was in the light of the fact that it is often difficult to get interviewees to turn up (Crow and Semmens 2007). Rather than risk interviewees not turning up (Crow and Semmens 2007), group interviews were conducted to allow these to go ahead regardless of how many turned up, although it was considered that size may affect the group dynamic to some extent (but this was not an issue). Another reason is that it adds to the individual interviews by allowing those working with victims of crime to engage in discussion (Morgan 1997). The individuals attending the group interviews may be volunteers or paid staff and it was hoped that participants would feel more comfortable with each other if they were from the same agency with similar levels of understanding and could respond honestly and discuss their own thoughts and feelings (Bryman 2016, Crow and Semmens 2007). A potential downside identified was that if there was a mixture of staff and volunteers at different levels in the organisation, individuals may not share their own personal view as a result of the group effect and a reluctance to be honest in their views, instead stating what they believe are the expected views for fear of being challenged within the group setting or not sharing their view at all by allowing the discussion to be dominated by those with more knowledge and experience (Crow and Semmens 2007, Gibbs 1997, Morgan 1997). A further risk was that there may be individuals within the group who were quite outspoken, therefore dominating the discussion (Cronin 2008, Leung and Savithiri (2009), or those who are quite shy and reluctant to speak up in a group (Cronin 2008). Neither of these were an issue as none of the participating organisations had staff and volunteers at a similar level, where there were volunteers the staff were operative or strategic leads, and none of the participants dominated the conversation,

with some perhaps more willing to start a discussion than others, but all having an opportunity to share their views.

The plan from the very beginning was to conduct this research through face-to-face interviews, with the option for telephone interviews if preferred by the participant. The face-to-face interview was the chosen method here due to the sensitive nature of the topic to be discussed, particularly for victims of crime, and the opportunity to probe respondents further and increase data collection (Dialsingh 2011). However, this plan needed to be modified because of the Covid-19 pandemic and the various restrictions on movement that were implemented (discussed later in the chapter).

Location

The Police Reform and Social Responsibility Act 2011 gave significant discretion to PCCs in the development and structure of their offices. Each area is different, which made selecting areas to focus on quite difficult as, whilst there are many similarities, there are also significant differences. When it came to selecting the overall location to focus this research, the decision was made to focus on the area in which the researcher resided in an attempt to reduce the amount of travel that may be required. As it was, this did not matter in the end as all interviews were conducted remotely due to the Covid-19 pandemic. The focus therefore was on the East of England, specifically an area where there is already strategic collaboration across seven counties on the policing side, however prior to commencing the research it was unclear whether this was also the case on the victim services side. Whilst in some areas it was found this was the case, for the two selected areas it was not. In selecting areas with a shared border, it was felt to be interesting to see the similarities between neighbouring PCC areas, any collaboration, or whether there are any significant differences in the commissioning or management of services, or the services on offer to residents in those areas. At the time approaches were made to PCCs (2019-2020), each of the areas considered was led by a PCC who had stood at the election as the representative from the Conservative Party.

The areas selected for this research were chosen for a number of reasons. Firstly, whether the researcher could be known to any of the agencies due to their previous roles working for an RJ service and in education and so there might be a conflict of interest perceived. Given the time that had elapsed since working in those positions and the changes in staff at agencies this was unlikely, however it has been given consideration. The researcher had met the Strategic Lead of one of the services in their previous capacity as a Lecturer, however they did not have any contact with them for a number of years before the research started; the only advantage was that the researcher knew the name of the person to contact.

Secondly, the areas selected were different in the structure of their victim services, in that one area had an internal hub, whilst the other continued to commission the services of the generic support agency, Victim Support. Of the seven areas initially under consideration, two had internal hubs (run by the police), one had an external hub with some police support, and four had Victim Support hubs, with two sharing one hub

between them. Approaches were made to the two internal hub areas and two Victim Support hub areas to allow for comparison. The external area with a police hub was to be contacted if an additional participant area was required.

Whilst the researcher could be considered an 'insider' due to their knowledge of RJ services (see below), this was not disclosed to RJ services and the services were free to provide as much detail about RJ as they wished. The researcher has not been the victim of a crime or utilised the services on offer, nor had they worked for the services interviewed or similar in the four years preceding the commencement of the fieldwork. Two years after concluding the fieldwork the researcher secured employment with an organisation which worked with one of the OPCC's and was aware of but did not have contact with one of the participating organisations. This employment was secured after the results had been written up, whilst writing up the discussion. It has not had any impact upon the research.

Mapping PCC Areas

It took some time to map each area to ascertain the services commissioned and the structure of victim support services. This started with the OPCCs websites, looking at financial reports to see what services they were spending money on, and links to support services. In one area there was a lot of confusion as the researcher could find two websites about victims services and thought one may be a hub, and the other a directory for services. Unfortunately the researcher could not work out which was which and had to telephone to find out. When the researcher explained what they were trying to understand, the organisation refused to provide any information without PCC approval (explained further below). This was disappointing and one has to hope that if a victim of crime called them for help they would have helped and directed them accordingly. This did highlight potential difficulties for victims of crime seeking support, although for many other areas it was easier to find links to support via PCC websites.

Engagement with Agencies

Engaging agencies proved to be far more difficult than initially anticipated. As already explained, victims of crime were to be found and approached through the agencies providing victim services, with those agencies essentially acting as gatekeepers. What was, to a degree, unanticipated, was that some of those agencies would refuse to engage in any way, even to confirm the structure (hub or no hub) without the express permission of the OPCC. This meant that approaches had to be made to the OPCC a little earlier than anticipated as permission needed to be sought from PCCs to conduct the research with their commissioned services. For one area this led to them being removed from consideration as the OPCC failed to effectively address the request of a local agency who had insisted they could not speak to the researcher at all without permission from the OPCC, but when approached the OPCC simply directed the researcher back to that agency. Despite the request being clarified by both the researcher and the agency in question they failed to give permission.

Some OPCCs approached raised concerns about participating in this research. These concerns included the amount of resource which would be required by them and their agencies which the researcher had attempted to keep to a minimum by simply asking that they forward a statement the researcher had drafted to victims of crime being supported/previously supported. One area, however, insisted that they would have to review and approve all interview schedules, prepare the victims of crime and arrange for a support worker to be present. This could have changed the dynamic of the research for a number of reasons. Firstly, this could have changed the focus of the research (if they insisted on seeing the interview schedules and wanted to make changes). Secondly, if they wanted to prepare victims of crime they could influence the outcome by telling them what to say and if a support worker was to be present in interviews with victims of crime they may not feel they could be honest about their views with the type of or even actual person they are essentially talking about being present when asked about their experience of that service. It was therefore decided that this area would be unsuitable but it is important to note that none of the participants in this research were 'briefed' about what to expect from the interview outside of the contents of the participant information sheets (Appendices H to K). A number of the victim participants did, however, take the opportunity to thank the researcher for doing this research and giving them a voice. They shared that they found answering the questions to be quite helpful/beneficial to them.

Of the remaining two areas approached, one had an internal hub (Area A) and the other a victim support hub (Area B). Both OPCCs were interested in being part of the research and happy for their commissioned agencies to be involved and did not attempt to influence the research in any way. Area A had an internal hub who were happy to participate in the research, but fieldwork was delayed by the impact of the Covid-19 pandemic and staff changes in their services. All other agencies approached in Area A and who were receiving funding from the OPCC were keen to participate. Area B had a Victim Support hub who initially were interested and requested sight of the questions to be asked of victims of crime. The researcher provided a brief summary of the topics to be covered but not the questions themselves as this would have risked influencing the responses. Unfortunately, when permission was sought from their Head Office they declined the opportunity to participate, with the Head Office citing GDPR rules and the additional workload to staff due to the criteria of service users. This was despite assurances that the workload was minimal, there was not any criteria except to have used the service since they had been commissioned by the OPCC, and that the researcher was giving permission for their details to be passed on so victims of crime could contact the researcher directly and therefore there would not be a breach of GDPR. In stark contrast, individual agencies within the chosen areas indicated that they saw no issues with participating because so little was being asked of their services in supporting the recruitment of participants and attending interviews. Although happy to participate, the Sexual Abuse Agency in Area B said that they could not offer access to their staff all at the same time for a focus group due to workloads but would make them available for individual interviews. The Sexual Abuse Agency declined to engage with any of the victims of crime they had supported to see if they were interested in participating in this research following a decision by their management and trustees.

Throughout this research the participating agencies will not be named, rather they will be identified by the type of crime/services they focus their support on.

The majority of the responses to the research were positive and almost all agencies contacted by the researcher were keen to participate. There was some concern amongst agencies given the impact of the pandemic, though all participated. The reluctance of a national agency to engage in independent research is a concern, however, especially when considered as an opportunity for the agency to engage in independent research with no financial costs to them, simply a few staff members and/or volunteers giving up some time to be interviewed. It is also concerning that an OPCC who was initially approached and offered the opportunity to participate in independent research wanted to control the narrative by knowing and approving all interview schedules and having a worker present to support victims of crime. Whilst the concern for victims of crime is admirable, this would in fact take away the victim voice as one cannot expect an honest response about a service when that service is present. This further raises concerns about the reluctance of some agencies to engage in research and makes one wonder what it is that makes them fearful of being researched and how accurate any research they may have previously produced is, if they are controlling the narrative. One might wonder whether they are acting in the best interests of victims of crime, or themselves.

Participants

Given the research questions are to consider the victim experiences of those using victim support services, and particularly to consider this in the context of commissioning, participants in the research needed to be those involved in using or delivering the services. Following the purposive method of sampling where participants are selected because of their proximity to victim support services commissioned by PCCs (Wilson and Miller 2014), a number of different groups were invited to participate to help provide an overview of the victim experience and the labelling of the victim of crime. This sampling method has been chosen as it allowed for participants to be recruited who could help to answer the research questions (Bryman 2016). This research therefore follows an a priori purposive sample with the criteria for participants established prior to the research taking place (Bryman 2016). An individual was eligible to participate in this research if they worked (agencies) or lived (victims of crime) within the chosen PCC area and had given/received support from at least one of those agencies. The agencies recruited were approached because they were receiving funding from their local PCC to deliver a service to victims of crime and were approached via telephone and/or email. Agencies were asked to circulate an email to their staff, volunteers and victims of crime inviting them to participate in this research. In some cases it was necessary for them to have a conversation with some victims of crime to gauge their interest.

Group 1 – Victims of Crime

To explore the victim experience, victims of crime had to be invited to participate. All victims of crime had to be over the age of 18 to participate. Agencies acted as

gatekeepers for the victims of crime and were asked to send an email to the victims of crime they were working with and those who had agreed to be contacted after they had stopped using the service. There was no stipulated timeframe from which they used the service, however they did have to have used the service since the agency started to receive funding from the OPCC. Some agencies highlighted a preference to call victims of crime to discuss the research with the victim of crime first, and as they knew the victims of crime more than the researcher, this was left to their discretion/expertise. This does increase the risk of a biased sample with approaches only made to those who had a 'positive' experience, however this is preferred to causing further harm to some victims of crime had the research adopted a blanket approach. It was also considered that this personal engagement may increase the likelihood of participation rather than an impersonal blanket approach. Victims of crime were provided with basic information about the research in an information sheet and provided with the researcher's contact details to find out more and to volunteer for the research, with the opportunity always available to ask questions. Victims of crime were invited to attend individual interviews with the researcher to explore their experience of the service, the process and the victim label.

For this research victim participants in Area A were from the RJ Service and the Home Protection Agency. Victim participants from Area B were from the RJ Service and Domestic Abuse Agency.

Group 2 – Agencies

In order to get an overview of services being offered to victims of crime, how they are offered and delivered and why, it is important to include the agencies responsible for the delivery of this service. All agencies approached had been commissioned fully or partially to deliver a service to victims of crime within that PCC area. Given the nationwide lockdown in 2020 and subsequent adjustments to a 'new normal', engagement with agencies took time. Some responded quickly to say not now, others responded a month or so down the line. Conversations took place over the telephone/video call to discuss the research and what was required of the agencies before internal permissions were sought. Within the agency a number of individuals needed to be included: Strategic Lead, Operational Lead and those directly involved in service delivery.

Firstly, an interview was sought with the Strategic Lead, responsible for oversight, development of the service and working with the OPCC. This was so that there could be insight into this relationship and the development of the service. Secondly, an interview was sought with the person responsible for managing referrals (Operational Lead). This was to provide an opportunity to obtain some understanding of the referral process and assessment of individuals referred. Depending on the size of the agency, the person managing referrals may also be the Strategic Lead so one set of questions was designed for both these roles, and if they were unaware of an answer due to their role then they did not have to answer it (Appendix C).

Thirdly, the individuals delivering the service directly to victims of crime were invited to attend a focus group/group interview. It was important to meet with this group to explore their experience in working directly with victims of crime, and their view on the service delivery (Appendix B). This also allowed for a comparison between their understanding and expectations and that of the Strategic Lead. Given the focus on keeping costs low in a "challenging economic climate" (Wells and Millings 2018:2), it was considered highly likely that these individuals would be volunteers. To make them more comfortable and allow discussion of their views, they were invited to attend a focus group/group interview. This would allow for discussion of topics which had not been previously "thought out in detail" (Morgan 1997:11).

In Area A the RJ Service, Victim Support Service and Home Protection Agency all participated in this research. Both the RJ Service and Victim Support Service used volunteers, whilst the Home Protection Agency only had paid staff. In Area B the RJ Service, Domestic Abuse Agency (DA Agency) and Sexual Abuse Agency participated in this research. Only the RJ service used volunteers, whilst both the Domestic Abuse Agency and Sexual Abuse Agency only had paid staff.

Group 3 – Office of the Police and Crime Commissioner

The OPCC was invited to participate in this research because they are responsible for the commissioning and funding of victim services in their local area. It was anticipated that this interview might take place with the Police and Crime Commissioner themselves, or a representative of the office responsible for the commissioning of services and overseeing the day-to-day working of victim services.

Overview of Participants

In each PCC area, therefore, it was proposed that the following would be interviewed:
- 25 victims of crime (drawn from up to five victim support services)
- Strategic Lead(s) for each agency
- Referral Manager for each agency
- Delivery staff/volunteers (focus group of five) from each agency
- The PCC or a representative from the OPCC.

This meant that the researcher would potentially be undertaking a maximum of 36 interviews and five focus groups in each area. This would total up to 82 interviews and 122 individual participants.

In actuality two PCC areas agreed to participate in this research, with three agencies from each area agreeing to participate also. The OPCC interviews took place with the individuals responsible for the commissioning of victim support services within the OPCC. From the participating agencies a total of 22 individual interviews and five focus groups took place, with a total of 35 agency participants. From these agencies 14 victims

of crime participated in this research, with a total of 48 participants across both areas (see Chapter 6 – Results for a breakdown of the participants).

Warren (2002) recommends a minimum of between 20 and 30 for research to be publishable, Adler and Adler (2012) advise between 12 and 60. Gerson and Horowitz (2002:223) were of the view that "fewer than 60 interviews cannot support convincing conclusions and more than 150 produce too much material to analyse effectively and expeditiously" and the researcher would agree with this to the extent that had they had more participants they would have been victims of crime from agencies who were not represented which would have given more victims of crime a voice.

Police and Crime Commissioner areas vary in size, but, according to most Police and Crime Plans, still have the same objective – to put victims of crime at the heart of the work that they do. In order to get a fair representation of an area it is important to include a sufficient number of agencies (up to five) and a good variety of participants from those agencies.

The Covid-19 Pandemic

An unanticipated complication affecting the fieldwork for this research was the global pandemic which started to significantly affect the UK from March 2020. In March 2020 the UK was placed in a lockdown and restrictions on movement were introduced by the government. The impacts for this research was that a number of agencies advised that they could not start or consider participation in this research as they dealt with the impact of this pandemic on their services. This led to a delay in commencing fieldwork from March 2020 to July 2020, with some agencies unable to engage until 2021. Additionally, revision to ethical permission was also needed to include conducting interviews via video.

The use of video conferencing for social science research is not new, however research into its effectiveness is still in its infancy, with most research to date focusing on either Skype or Zoom (Archibald et al. 2019, Deakin and Wakefield 2013, Hanna 2012, Hay-Gibson 2009). However, as technologies and communication have developed, and remote and hybrid working becomes more commonplace, with improved apps and tools for the running of these, it is likely their use will increase also and the potential is limitless (Archibald et al. 2019, Hanna 2012). Here, the use of video conferencing is being used as an alternative to face-to-face interviews, however Deakin and Wakefield (2013) point out that it should be considered a viable option from the start, especially in a time when there is increased bandwidth, easy-to-use technology which is relatively inexpensive and often just require a smart phone, laptop or tablet.

As this change has come about as a direct result of the Covid-19 pandemic, it was not anticipated that challenges such as participants being embarrassed to appear on video or even be recorded for the research would be an issue (Deakin and Wakefield 2013, Hay-Gibson 2009), as many people had downloaded video sharing apps and used these increasingly during lockdown both in their work and personal lives to stay in touch and

maintain some social interaction, albeit virtually (Kelly 2020). However, it was important to check it was convenient for interviewees so there was no risk of harm or coercive partners wishing to join – although it was anticipated that agencies would be unlikely to invite individuals still living with coercive partners to participate because of the associated risk. In this research two victim participants requested telephone calls – one was an older participant who was not experienced in video calls, whilst the other explained they felt more comfortable discussing their experience with someone they could not see. Another used video calling technology but kept their camera turned off (serving police officer) whilst one of the OPCCs had technical difficulties whilst on video so they, and the researcher, turned their cameras off. This does not mean that this change in methodology is without its challenges, with there always being the potential for technological issues, the dropping of the internet and insufficient bandwidth which could disconnect the interview, interruptions outside the researcher's control such as children walking in the room or someone knocking on the door and them needing to answer it (which has actually happened) (Archibald et al. 2019, Deakin and Wakefield 2013). However these can all be, and were, managed and addressed as they arrived and it was easy to do a quick recap of where the interview was before the interruption. Concerns have been raised in the past about the constraints of this technology on building rapport and engagement, however many researchers disagree that this is the case and argue that the data produced are just as reliable over video calls as in face-to-face interactions (Archibald et al. 2019, Deakin and Wakefield 2013).

This change in methodology had a number of advantages, not only for the researcher but also for the participants. Firstly, there was a reduction in costs associated with the research with no need to hire rooms, pay for travel/accommodation or provide refreshments (Archibald et al. 2019, Deakin and Wakefield 2013, Hanna 2012, Hay-Gibson 2009). Secondly, health and safety risks were reduced, though they can never be eliminated (Deakin and Wakefield 2013, Hanna 2012). Thirdly there was greater flexibility for both the researcher and the participant as interviews can be booked in at convenient times without needing to factor in travel time, parking etc. which add time for researchers and participants (Archibald et al. 2019, Hanna 2012). Fourthly, offering a video interview may actually increase participation with those who may have been reluctant to attend a face-to-face interview more likely to engage online (Deakin and Wakefield 2013). On the flip side, this could make withdrawal and non-engagement easier or participants could just not log in or log off if they have had enough – or of course just forget (Deakin and Wakefield 2013). There is no opportunity to build rapport and have a cup of tea with the participant if it is a video interview, whilst paperwork etc., is completed. Individuals were in their own space without feeling as though their personal space is being invaded (Hanna 2012), but for this research this was not assumed, given the sensitivities around the topic to be discussed. Beforehand, it was considered that participants might not wish to engage in this research over a video call during the pandemic when they are at home and might prefer to wait until restrictions are further eased and a face-to-face meeting could take place in a more neutral place if they did not want to have this discussion in their home. None of the participants requested this, however, and were happy with remote interviews. Finally, individuals may be more open to discussion, particularly those interviewed on behalf of an agency, if they are in their own home having a discussion with someone over a video call (Hay-Gibson 2009).

The Questions

When conducting qualitative interviews, it is important for an interviewer to prepare themselves ahead of the interviews taking place (Kvale 1996). This was particularly important as this research requires interviewing a number of different individuals from different groups, particularly those who have been victims of crime. In addition, it is important to consider balance in the interview. The interviewer should be careful not to talk too much or too little, both of which could discourage interviewees from talking (Bryman 2016). It is also especially important that, given the topic of the interview, the interviewer is sensitive to what is going on, ensuring the interviewee understands the purpose of the research and the confidentiality in place (Bryman 2016).

In developing interview questions, Kvale (1996) suggests using nine different kinds of questions to engage the interviewee. Start with introducing questions (Kvale 1996), such as "Talk me through how your service works" which was asked of the strategic and operative leads participating in this research (Appendix J). The interviewer should use a mixture of direct and indirect questioning in their interviews (Kvale 1996). An example of a direct question would be to ask victims of crime "Do you think there is more that could be offered to support you and others who have had similar experiences?". This allows for a specific answer and can be easily addressed – but sometimes such questions can be considered leading and may tend to shut down the flow. An example of an indirect question would be to ask what others may have done or been involved in and whether the interviewee agrees with this, finding out the fact of what happened and then moving on to follow up by asking if they agree with it.

It is important that the interviewer use a mixture of follow up, probing and specifying questions to help the interviewee go deeper into their answers and explore points they may bring up (Kvale 1996). These questions will not form part of the interview schedule but may be used over the course of questioning. Structuring questions help to lead the conversation, taking the interview from the current discussion to the next topic "so I would like to move on to ..." (Kvale 1996). Silence can be an effective tool in conducting interviews as it provides interviewees with the opportunity to reflect on what they have said and elaborate as they wish further (Kvale 1996). There may be times during an interview when the interviewer needs to interpret and clarify a question which has been answered, perhaps by asking "Do you mean ..." or reflect back to the interviewee as "So what I am hearing is ..." (Kvale 1996). This helps to ensure there are no misunderstandings.

Piloting the Interview Questions

When undertaking a research project it is a good idea to pilot your planned research questions using a cognitive interview to see whether there is the potential for questions to be misinterpreted or misunderstood, as well as ensuring that the terms being used are understood (Farrall et al. 2012). A cognitive interview involves not just asking the questions themselves, but asking the respondent what they think the question means/is asking and their views on the ease of answering it. This is predominantly suggested when

it comes to questionnaires but is still beneficial when undertaking interviews as well. The feedback from the cognitive interview can then be used to review and redraft the questions if necessary.

The participants required for this research came from a variety of different groups – OPCCs, victim support agencies (a different levels of management and involvement with victims of crime), and victims of crime themselves. Ideally each of these groups (and sets) of interview questions needed to be tested through cognitive interviewing. However the researcher did not know people within each of these groupings to be able to involve them. Therefore it was only possible to undertake this process with the questions for the Strategic/Operative Leads (Appendix C).

Farrall et al. (2012) explain that there are two broad approaches to cognitive interviewing: "Thinking Aloud" and "Verbal Probing". In the "Thinking Aloud" approach the respondent is encouraged to talk through their thought process as they answer the questions. The transcript is then used to better understand the respondent's understanding of each question and what information they drew upon to answer each question (Farrall et al. 2012). On this occasion a decision was made not to follow this approach because this seemed more suited to a questionnaire than interview questions due to the qualitative detail being sought from the participants.

This research therefore used the "Verbal Probing" approach to cognitive interviewing, taking a more active role as they asked the primary questions of the research and then probed the respondent to elicit more detailed responses, something which it was anticipated they would be doing as part of the research (Farrall et al. 2012), as well as allowing this to be treated as though it were an interview as part of the research and helping the researcher to understand how long to schedule these interviews for. The researcher prepared a number of probing questions in anticipation of some of the items being problematic (anticipated probes), some of which were only used when there was a pause from the respondent in answering the question or talking around the question (conditional probes). Furthermore, there were a few unscripted probes which came up as the researcher looked to better understand a response given by the respondent (emergent probes) (Beatty and Willis 2007).

The cognitive interview for the Strategic/Operative Interview Schedule therefore took place on 15 April 2020. Using the verbal probing approach to cognitive interviewing, the respondent was able to answer all questions within a 45 minute period using video conferencing. To enable them to sufficiently consider the questions, and help the researcher to understand how long the planned interviews may take, the respondent was asked for feedback about the interview at the end.

As the Strategic Lead for their organisation the respondent was able to sufficiently answer all the questions put to them bar one relating to whether the service needed to be evaluated prior to applying for the next PCC contract. This is because the service they worked for was at the time just one year old and they did not know what would be required when the time came to recommission as this was a few years away. It was noted that this may be something which came up during the course of interviews, if agencies

participating had not been commissioned by the PCC for very long, however on reflection it is surprising that they did not know what evaluation of their service would be required.

Some of the probing questions prepared and included within the schedule were used to help dig deeper into the pilot participant's response, showing the preparation of these ahead of the interview was beneficial but may not be needed for every interview to be undertaken. When asked for feedback at the interview and whether they had sufficiently understood the questions being asked of them they did not report any concerns with the process or the questions being asked. No changes were therefore made to the interview schedules, although the prepared probing questions were kept, as well as some being added to the other interview schedules (for example, Question 3 of Appendix A).

Ethics

When it comes to engaging in research, "ethical principles are vital" as they "help social scientists achieve their values in research, avoid strategies that might endanger these values, and aid in balancing values that are in conflict (Diener and Crandall 1978:1).

Many organisations engaging in research have their own Research Ethics Policy, including the University of Sheffield, setting out the fundamental principles of research. The University of Sheffield Research Ethics Policy states a researcher must uphold the rights of participants of research and lists the obligations of the researcher in undertaking this research (University of Sheffield 2018).

Diener and Crandall (1978) broke down the ethics of research into four key areas, all of which are covered within the university's Research Ethics Policy, and all of which were considered and addressed as part of this research:

1) Informed Consent
2) Deception
3) Harm to Participants
4) Privacy and Data Protection.

1) <u>Informed Consent</u>

Once participants expressed an interest in participating in this research, they were sent a copy of the participant information sheet and consent form (Appendices H to K) to read through, consider and return the consent form if happy to ahead of the interview taking place. The researcher then checked all participants were happy with the content of both the information sheet and consent form ahead of the interview and whether there were any questions before beginning.

2) <u>Deception</u>

There was no deception contained within this research. The researcher shared with all participants the purpose of this research.

3) Harm to Participants

Some of the individuals being invited to participate in this research had been the victim of a crime, and there was a risk that discussing their experience of the services provided to them may cause them some harm/distress. It was, therefore, made clear at the start of the interview and in any prior communication that they did not have to participate if they do not wish to and they may withdraw at any time prior to or during the interview and did not have to proceed at the interview if they did not feel comfortable. The researcher also ensured the contact information of the support agencies they dealt with and others in the area were available to victims of crime should they wish to contact them for further support.

In an attempt to reduce the risk of harm, victims of crime were not be asked about the offence, nor were they asked to relive exactly what happened to them, but they were asked about their needs at different stages after the offence had taken place, as well as about the process of accessing services and what/how they felt about being seen as a victim of crime. Despite this many of the victim participants chose to share some of what had happened to them.

In order to ensure the personal safety of both the researcher and participants it was planned that interviews would take place in agency offices or designated spaces and not within the participants' homes. As a result of the Covid-19 pandemic interviews were offered via video call or telephone, ensuring both researcher and participant safety in their own homes/office. For those who had experienced domestic abuse the DA Agency advised that the perpetrator did not live with those individuals anymore and therefore there was no risk of them interrupting or being present during the interview.

4) Privacy and Data Protection

With the permission of participants, all recordings were transcribed, with identifiers removed from the transcripts. Hard copies of the interview transcript were stored in a locked filing cabinet in secure premises, alongside signed consent forms. All electronic data/information was stored on an encrypted hard drive with recordings to be deleted as soon as possible following completion of the research.

Participants within this research are not identifiable, the areas chosen and the agencies involved have been anonymised and given pseudonyms (e.g. DA Agency) to be clear about the type of agency they were. There will be some areas that will be identifiable, if an individual accessed an RJ service then it will be clear that they accessed such a service, however the location and specific agency which delivered this support will not be identifiable. Any participants who expressed an interest in the findings of the research were advised that a copy could be shared with them, when finished, if they wished.

Method of Analysis

As this is a qualitative piece of research, consideration was given to the most appropriate methods of analysis. The five common methods of qualitative analysis are thematic analysis, content analysis, grounded theory, narrative analysis and discourse analysis (Dye 2023). Whilst all options were considered, thematic analysis was considered to be the most effective method of analysis for the semi-structured interviews, whilst a content analysis was done of the key government policies and legislations. This is because, unlike grounded theory, this research was not looking to develop a theory or concept, rather it was aiming to better understand the experience of victims of crime through the coding, or theming, of the interview and focus group transcripts (Bryman 2016, Kiger and Varpio 2020, Saldaña 2021). Narrative analysis was dismissed as this research is not about understanding the victim experience through the telling of their lives through story analysis, although it is about understanding their experience over time (Saldaña 2021). Discourse analysis was also dismissed as this research was not looking for specific or implied socio-political meaning in what was shared by participants (Saldaña 2021). As stated above, the main method used in this research was semi-structured interviews – both individual and group. During analysis the transcripts for the group interviews were reviewed and there was no group which went badly off topic or where one individual dominated the conversation.

Macdonald (2008, drawing on Scott 1990), highlights the four key areas a researcher needs to give consideration to when undertaking an evaluation of documents: authenticity, credibility, representativeness and meaning. Authenticity draws from the risk that a document may have been tampered with, there may be multiple versions or it may not come from a credible source (Macdonald 2008). This has been addressed in this research by ensuring that policies, legislation and strategies etc. have been taken from the responsible government department's website. Credibility requires the researcher to question the purpose and context of the document and why it has been produced (Macdonald 2008). This has been part of the review of the policies and legislation in Chapter 3. Representativeness focuses on whether "the documents available constitute a representative sample of all the documents as they originally existed" (Macdonald 2008:294). As these documents were released alongside the research being undertaken it puts this research in the unique position of being able to evaluate as central government progressed with their plans, noting key elements and whether these progresses or changed, whilst making recommendations (see Chapter 3). Finally, establishing the meaning of a document at both the surface level (for example the Victims' Code which was being updated to be easier to read for victims) and at a deeper level (for example, the Victims' Code being updated to put responsibility for supported victims on specific groups/bodies) (see Chapter 3) (Macdonald 2008).

Whilst coding software such as NVivo was considered, it was ultimately not used as the researcher found they were better able to identify themes as they transcribed the interviews, and subsequently reviewed and considered the transcribed interviews. Ryan and Bernard (2003) discuss what it is a researcher is looking for when they are looking for themes in their analysis. These included the repetition of a topic being raised, the use of

"indigenous typologies or categories", that is, local terms that may be unfamiliar, the use of metaphors or analogies in how participants share their thoughts, the transition between topics which may be led by the interviewer or participants (in group interviews) and the similarities or differences in how participants discuss a topic (Ryan and Bernard 2003:89). One advantage of completing the analysis in this way was that it enabled the researcher to identify the point of saturation, that is, the point at which key points were coming up time and time again within the analysis, highlighting that it was possible to conclude that the key themes had now been achieved (Saunders at al. 2017). All interviews and focus group interviews within this research were analysed in full, because of the comparisons between areas, with it being noted that saturation seemed to have been achieved. The only area where saturation was not possible was in relation to generic victim support services, because there were no victim participants for these from either area, and no participants at all in Area B.

As Kiger and Varpio (2020) point out, thematic analysis is a flexible method of analysis, allowing themes to be identified from participant responses to answer the research questions. In this research themes were identified over the courses of the interview and analysis period, particularly through the use of repeated topics and how these were discussed by participants. For example, some victim participants spoke about being enrolled on courses to learn more about specific topics and healthy relationships, whilst others said they needed to be educated. These are talking about the same thing and were essentially grouped together and 'themed' under "Education" (see Results).

Summary

The Covid-19 pandemic impacted this research, resulting in changes to the planned methodology and delays in the fieldwork (see Chapter 7 for further consideration of the Covid-19 pandemic). This did, however, offer an opportunity to include the impact of the pandemic on victim support services early on in the research, as it happened.

Changing the methodology from in person interviews to online interviews was relatively simple to switch and actually highlighted an underutilised methodology which could be given more priority when conducting future research.

Undertaking cognitive interviewing prior to commencing the research was beneficial as it highlighted the value to be found in probing questions with the cognitive interviewing of the Strategic/Operative Lead Interview Schedule helping to make improvements to the other Interview Schedules.

There are a number of different ways to undertake the analysis of qualitative data. For this research the most appropriate method was through thematic analysis as it aims to understand experiences by grouping the data into themes to answer the research question.

Engaging with agencies to undertake research that will benefit victims of crime should be an easy task, with agencies (and the OPCC) eager to engage with independent

researchers to learn more about what they can do to improve the services they offer victims of crime; it should not be a challenge to find agencies willing to engage.

The most important thing to consider is the victim of crime, and agencies need to be reminded of this and keep the wellbeing of victims of crime at the forefront of everything they do, and not just say that they are.

It would be great to see this sort of research on a larger scale to better understand the nuances of victim support commissioning across England and Wales, particularly by engaging with the different groups involved. Research could even potentially be expanded to actually include police officers who work with victims of crime and their understanding of victim support services and victim needs.

Chapter 6

Results

As already discussed in the literature review, approaches to the commissioning and running of services has varied throughout England and Wales according to Police and Crime Commissioner priorities (Hall 2018). In this research, Area A adopted an inhouse Victim Hub, located within the police, which they combined with the statutory witness service for which the police are responsible. Across England and Wales Witness Care Units have been established to "provide information and support to victims and witnesses in cases progressing through the criminal justice system" (College of Policing 2013). In Area A they made the decision to combine these as it "should create a better service because you can get everything in one place" (APCC). Whilst providing generic support to victims of crime, the hub also contained the restorative justice service. Further in house services included specialist support for victims of trafficking. In addition, the hub was set up to aid in partnership working, allowing the physical presence of a number of other commissioned services including mental health support. Externally commissioned services included support for victims of sexual offences and support for older victims of burglary.

Area B adopted an inhouse restorative justice hub, located within the OPCC, whilst commissioning an external agency to provide a Victim Hub as they "felt that that was the most appropriate at the time, based on victims need and what we, what value they [victims] get out of it" (BPCC). Additional money went towards a hate crime helpline and commissioning support for victims of sexual offences and the provision of IDVAs across the area as they "recognise the specialism or recognise the specialist need" (BPCC).

This results section will start with a breakdown of all the participants within this research – victims of crime, volunteers, staff and OPCCs – across both Area A and Area B. It will then focus on the victim participant responses, further breaking down the victim participants' views before explaining the referral pathways they took to victim support services, and the feedback victim participants provided about the agencies they engaged with. It will then explore victim participant views on what victims of crime actually need, what they perceive to be characteristics of a victim and their preferred terminology – whether that be victim, survivor or something else.

The results will then turn to the feedback from agency and OPCC participants, starting with a breakdown of those participants. The results will go through each agency in each area and how their services work, from referral to support, as well as considering the impact of the Covid-19 pandemic on the operation of these services. It will then proceed through the commissioning experience/process of each area and the feedback from staff and volunteers about what it is like to be commissioned by a PCC. Finally, it will explore the staff, volunteer and OPCC views of the victim, including their preferred terminology,

victim characteristics and the labelling of the victim. Victim participant and agency participant views will be considered further in the discussion.

Participant Breakdown

This research consisted of interviews with a total of 48 participants across both areas. Area A had a total of 19 participants with one representing the Office of the Police and Crime Commissioner (5%), whilst seven of the participants had been victims of crime who had utilised a victim service (37%), three were volunteers supporting victims of crime using their service (16%), and eight were paid staff (42%). This is shown in Table 1 below.

Table 1 – Area A Participants

Type of Participant	Number of Participants
Paid Staff	8
Victim of crime	7
Volunteer	3
Staff from OPCC	1
TOTAL NUMBER OF PARTICIPANTS	**19**

Area B had a total of 29 participants. These participants consisted of one representing the Office of the Police and Crime Commissioner (4%), seven who had been victims of crime who had utilised victim services within Area B (24%), five who had volunteered for one of the agencies supporting victims of crime (17%), and 16 who were paid members of staff within those victim support agencies (55%). This is shown in Table 2 below.

Table 2 – Area B Participants

Type of Participant	Number of Participants
Paid Staff	16
Victim of crime	7
Volunteer	5
Staff from OPCC	1
TOTAL NUMBER OF PARTICIPANTS	**29**

The self-identified gender of participants was collected as part of this research. Table 3 below shows the self-identified gender of all participants across Areas A and B. 38 (79%) identified as female, whilst the remaining 10 (21%) identified as male.

Table 3 – Gender of All Participants

Gender	Number of Participants
Female	38
Male	10

Breaking this down further, Table 4 below shows the gender breakdown of participants across Areas A and B and the type of participant. In Area A, six (32%) participants were male, with three (16%) having been victims of crime, whilst the remaining three (16%) were paid staff. The remaining 13 (68%) were female, split across victim of crime (n=4, 21%), paid staff (n=5, 26%,), volunteer (n=3, 16%) and staff from OPCC (n=1, 5%). This is not representative of the local area where in Area A 51% of the population are female, whilst 49% of the population are male (ONS 2022a). In Area B four (14%) participants were male, with all four males being volunteers in Area B. The remaining 25 (86%) were female with seven (24%) having been victims of crime, 16 (55%) having been paid staff, one (3.5%) volunteer and one (3.5%) from the OPCC. This is not representative of the local area where in Area B 51% of the population are female, whilst 49% of the population are male (ONS 2022a).

Table 4 – Gender and Area Breakdown of All Participants

	Area A		Area B	
Type of Participant	Female	Male	Female	Male
Victim of crime	4	3	7	0
Paid Staff	5	3	16	0
Volunteer	3	0	1	4
Staff from OPCC	1	0	1	0
TOTAL NUMBER OF PARTICIPANTS	13	6	25	4

The self-identified ethnicity of participants was collected as part of the research, to see whether the sample was representative of the residents within that area, as well as to get a breakdown of the ethnicities of the individuals utilising victim support services. Table 5 below shows the self-identified ethnicities of all participants across Areas A and B. 42 (87.5%) participants identified as White British/English/Irish whilst the remaining six (12.5%) identified as White European (n=2, 4.1%), British Caribbean (n=1, 2.1%), Greek Cypriot (n=1, 2.1%), White Australian (n=1, 2.1%) and White Romanian (n=1, 2.1%). This is representative of both areas with the 2021 census showing Area A as having a population where 85.4% identified as white, and Area B where 88.8% of the population identified as white (ONS 2022b).

Table 5 – Ethnicity of All Participants

Ethnicity	Number of Participants
White British/English/Irish	42
White European	2
British Caribbean	1
Greek Cypriot	1
White Australian	1
White Romanian	1

Participants were specifically asked which ethnicity they identified with, allowing them the autonomy to choose for themselves, as opposed to providing them with a list of pre-determined ethnicities to choose from.

Victim Participants

This section is going to focus on the results from interviews with Victim Participants. It may at times be necessary to draw on quotes from other participants, for example if they are explaining the service and support they provide. A total of 14 victims of crime participated in this research, seven from Area A and seven from Area B. In Area A victim participants were recruited from those using the Restorative Justice Service and Home Protection Agency. In Area B victim participants were recruited from those using the Restorative Justice Service and the Domestic Abuse Agency. Table 6 below demonstrates which agencies in each area were able to provide access to victim participants.

Table 6 – Agency Breakdown

Area A	Area B
Restorative Justice Service	Restorative Justice Service
Home Protection Agency	Domestic Abuse Agency

As it was not possible to recruit the same agencies in each area i.e. domestic abuse and domestic abuse, sexual abuse and sexual abuse, it was not possible to compare each agency in one area to their counterpart in the other. Whilst not an explicit aim of this research, it would have been interesting to undertake some direct comparison between the two areas given the different approaches that were taken in each area. As the restorative justice agencies in each area did engage there is some comparison between them, as well as between both areas, later in this chapter.

Turning to the victim participants who did participate in this research, three (21%) of the victims were male, whilst 11 (79%) were female. As explained above, this is not representative of the general population for either Area A or Area B where the population is split 51% female and 49% male (ONS 2022a). As Table 7 below shows, victims ranged in age from 23 to 82 years, with the majority (n=4) being aged between 20 and 29. As one of the agencies participating in the research was aimed exclusively at those aged over 60 years it is unsurprising to see almost half of the participants fall within this range, although the 2021 census data shows that the largest age group in the two areas is 50 to 54 years (ONS 2022a).

Table 7 – Age Range of Victim Participants

Age Range	Total Participants
20-29	4
30-39	1
40-49	1
50-59	2
60-69	2
70-79	3

80+	1

Looking specifically at the victim participants, Table 8 below shows the identified ethnicity of victim participants as nine (64%) of the victim participants identified as white British, whilst two (14%) identified as white English, one (7%) identified as white Australian, one (7%) as British Caribbean and one (7%) as white Romanian. This is representative of both areas A and B (ONS 2022b).

Table 8 – Ethnicity of Victim Participants

Ethnicity	**Number of Participants**
White British	9
White English	2
White Australian	1
British Caribbean	1
White Romanian	1

Time To Interview

Participants were asked how long ago the incident happened, what their needs were at that time, and any subsequent changes in need as time progressed (need is discussed later in this chapter). As part of this line of questioning, it was interesting to note the passage of time since the incident occurred to the time the interview was taking place, with this varying significantly between the participating agencies.

For the burglary victims who utilised the Home Protection Team in Area A, all their interviews took place within four months of the incident happening/receiving support from the Home Protection Team. For the victim participants from Area A who engaged in restorative justice, for ARJP6 the incident had taken place 18 months prior to the interview and the restorative justice intervention "some months' later". For ARJP7 the incident had taken place four years earlier. The restorative justice intervention was offered two years later and concluded within three months, 21 months before they were interviewed for this research. In both cases, a significant amount of time had elapsed between the individual being a victim of crime and being asked to participate in research relating to that crime. See Victim Needs for exploration of changing needs.

In Area B, for two of the participants who engaged in restorative justice the research interviews took place within six months of the incident. BRJP2 was the only one who was different, as the offence was an historic offence reported as an adult, and BRJP2 could not remember any of the dates. For the victims of domestic abuse in Area B who participated in this research, the timeframe from the date the abuse started/support was sought varied from seven months to 17 months, except for BDAP6 who could not recall when the abuse started, but did seek support three years before the interview took place.

Summary

A total of 48 participants engaged in this research across two areas. The gender of all participants (victims, volunteers, staff and OPCC) were not representative of the local population with 79% identifying as female and 21% identifying as male, but the populations for both areas were much closer to a 50-50 split of both genders in each area (ONS 2022a). The ethnicity of participants was representative of the population.

For victim participants there was a larger number of participants from the higher age ranges, however this is unsurprising as the Home Protection Agency only supported those aged over 60 years.

Of the 14 victim participants who engaged in this research, two stand out due to the uniqueness of their situations in this research. The first stands out as they were a serving police officer who engaged in offender-initiated restorative justice following an assault whilst on duty (ARJP7). This allowed access to the unique insight of a police officer as a victim where they reflected on truly experiencing what it was like to be a victim as, like victims, they cannot simply access police systems to see what was happening as they would as a police officer going about their day-to-day work.

The second stands out because they did not live, nor had they ever lived, in the United Kingdom, but their family member who was killed was living in the United Kingdom at the time and they were offered restorative justice by the local restorative justice service in the area in which the family member had lived. This provided them with the opportunity to point out that the service and support offered to them in this country was way beyond that which they would expect for someone who does not even reside in their country and that "this peace that I feel it's also because of the people that helped me because if they wouldn't help me I would still be here maybe going through pain" and "I don't know if [their country] is existing something like this, maybe UK has like special things" (BRJP1). This is because under the EU Directive (2012) support for victims of crime is not dependent upon their residency in the country.

Referral Pathways

This section explores the referral pathways/referral experience of victims of crime in both Areas A and B, drawing on staff responses from their interviews to help explain the processes in place.

In Area A there was a total of seven victim participants. Two of these victim participants engaged in restorative justice, whilst the other five utilised the Home Protection Agency (see Table 9 below).

Table 9 –Victim Participant Agency Breakdown in Area A

Agency	Number of Victim Participants
Restorative Justice Service	2
Home Protection Agency	5

Restorative justice is a voluntary process, to which both parties must agree to participate. The two victims who engaged in restorative justice from Area A were contacted directly by the restorative justice service and offered restorative justice as the offender was exploring this option. It was therefore offender-initiated restorative justice. Neither victim participant had considered restorative justice to be an option for them until they were approached by the agency, with ARJP6 stating "I didn't seek support, support was offered to me" explaining that RJ "was not something I er, I thought I needed", before explaining "I didn't need anything really because I live here with my husband", intimating that being there with her husband was all the support that she needed.

ARJP6 was unclear around when the incident took place or when restorative justice was offered. ARJP6 also revealed that they were not offered an opportunity to be put in touch with any other support agencies which, from their age (over 60) and the nature of the offence (burglary), they should have been as they met the criteria for the Home Protection Agency, especially as they disclosed:

> We hadn't lost anything, we, we hadn't been hurt, we, we felt it was a sort of narrow escape really so erm other than feeling we needed to make the house as secure as possible we, we didn't feel we needed to talk to anybody else (ARJP6).

A referral on to the Home Protection Agency would have provided ARJP6 with support and advice for securing their home and could have helped with managing that need.

ARJP7, on the other hand, seemed surprised that the offer to participate in restorative justice was made to them. ARJP7 had never considered that restorative justice could be an option for them as they had been a serving police officer at the time the offence was committed and "the police have their own sort of wrap around" support available to them. ARJP7 went on to describe their experience as "unique I suppose because I'm not a member of the public that's accessed the service".

For the five victims who engaged with the Home Protection Agency, three of these received a visit from the Home Protection team within days of the incident happening, with all five reporting that the support from the Home Protection Agency came "within a couple of days" (AHPP1). AHPP5 shared that a referral was quickly made for them by the police:

> The police, I think it was those two young policemen or a policeman on the day said would I like to be referred to the Home Protection and I said yes and he came and that was the best thing that happened (AHPP5).

For AHPP4 there was a two-week delay before someone visited them in person, but they did speak to the service on the telephone and they were perfectly happy to wait as the staff member was on annual leave. For AHPP2, relatives had been stealing from them for some time (two years) which they reported to the police who, in their view, failed to adequately deal with the reported thefts as the police said there was nothing that they could do and no action to be taken. From the information provided, everything was reported to the police who felt unable to take any action, but the police did refer on to the Home Protection Agency and they visited "within a few days" (AHPP2). For two of the victims who engaged, the perpetrator was apprehended, however this did not appear to have had any impact on the participants as no one reported feeling safer/less safe knowing the offender was in prison/still out there.

Of the five victims who received support from the Home Protection Agency, three of these knew that they had been referred by the police. The remaining two participants/victims were contacted directly by the service. The Home Protection Agency was able to establish this contact as their staff had access to the Athena system, "an integrated, web-based information and communications technology solution designed to manage core policing business including crime recording, intelligence, investigation, custody and case preparation" (Kent PCC 2022). In their own interview, AHPOL1 explained that they "can create a report automatically at will basically which will give us a list of all the victims that have come via the police that qualify for our scheme". This will list "all the people that have had incidents over the last two or three days and that fit into our criteria" (AHPSL1). This access is key to supporting victims of crime quickly as the agency is able to identify those who may benefit from their support and make contact with them. This is crucial for victims who may not know what they need or what services are available to support them. It also raises the question of why all victim support services do not have the same access, although information sharing and data protection makes this difficult, why should some have access and others not? Who decides this and how? AHPOL1 shared that on occasion "we'll get a referral through via the [Athena] system and from an officer separately as well, or even a couple of officers so then you'll end up with three referrals for the same incident, but the good thing about the [Athena system] thing is that it picks them up automatically so you know you've captured that vulnerable age group that you're, obviously you're funded for". Taking this into consideration it is unclear whether these two referrals were as a result of a check of the police system or police referral.

In Area B there were a total of seven victims. Table 10 below shows the breakdown of Area B victim participants by agency. There were three victims who engaged in restorative justice, and four victims who had engaged with domestic abuse support services.

Table 10 – Victim Participant Agency Breakdown in Area B

Agency	Number of Victim Participants
Restorative Justice Service	3
Domestic Abuse Agency	4

The three victims from the Restorative Justice Service who participated from Area B were all referred in through different routes. The first was referred in by the police, whilst the second was referred by a sexual abuse support agency after the victim explained that they would "love to give him a piece of my mind" (BRJP2), with their support worker explaining:

> I don't know if it will be suitable for you, she said we won't know unless you try, unless you go deeper into it and see exactly what it's for and how it's done. She said it's a long process, it's not gona happen like overnight and I was like okay and she said right I'll email you with all the information she said and then I'll get in contact with the restorative justice and we'll see if we can set you up a meeting so we can discuss it all.

This is a great introduction to support, not making any promises, simply making the victim aware of the potential and suggestions for further exploration (Restorative Solutions 2024).

The third victim who received support from the restorative justice service agreed to the RJ intervention as it was offered as an alternative to going to court:

> I chose to go down that route as opposed to just taking it to court. They could have taken the whole thing to court and it would have been left for the Judge to decide, which, it normally is too much paperwork and it just gets like pushed aside or it could like, the chances of it happening again could have been that case so the police rung and was like how would you wana go down it – you can either go to court or you can go through a mediation system. And I was like I'd rather go through mediation because then I can talk to him about it, find out if it's us that's the problem or whether it's him that has the problem erm so that was, that was how that was (BRJP7).

Clarification was sought from the agency who referred this victim, as the victim always referred to mediation but what BRJP7 described sounded like it may have been a Community Resolution. A Community Resolution is "an out of court disposal" which is available to the police and is used "to deal with antisocial behaviour and low-level crime" (RJC 2014) because RJ should not be used as an alternative to the criminal justice process (RJC 2015). The Restorative Justice Service did, however, confirm that the intervention was restorative justice.

In Area B, anyone who is seeking support for domestic abuse goes through a central hub which is the "triage service if you like so a sort of, a call centre that is a central point of contact for self-referrals and professional referrals other than the police" (BDASL3). After taking the initial information and grading the call they then refer the individual on to their local domestic abuse agency. In Area B, three of the four victims who received support from the Domestic Abuse Agency, were self-referrals with BDAP4 confirming "[Hub] said they would pass on my details to [domestic abuse agency] and [domestic abuse agency] will contact me and yeah so I got a call". For BDAP3 this was similar, except they were put directly in touch with a domestic abuse agency covering a different

area before being referred to the hub for assessment and allocation to the correct agency. The three victims sought support following recommendations from family or friends and research online with BDAP4 stating:

> I just found their number on the internet ... I saved their page because I read some articles from there and they were obviously of interest to me because of my life experience at the time.

BDAP6 believed their referrer "might have been a social worker". All of the participants who engaged with the domestic abuse service reported that they had experienced abuse for some time before seeking support. This indicates that they may have been aware that they needed support. BDAP5 shared that, after making initial contact with the Domestic Abuse Agency, threats to take their child away from them led to them staying and not pursuing support "so then I left it for a year and I put up with a lot of abuse throughout the whole year" before they got in touch again and sought support. This mirrors previous research which has demonstrated that high risk individuals will often experience domestic abuse for at least 2.3 years before they seek help (SafeLives 2015a).

Only one individual reported frustrations with the referral process from the hub to the Domestic Abuse Agency stating:

> I mean it was probably within a week so it probably wasn't too bad but ... when you've, when you're at a certain point and you need that support, I think really it could be a bit more proactive but I understand the constraints ... but, just something, even if it's just a quick call to say you know I've got your details, we're going to be setting up a meeting and I will give you a call, just something, just so you know that that, those details are passed on and not got lost in process (BDAP4).

Here BDAP4 highlighted the importance of making contact quickly with individuals seeking support to ensure that they know that they have their case in hand.

Of the four individuals who sought support from the Domestic Abuse Agency, three had experienced this abuse from people they had been in an intimate relationship and had children with. One participant was abused by a parent.

Summary

Across the victim participants there were a number of different ways to be referred into the victim support agencies (discussed further in *How the Services Work*), but it seems whilst the origin of the referrals varied from agency to agency, they were predominantly the same methods for the individuals within the agency with four out of five of the domestic abuse victims making self-referrals, the Restorative Justice Service in Area A approaching victims through offender-initiated RJ, and the Home Protection Agency victims being referred by the police or sourced through data searches. With such a small sample it is not possible to generalise these findings, but this is something which

warrants further exploration, particularly with domestic abuse victims who are likely in touch with a multitude of agencies, particularly the police, as some of these victims were.

Having access to the police system, Athena, would be beneficial to all victim support agencies as victims are often unsure and unaware of what support is available to them or what they may need. Utilising the Athena system allowed the Home Protection Agency to identify those they, and by extension the PCC, considered the most vulnerable victims. This is given further consideration in the discussion.

Victim Feedback on Support Agencies

This section explores victim feedback on the victim support agencies they engaged with including those participating in this research, and some which were not. Victim participants spoke about their experiences from a range of victim support services. This feedback has been included within this analysis as it adds to the very limited knowledge of victim experiences under Police and Crime Commissioner commissioning. This section will explore both the quantitative and qualitative responses from victims of crime on the support they received from victim support agencies.

As the aim of this research was to explore the victim experience of victim services commissioned by Police and Crime Commissioners, understanding victim perceptions of quality was important. Victim participants were asked to quantify the support they received from the victim support agencies. Victim participants were asked to score the agencies they received support from on a scale from 1 being very poor to 5 being very good. Table 11 below shows the scores for the victim support agencies used in Area A where six of the seven victims gave the agencies a five for the support they received, with just one victim participant scoring the agencies as "2 or 3" (ARJP6).

Table 11 – Victim Participant Scores for Agencies in Area A

Score	Number of Responses
5	6
2 or 3	1

The support from the Home Protection Agency was all given in one visit, at an agreed time, after a break in had occurred. AHPSL1 explained that the visits from their support officers could vary from 30 minutes to one and a half hours. As part of these visits the support officer would take a look at the property and where the break in occurred. They offered not only the opportunity to talk through what happened and reassurance but also offered and provided practical advice and equipment to help the victim. AHPP5 shared "I think that's a very important part of the [Home Protection agency] because it helps you to face the future with practical help". Despite the short length of time spent supporting them, all of the victim participants who received support from the Home Protection Agency scored them a 5, very good, for the support they did receive.

In explaining their reasoning for scoring the Home Protection Agency a 5, victim participants explained that the support workers were knowledgeable – not only of the products which would support them in securing their property, but also of the offence which had taken place – as well as providing reassurance to them and offering practical support and advice. Some participants commented on the individual support workers being "sympathetic" (AHPP4), "polite" (AHPP3) and making them feel "at ease" (AHPP5). The victim participants who used the Home Protection Agency shared that "His advice was absolutely invaluable" (AHPP5), "very positive" and "it was all done and dusted within 24 hours if you like and they'd left us name and contact if there was anything else we needed" (AHPP3) with the speed at which this support was offered and subsequently carried out appearing to be a positive factor. AHPP4 commented:

> I found them very useful, very helpful in terms of reassurance, sympathetic, and responsive in terms of conversation and also supplying say monitors for the doors etc.

Whilst AHPP3 said:

> The guy who came round seemed to know what he was talking about, he turned up very quickly, he was very polite, he was very aware of our circumstance... he went through every aspect of security around the house, suggestions where he could.

A number of the victims who were supported by the Home Protection Agency spoke of the additional things that were included and the "practical freebies" such as a simulated television "so that when you're out and you're not in the house it looks like there's a TV on, so it flickers" (AHPP4) and, AHPP5 explained how their support/visit "was *very* helpful" and "he told me what to do, what to get, but before he went away I'd actually got sensors on all my windows and that was actually free. He told me what doorbell to get, he gave me a lot of very good, and very practical advice as well".

In sharing how helpful the service was to them, victim participants shared that there being no cost to them, as well as the practical help, were the key benefits of the service. AHPP5 added that when they realised a window had been missed following the visit and did not have a sensor, they called the agency to ask if they could send one via post, planning to have a relative attach it and "in fact he turned up with another" showing they were going above and beyond expectations for those using their service.

With plenty of positive feedback for the Home Protection Agency, the only recommendation made by a victim participant was that perhaps a follow up telephone call a few months down the line would be a good idea but not for the benefit of the victim, but the benefit of the agency "just so that they've got their peace of mind, that they've done their bit as much as they can" (AHPP4).

The final score of 5 was afforded to the Restorative Justice Service. As explained earlier, restorative justice can take some time as it "will continue until participants are fully prepared for the restorative justice conference" (Why Me? 2022) meaning they can vary

significantly in length and are not one visit like the Home Protection Agency. Neither of the victims who engaged in restorative justice in Area A sought out the intervention, rather they were approached by the Restorative Justice Service following a request by the perpetrator.

ARJP7 spoke positively about the Restorative Justice Service, explaining that the facilitators knew what they were doing and were "really on it to be fair" and were "the right kind of people to be doing that kind of work". ARJP7 explained how the Restorative Justice Service helped them to explore their reasons for engaging and they felt the Restorative Justice Service were making sure "it is the right fit". ARJP7, as a then serving police officer, explained how they did not feel that the offence had really impacted their life, it was not something they had forgotten about but "it didn't rule my life". Instead, they felt that they ought to do something to support the perpetrators' journey, meeting them somewhere planned rather than the awkwardness of running into them in the street, and helping them to move away from criminal activity:

> From a policing point of view and, and my beliefs on rehabilitation and the way that we deal with stuff, I think if someone's reaching out I, I think you're almost obliged to sorta try and help them on their journey because at the end if it helps them, or prevents them from engaging in criminal activity or you know behaviour that's not acceptable to society then you know you should explore it at least (ARJP7).

Much like the victims who utilised the Home Protection Agency, ARJP7 felt "it was a really positive experience", whilst expressing their opinion that restorative justice is not used enough and that "the whole service needs to be promoted more ... I think it's so underutilised".

Whilst ARJP6 expressed similar views to ARJP7 about the impact of the offence and their reasoning behind engaging in restorative justice, positing that they had not needed anything because they had support at home already, ARJP6 did score the Restorative Justice Service a 2 or 3. Whilst they had nothing but nice things to say about the facilitator they engaged with, describing them as being a "lovely and very, very diplomatic, very tactful, very nice lady" whom they had enjoyed talking to, ARJP6 described themselves as feeling "very ambivalent about it because in some ways I kind of wanted to be left alone". However, like ARJP7, they described feeling a "social conscience that I really ought to try and do something". This is understandable, that they perhaps wanted to help if they could, however ARJP6 did explain that they felt this was "quite a scary option", highlighting some fear in being involved with the offender who had broken into their home. ARJP6 also explained that they "wanted to go along with it to a certain extent" and when pressed further actually explained that the reason they wanted to go along to a certain extent was because they did in fact have some needs themselves as they wanted to understand "why us, why, what was going on behind it". This shows that despite earlier saying that they did not need anything following the offence taking place, as they had their husband, they did in fact need information and for these questions to be answered and may explain why they gave the Restorative Justice Service a lower score – because their needs, which they claimed not to have, were not met.

ARJP6 did share that in making the decision as to whether or not to engage with restorative justice and the perpetrator they did their own research, downloading documents such as "Have you been a victim of a crime?" as well as gaining access to stories of other people's experiences of participating in restorative justice online, describing them as "very moving" and "very cathartic for both sides". ARJP6 did confess to finding it "all very, very confusing, there was too much to read, I wasn't sure quite what my role was to be in it". This appears to be because they were not looking at engaging in restorative justice as the victim of a crime, the harmed, but rather from a different perspective of looking to see whether "there was anything I could do to help things" (ARJP6), as there needs to be an identifiable individual who caused and accepts responsibility for the harm (RJC 2015a) and an individual who has been harmed, who is willing to participate (RJC 2016c). This could explain the lower scoring of the Restorative Justice Service. This perspective was also likely not helped by the cynicism of friends and family who ARJP6 spoke to about participating in restorative justice, whose views were in complete opposition to that of the restorative justice facilitator looking to help support a restorative justice intervention. Despite this, ARJP6 did say that if something happened again in the future and they were badly affected, they would do it again.

From ARJP6's description this appears to have been quite a confusing experience for them, with a lot of information available, as well as conflicting views from friends and family in comparison to the trained facilitators. Though it is a comment from just one participant, this is perhaps an area for the Restorative Justice Service to consider further in the future when looking to support restorative justice conferences and ensuring that individuals are fully aware of their role, the benefits, but also the fact that others may disagree with the intervention and addressing this concern before proceeding.

Turning to Area B, a number of victim participants had had support from more than one agency. Whilst those individual agencies were outside the scope of this research, victim feedback was still sought in relation to those agencies, as well as asking victims to score the support they received. As can be seen from Table 12 below, the seven victim participants provided feedback on 11 experiences of victim support agencies in total. Although it is unclear why some individuals in Area B had support from more than one agency but in Area A they only received support from one agency, it could be suggested that this is due to the nature of the offence, as well as the support they were receiving as three of the four who received support from more than one agency had been victims of domestic abuse. The additional agencies scored were a refuge (where one victim participant was referred by the local domestic abuse agency who participated in this research), a national domestic abuse agency (two victim participants sought support from the national agency before turning to the local agency) and a sexual abuse support agency (which is not the agency which participated in this research, but is now an agency working in partnership with that agency).

Table 12 – Victim Participant Scores for Agencies in Area B

Score	Agency	Number of Responses
5	Local Domestic Abuse Agency	4
	National Domestic Abuse Agency	2
	Restorative Justice	2
	Sexual Abuse Support Agency	1
3.5	Refuge	1
	Restorative Justice	1

As Table 12 shows, the majority of the feedback from the victim support agencies in Area B was high, with eight victim participants scoring the support they received a 5. Two of these agencies did not meet the scope of this research (National Domestic Abuse Agency and Sexual Abuse Support Agency) as they were not participating agencies, but feedback for these agencies included describing their support as "top notch" and "helped me with everything" (BPRJ2), "fantastic", "helpful" and "incitive" (BDAP4) with BDAP4 going on to explain that the support worker they spoke to "resonated with my experience" and "they gave incredible strength" following their call. BDAP4, in sharing that they sought support from the National Domestic Abuse Agency, explained "I only really called them if I was in quite a bad place mentally, you know, and desperate for somebody to help me" and explained "I started the call absolutely broken and I came off feeling ready to, to carry on so that's invaluable" demonstrating how important these services are to victims and the impact they can have, even if their interaction is only through a telephone call.

In describing their restorative justice experiences, which they scored a 5, BRJP2 explained how the facilitators were "so on the ball and so understanding and caring". BRJP2 explained that they found their support, together with the other specialist victim support agency supporting them, as mentioned above, "amazing ... it was a protective circle that wanted to help me move forward ... So they was protecting me but helping me move forward with life which was really good". BRJP2 even expressed an interest in working in this field as a result of their experience.

Similarly, BRJP1 gave a high score for the restorative justice service and was pleased to have the opportunity to share what the experience had been like for their family and what it meant to them, sharing that they felt a warmth from the facilitator and that hearing back from the perpetrator and receiving an apology from them:

> Was like really something, a positive thing, because you see at the end that the person that make this reacts to the letter that I wrote him and also he said he's really sorry and he wants to make something. It's not like he only stay in jail now, he hates everybody and he don't want to change let's say like this.

As shown in Table 12 above, the four victim participants who utilised the Domestic Abuse Agency all scored the Domestic Abuse agency as a five. BDAP3 shared that the Domestic Abuse Agency was a supportive agency which was there for them when they were unsure

and in need of support and that they "helped give me courage". BDAP3 did not think they would be where they were at the time of interview if not for their support worker, who still "checks in" on them.

BDAP6 found the information their support worker was able to provide to be incredibly helpful, whether that was information about mediation, help with housing or details of a refuge. BDAP6 shared that, were it not for the support of their support worker "I don't think I would have left the relationship properly", something they had shared previously with social services and asked for help with, "I admitted that, unless I've got somebody basically reminding me why I'm not with him I will get back with him and social services basically just closed my case and gave up on me. But whereas [named support worker], she was constantly there". This is positive from a domestic abuse perspective, but perhaps rather problematic as a reaction from social services when someone is reaching out and asking for help but end up feeling abandoned by the agency they turned to when they just close their case.

In addition, despite scoring the National Domestic Abuse Agency as a 5, BDAP4 commented:

> [The local domestic abuse agency] was better [than the national domestic abuse agency] because it's almost, you're assigned somebody, so it's not just somebody picking up the phone and helping you, you know, you're actually assigned a person who becomes if you like your buddy and that's, that's extremely helpful because what you don't want when you are in, you know you're panicking or you're anxious or you know your mindset is not in the right place, what you don't want is to be passed from pillar to post. You want to speak to somebody ...

BDAP5 also attempted to seek support from the national domestic abuse agency, and had to call three times before anyone came back to them, explaining:

> When I spoke to them they just gave me advice whereas [domestic abuse agency] was very much, they were there for you and they gave you the personal approach, listened to your story, helped you through things, gave you advice, whereas the others were kind of just like, gave you what you needed to know, it wasn't a personal approach.

As Table 12 (above) shows, feedback for two agencies scored 3.5. The first of the 3.5s was for a refuge one of the victim participants stayed in. Although outside the scope of this research, the participant was asked about their experience there and with their stay there coinciding with the Covid-19 pandemic and lockdowns, BDAP6 explained that, despite family members living close to the refuge they were placed in they felt alone and isolated:

> I was unable to see them so that made me feel even more isolated and nobody was able to obviously show me around the area and make me feel more comfortable, so my anxiety was just crazy.

BDAP6 explained that as a result of this isolation they decided to leave the refuge and return to their property, despite knowing that the perpetrator would find them there. BDAP6 went on to share that they wished the refuge had done more to get them to stay:

> Purely because I wish, I wish someone had sat down with me and, you know, not tried to talk me out of my decision but tried to make sure that I was doing the right thing. But ... but they didn't really, they didn't really seem to be that bothered.

This lack of support led to BDAP6 scoring the refuge as 3.5. This is a disappointing impression for BDAP6 to have taken away of an agency there specifically to help support and guide people who are victims of domestic abuse. In addition, when seeking further support after leaving, BDAP6's support worker simply said "I'm really sorry I can't help you because you're not with us anymore". This led to BDAP6 seeking support from the local domestic abuse agency and highlights concerns in the way agencies are restricted to not offering support outside the specific guidelines/boundaries they work in, and are funded to work in. As the refuge is outside the scope of this research it is not possible to corroborate whether this is the case for the service that was being provided by them and it is hoped that if an individual chooses to leave a refuge and return home, that the refuge would refer the individual to other agencies who may be able to help where they live, but BDAP6 perhaps forgot when asked about it as part of this research. It is also not possible to corroborate whether onwards referrals were made in this case as it would identify the individual as a participant in this research which the refuge was not part of.

The second 3.5 was in relation to BRJP7's experience of the Restorative Justice Service in Area B. BRJP7 was the victim of harassment by their neighbour who caused damage to vehicles, leading to the victim agreeing to restorative justice rather than going to court. They explained that they found the process to be "quite helpful because it wasn't me just doing the talking, like it was a case of a step-by-step process of yep I want to do it, yep he wants to do it". BRJP7 explained how they spoke to the facilitator "and we just discussed what we wanted to talk about prior to the actual meeting. So I was kind of like in the know of what was gonna happen and what we spoke about, what was gonna be dealt with".

Throughout the interview BRJP7 referred to restorative justice as mediation, and it was clarified with the service that the intervention was in fact restorative justice. The lower score here has stemmed from the fact "it helped in some situations but it didn't help in others" (BRJP7). This is because "it helped us to find the reason why it had been happening ... and why he was doing it. It was nice to find out that it was nothing that I was personally doing or that my family were personally doing" but at the end it was agreed that the perpetrator would repay them for the damage caused but, despite selling his car, he had not paid any money and there had been no follow up of this "so I feel like left in the dark" and there was a lot of uncertainty as to what they could do now or if they were "allowed" to follow this up further (BRJP7). This is an example of Bottoms and Roberts' (2010) assertion that there are three categories of victim need: Service Needs, Expressive Needs and Participatory or Decision-making Needs. Here their expressive and participatory needs have been accounted for through the engagement of restorative justice, but BRJP7 has been failed by the Service Needs – compensation, proper

treatment at court – because they were unclear on what could happen if the perpetrator failed to adhere to their agreement to make restitution, which was the case here.

This is disappointing as, as AHPP4 shared, follow up/check in by agencies following intervention would be helpful as there is clearly more needed here to support BRJP7 whose only follow up was the call when they were approached about participating in this research, two months after the restorative justice conference had taken place. It would, however, be the norm for the facilitators to have checked in with BRJP7 in the days following the conference, but this did not happen (Why Me? 2022), and again, to ensure anonymity, it was not possible to follow this up.

Reflecting on the views of those who utilised the local domestic abuse agency, their approach and personal touch clearly worked for them and was valued by those in need of support. Whilst the national domestic abuse agency still scored a 5, would it be more effective to better target funding towards local domestic abuse services, with the national service acting as a safety net i.e. telephone helpline to manage calls and then redirect to the local services for more targeted support; or if there is already a central point for referral, focusing funding on 24 hour support on a localised basis, and closing the national service.

Summary

Feedback from victim participants across both Areas A and B was overwhelmingly positive, with a small number (17%) reporting lower scoring due to their experiences.

ARJP6's experience of restorative justice highlights not only the importance of victim's being able to honestly and openly identify their own needs, but also the abilities of victim support agencies to identify hidden needs, whether these are actively hidden and not identified by the victim, or subconsciously with the victim unaware that they do have needs. This will be given more consideration in the upcoming sections on victim needs and in the discussion.

It is important to note that due to the methods used to access victim participants it was anticipated that the agencies would put forward victims who had had positive experiences, potentially influencing the results, leading to skewed responses in favour of the agencies. It is, however, positive to note that victim participants were happy to share both the positive and negative experiences of all those they came into contact with, with an independent researcher.

Victim Needs

The aim of victim support services is to provide support to victims of crime, but in order to know what services to commission to provide support, it is important to know what victims actually need. As part of this research, victims of crime were asked what needs they had following an offence being committed against them. Research has shown

victims identify a wide variety of needs including practical, emotional, social and material needs, as well as information about their case, to be given a voice and participation in the criminal justice process (Goodey 2005, Rossner 2018 – see Chapter 2). For some victims of crime, support from victim services is not considered necessary as they believe they receive the support they need from their friends and family. For others these support services help to fill a gap. Victim participants in this research shared not only their needs, but also the support they received from agencies, friends and family.

Victim participants in this research were asked about their immediate needs at the time of the offence, and whether their needs had changed over time. As explained in Chapter 2, "in the aftermath of crime different victims have very different needs" (Goodey 2005:121). Victims may find themselves in need of additional security measures, experiencing guilt or shock as a result of the crime and further practical, emotional, social and material needs (Shapland and Hall 2007).

Of the 14 victim participants in this research, two shared that they did not have any needs following the offence taking place. The first had been the victim of theft by visiting relatives over a period of time. Whilst they were referred to the Home Protection Agency by the police, and accepted this support, it was not a service they felt they needed and they said what they actually needed was for "the police to do more" (AHPP2). AHPP2 was very clear in their feelings of disappointment towards the police, however this was outside the scope of the research and so was not probed further, but AHPP2 did feel the police had not done enough to pursue their reports of theft as no action was taken against the alleged perpetrators. The second victim participant who said they did not have any needs was ARJP6, who had been the victim of a burglary, and engaged in restorative justice and explained how "I didn't need anything really because I live here with my husband" (ARJP6) and they had the support they needed. As explained above, ARJP6 agreed to participate in restorative justice because they felt that they needed to try to do something to help the perpetrator, but that they also "wanted to be left alone" (ARJP6). ARJP6 shared that, whilst they "wanted to go along with it to a certain extent", they found it to be "quite a scary option" and, whilst not acknowledging it as a need themselves, they disclosed that they needed to understand "why us, why, what was going on behind it".

Figure 1 below shows the main words/phrases used by the victim participants when asked what needs they had immediately following the offence. These are not all verbatim from the participants but are grouped to a specific topic. For example, when BDAP5 talked about how they "didn't have a clue about gaslighting[4]" and their support worker helped to explain this to them and enrolled them on a course in healthy relationships, this is grouped under "Education".

Figure 1 was generated using Mentimeter, online software used to engage audiences in presentations (Mentimeter 2022). A code is generated by Mentimeter that a presenter would usually share with the audience who would visit the website, input the code and

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[4] Gaslighting is a form of emotional abuse, which involves psychologically manipulating someone to make them doubt their own sanity (Solace 2022).

then respond to the question. Although not used for that purpose here, Mentimeter presents audience responses clearly and distinctively. To do this a "question" was set up by the researcher which allowed for multiple response submissions by the researcher using a mobile phone where the researcher entered the generated code.   Having highlighted victim participant responses in the anonymised transcripts, these were then individually submitted as a response to create the word cloud below. The larger the word/phrase, the more frequently it was given as a response by victim participants.

Figure 1 – Victim Participant Needs

Breaking down these victim-identified needs, there is a general pattern in the needs of victim participants of each offence type. For this section the results will be explored based on offence type, as opposed to area and agency used.

Six of the participants were victims of burglary: five of these utilised the Home Protection Agency in Area A, whilst the sixth engaged in restorative justice, also in Area A. As explained above, the burglary victim who engaged in restorative justice and the one who used the Home Protection Agency reported having no needs. ARJP6's explanation that they wanted to know "why us" has been included as it was an identified need, albeit not one acknowledged by them.

AHPP1's needs were practical and psychological (Shapland and Hall 2007) as they looked "for some sort of reassurance and for help as to how I could protect myself in the future ... just to make me feel confident again being in the house". AHPP1 shared that the burglary had left them feeling "unsettled" and "vulnerable" but that the support they were offered was "very, very practical which is what I needed ... I felt actually it was the practical support I needed immediately".

AHPP3 explained how they needed help reassuring their family and making them feel less afraid and vulnerable in their home (Shapland and Hall 2007) and found that the support

they received from the Home Protection Agency "gave us confidence that things like that had been done properly". This is something that potentially could have been provided by a generic support agency, but the specialist support from an agency focused on improving the security of individual's homes likely helped reinforce that for them.

AHPP5 shared that in the first instance their needs were practical as they needed a police officer as well as "home security", explaining "I live on my own, I'm a widow, so I needed some sort of security to make sure that the window was secure".

The burglary victim participants from the Home Protection Agency were interviewed for this research between two months and two years after the incidents happened/started. Those who reported immediate needs did not report having any further needs down the line nor did they feel they would have any further needs, having felt that all their needs were addressed by the Home Protection Agency at the time they provided support. One reported calling the Home Protection Agency as there was a sensor missing from a window who promptly attended to fit it (AHPP5). This feedback is in line with previous literature around support for victims of burglary, with a Victim Support and Direct Line report (2005) finding that victims of crime were often looking for the practical support and advice needed around securing their property, as well as help and support in dealing with the police and, potentially, emotional support.

From the feedback from the victim participants who used the Home Protection Agency it seems all their needs (both emotional and practical) were addressed by the Home Protection Agency almost immediately following the break in and subsequent referral, with AHPP3 sharing that actually "it felt almost as if before we'd had time to digest what was going on, the support team had stepped in, what do you want, anything we can do to help you" which shows effectiveness in victim support from the police and the Home Protection Agency.

Four of the victim participants were victims of domestic abuse. They explained their needs when they were seeking support as requiring practical support in finding somewhere to live (BDAP3) and having someone to talk to who would understand (BDAP4, BDAP6). BDAP4 explained that when they made their initial contact it was late and they needed someone who understood and could help remove the guilt they were feeling:

> Just needed somebody to talk to, I needed somebody to understand how I was feeling which at that time was in a very dark place unfortunately … it was quite late at night so it was amazing that they were there offering a service that late at night because I was in a terrible place … I just needed, I just needed a human voice really, somebody who understand, or understood, which is [the domestic abuse agency] anyway, what I'd been through who understands my thought processes because of what I've been through and somebody that can just stop me feeling as if I'm going mad, really and also remove guilt and make me see rationally and logically I suppose.

In a similar vein BDAP6 shared that they needed:

Just basically somebody who I can like talk to when I'm, because I found like, I felt very much still trapped in the relationship even when I wasn't in the relationship. So I think I kinda just needed somebody to remind me that I was doing the right thing and sometimes, like it's really hard to like speak to my friends and my family because they don't really understand, like my side of it. They kinda see it as, you know, why didn't you just leave so it's, it like really helps to talk to somebody who can actually like understand.

BDAP4 and BDAP6 have highlighted here the importance of emotional support to victims of crime, particularly victims of domestic abuse, and the need to have someone to talk to who is understanding of their experience, whether that is their experience of what has happened to them or is happening to them, their decision-making processes or helping to alleviate the guilt they are feeling about their role in the situation (Shapland and Hall 2007). Whilst understanding from others is an important need for victims of domestic abuse, there is often a lack of understanding from others as to why the individual remains in the relationship, often blaming the victim for what is happening because they are staying with the perpetrator. However, as Women's Aid (2022) explain, there are several reasons victims stay with the perpetrator including the fear of leaving and the increased danger this could place them in, having been isolated from others and feeling shame about the abuse and low confidence as a result of constant put downs and mental abuse. This therefore makes the support provided to domestic abuse victims invaluable in helping to address their emotional and wellbeing needs, with the support provided by the Domestic Abuse Agency in this research including attending appointments with victims at other agencies to support them and acting as their advocate, perhaps to help others to better understand the situation, or to help them to communicate what they needed. BDASL3 explained, "we're not there to judge or tell them what they should do, we try and, you know, help them".

The domestic abuse victim participants highlighted a further need which many were unaware of until they had started to receive the support themselves from the Domestic Abuse Agency – a need for education.

BDAP5 explained that they had always been told that they would lose their child if they left. The perpetrator told BDAP5 that the perpetrator had rights and they would have to split custody of their child 50/50 so BDAP5 stayed due to their need to protect their child at all times and not lose them. The support they received from the Domestic Abuse Agency helped them to leave their abuser as "they helped me to see what rights I actually do have and made me see ... that he wouldn't be allowed him on his own, he would have to prove himself" (BDAP5). This need for education was identified through the support they received from the Domestic Abuse Agency – both as an immediate need and an ongoing need for support. Once they were receiving support, BDAP5 also realised that they needed to learn more about domestic abuse and the circle of abuse "because I didn't have a clue about gaslighting and I realised the whole relationship was to do with that and she [Independent Domestic Violence Advisor] told me about circle of abuse and my whole relationship was a circle of abuse". This learning allowed BDAP5 to help their family to better understand why they had stayed in this relationship and how the circle of abuse worked.

BDAP6 shared a similar discovery around their need for education as "some of the things that happened I didn't actually know were abuse. So it was a real eye opener when I spoke about certain things to realise that they actually were [abusive behaviours]".

The remaining participants were victims of different crimes, but all engaged in restorative justice. They described varying needs following the offence.

As a serving police officer at the time, ARJP7 would have known more about victim support services and restorative justice before becoming a victim themselves. ARJP7 explained how their 'initial needs' were "the direct treatment of any sort of injury or getting checked over at the hospital" and that they did not need anything more but that they were aware of the Victims' Hub and said "I'm sure if I needed to I would have been signposted to them". ARJP7 explained that they "didn't feel the need to" seek support but explained that they did need to know if the perpetrator was learning and changing because of what happened:

> My life hadn't changed much from it, I know that sounds really stupid as to why I would have wanted to use RJ, and I know RJ's victim focused but it, you know it, it in some ways it still is. You know it was victim-led because I wanted to, to see him, satisfy a few queries for myself and then make, make sure that you know, that it's benefiting him because it's not, I know it is victim-led but it is, it's not just about the victim it's about the defendant, the suspect or whatever learning the impact of their behaviour and hopefully changing it so, I didn't, I didn't need any other support. They were there if I needed them ... (ARJP7).

ARJP7 did explain that they needed to meet the offender face-to-face as opposed to via a letter because it would be in a controlled environment, rather than running into the offender day-to-day or whilst out on patrol:

> They discussed at that meeting I remember about whether I did want him just to write a letter and I thought no, I wanna, I wanna see him face-to-face ... I had no ill will against him. I wasn't scared of him ... My thing is that maybe my reaction to him if I come across him in public was, it, it's not in a controlled environment erm, I'm not saying that I'd lose my temper or anything but it's not in that, that first meeting would be best facilitated with people present, rather than some random event in the street (ARJP7).

Furthermore, ARJP7 needed "to understand why" this had happened as the perpetrator pleaded guilty and therefore did not go to trial but the victim participant had a "curiosity as to how he got to that point in his life and why he acted like he did". This is a common reason for individuals engaging in restorative justice – when an offender pleads guilty there is no trial and no explanation as to why what happened, happened. Restorative justice provides victims with the opportunity to find out more as they have the opportunity to engage directly with the individual who caused them harm.

For BRJP1 their initial need was for information, as they did not live in the country and did not know what had happened, what needed to be done, who to contact etc. This, together with writing to the perpetrator, helped them and their family to find peace as they could share the impact and forgive the offender, helping them to move past the suffering they were experiencing, which is something they did not think would have happened were it not for the support they received "this peace that I feel it's also because of the people that helped me because if this wouldn't help me I would still be here maybe going through pain" (BRJP1).

For BRJP2, whose offence occurred over 30 years ago, most of their needs had been covered by seeking support from a sexual abuse support agency who helped with a variety of things including anxiety and confidence. Since receiving the initial support, when they had felt they were in need of additional support BRJP2 would contact them as needed for any further guidance or just for someone to talk to and had continued to do this when they felt things became difficult over the years. BRJP2 first learnt about restorative justice when they told the support worker at the sexual abuse support agency that "I'd love to give him [perpetrator] a piece of my mind" (BRJP2). This led to the support worker explaining to BRJP2 about restorative justice, explaining that it may not be suitable but was something that could be explored further, if they wished. Much like the victim participants discussed above, BRJP7's needs following the offence were "finding out the reasons why 'cause I felt like once I found out it would help me with the paranoia and anxiety and just learning to deal with it 'cause when you're in the dark about these situations you don't know how it's gonna improve, if it's gonna improve and why".

So whilst Goodey (2005) was very clear in her research about different victims having different needs, there do appear to be similarities in the needs of not only victims of the same crimes, but also victims of different crimes, specifically in understanding why this has happened (for example the victims who utilised the Home Protection Agency and some of the victims who engaged in restorative justice). This shows that victims often have very similar needs and support agencies could be working together to help address those needs or an individual agency could provide all the necessary support for one crime type. Whilst the burglary victim participants who utilised the Home Protection Agency felt there was nothing more that could be done and were satisfied that everything had been done to secure their property, the specific reason for the break in was not always identified. Had the perpetrators been apprehended then this would have been an opportunity to explore restorative justice, for them to actually have contact with the perpetrator to find out the answer to that question if they wished.

Three burglary victim participants explained that they had a need to understand why their property had been broken into. For example, AHPP3 and their family needed to know "why us, why has he come here? And the, the concern then was have we not done something? We do a variety of things, we have lights that come and go, all the other bits and pieces to make the house look occupied, so why has he picked on us?".

AHPP1 explained:

You do feel why me um, why did they pick on me, there was a whole row of houses here. And, and there was a bit of kind of, you do feel has somebody been watching the house, you know, have I caused, created attention you know, why me.

In addition, ARJP6, whilst receiving support from another service, was also a victim of burglary and shared "we just wanted to know why us, why, what was going on behind it". ARJP7, a police officer subject to an assault whilst on duty, shared that their main reason for engaging in restorative justice was because they wanted to understand what had led to the perpetrator engaging in the behaviour he did because, as he pled guilty, there was no trial and no opportunity to hear that information explained in court and ARJP7 explained how he:

Wanted to know exactly, you know, how he got into the situation he was in, and what he's done since to try and stop himself from, from going down that path again. Not because I need to see him because my mental health was, I was struggling with the, the incident and I was scared of him, I didn't have any of that, it was curiosity as to how he got to that point in his life and why he acted like he did.

ARJP7 also commented that, as a police officer:

I wasn't that bothered by the incident, it happened, he was prosecuted, he went guilty so he, he didn't drag it out into any trial, he received his sentence and that was that and I'd always wondered what he was up to or whatever because ... he wasn't someone on our radar ... but I knew that he lived in my area so my concern was that one day that I might actually bump into this guy and just you don't know how that would sort of end up.

BRJP7 shared that they too were interested in "finding out the reasons why". BRJP7 said that they "felt like once I found out it would help me with the paranoia and the anxiety and just learning to deal with it". BRJP7 explained that "when you're in the dark about these situations you don't know how it's gonna improve, if it's gonna improve and why, like what are you doing".

This shows a commonality in the needs of victims to better understand what has led to their victimisation, questioning why they were the one chosen, what did they do to attract the perpetrator, and this is even seen in the case of a police officer having been the victim of the perpetrator.

Summary

Underpinning the victim needs discussed above is the emotional support individuals need following victimisation. Victims in this research did not come out and specifically say that they needed emotional support, but the points they raised – a need to understand and be understood, to have someone to talk to, reassurance that they are

doing the right thing, whether that was leaving an abusive relationship or securing their home – are all emotional support needs that appear to be being managed by the specialist agencies supporting them. This shows that those agencies are not only supporting practical needs, and those directly related to the offence, but also the emotional needs as well. Support for victims of crime in this research has focused on the specialist support services – the Home Protection Agency, Domestic Abuse Agency, Restorative Justice Agency – who all appear to be providing all the support that individuals need, meaning there is no need for other services to become involved (which for the majority there is not). Commissioning specialist support services to support victims of crime is great for those who have been the victim of those crimes which have specialist support available, but what of other offences where there is not specialist support available? The Home Protection Agency is only available for over 60s or victims of domestic abuse, so what about everyone else who finds themselves the victim of crime? Will they receive the same support by using a generic victim support service, or should these services extend their services to all victims to aid recovery for victims of crime? This will be given further consideration in the discussion.

Should all agencies provide all support including practical, emotional and education, as well as having access to specialised help as needed? So domestic abuse victims would go to one agency for everything, sexual abuse victims would go to one agency for everything, burglary victims would go to one agency for everything. This seems to be what is happening in these two areas anyway and will be given further consideration, alongside agency responses, in the discussion.

Victim Characteristics

As discussed in Chapter 2, different theorists have raised different issues in relation to victims adopting a victim identity. This research, to better understand whether there were any key characteristics shared by victims of crime, asked participants "Thinking about the word victim, what would you say are the characteristics of someone who has been victimised?".

Unsurprisingly, given they were participating in this research as a victim of crime, the majority of victim participants answered this question based on their own experiences and the characteristics they felt they experienced/displayed as a result of their own victimisation. BRJP2, who was the victim of historic sexual abuse by a family member, for example, talked about how they were a victim and their characteristics, as well as their sister who was also a victim who displayed entirely different behaviours and characteristics to them.

The word cloud at Figure 2 (below) demonstrates the variety of characteristics identified by victim participants in this research when identifying a victim of crime, with the size of the word indicating how many participants used that word. These characteristics are qualities typically associated with victims as identified by victims of crime themselves, using their own experience.

Figure 2 – Victim Participant Identified Victim Characteristics

made to feel like nothing

manipulated
used
quiet
lose self

attention seeking
invasion if privacy

violation
intrusion
more aware

don't want to talk

weak
mental rape
picked on

closed
targeted
anxious
self blame
introvert

strong
angry
invasion of mind
tired

vulnerable
naiive
stressed
there are none
annoyed

overly apologising
emotional

invasion of privacy
living in fear

obsessive behaviours

invasion of confidence

As Figure 2 shows, there were 25 unique responses from participants. The most common response was "Anxious/Anxiety" with three victim participants identifying this characteristic, whilst "Heightened awareness/more aware", "Invasion of Mind", "Invasion of Privacy", "Picked on", "Self-blame", "Targeted" and "There are none" had two responses each. The lack of any real consensus in responses from victim participants to describing victim characteristics really highlights that victims are not all the same as, when answering the question, they were all drawing on their own personal experiences as victims and considering their own characteristics and behaviours as a result of the victimisation. This is supported by Victim Support and Direct Line's report on burglary victims (2005) which found "a high proportion of victims experience a range of emotional responses to the incident including anger, shock, worry and fear".

BDAP4 explained that prior to becoming a victim themselves they would have expected a victim to display characteristics of anxiety, as well as being an introvert. They went on to state that in their case no one would know that they were a victim as they did not display any character traits and simply carried on as they had before, leading to them concluding that there are no characteristics of victims of crime. This was also the view of BDAP6 who explained "somebody could look so happy and stuff on the outside and you, you just wouldn't have a clue what's going on in their life".

AHPP2, who had items stolen from them over time by a family member, explained how "people react differently, it depends on ... how strong you are in a way, how vulnerable you are". This accurately describes the responses and characteristics provided by victim participants here, as AHPP5 talked about how their life had completely changed as a result of the break in at their property with increased security measures and described

themselves as "naïve" in thinking this would never happen to them. AHPP3, who was also a victim of burglary, explained how they had changed a number of things at home, including installing alarms and cameras as they had become "more aware" as a result of the break in. AHPP3 also described how their behaviours had changed, highlighting "obsessive behaviours" adopted such as checking "that the doors are locked and the windows are all closed properly". These are the consequential effects of victimisation, making changes as a direct result of what happened to them (Shapland and Hall 2007).

Research shows that the stereotype of victimisation and what may be necessary in order to be acknowledged as a victim an individual must be weak and incapable of making decisions for themselves (Christie 1986, Fohring 2018a, Goodey 2005, Weisstub 1986), but most of the victims in this research did not see victims as weak (although one did). Rather they talked about the offence committed against them and even highlighted positive characteristics e.g. increased awareness and being strong. BDAP3 talked about the characteristics they used to think of and see in victims of crime, that they were "weak, used, manipulated", but when it came to their own experience they saw their time as a victim as being strong as "victims can't be weak, they have to be strong".

The characteristics identified by victim participants in Figure 2 are predominantly negative, with an acknowledgement of being weak (n=1) and self-blame (n=2), characteristics identified by Christie's (1986) ideal victim (blamelessness).

Summary

With 25 unique responses from victim participants they are showing that really there are no common characteristics which may be attributed to victims of crime. If there were more common characteristics this would perhaps make it easier to have a more generic support service to help with these, but as it is, a bespoke support service/plan might be seen as the ideal way to help address these varying characteristics for each individual victim in this research. Due to the size of the sample it is not generalisable to all victims.

It is interesting to note that some victim participants shared that they used to think victims were weak, likely influenced by the media portrayal of victims of crime fitting the victim stereotype/label of being helpless and vulnerable (see Chapter 2) but when they found themselves to be a victim they realised the inner strength they needed to get through that (van Dijk 2009). Victim characteristics will be given further consideration in the discussion, alongside agency views on victim characteristics.

Victim Participant Terminology

In recent years people have been moving away from using the term victim to describe individuals who have been the victim of crime with terms such as "harmed" party, "wronged" individual and "survivor" being used more widely as alternatives (van Dijk 2008). This change in language is due to the stigmatisation of the word victim bringing "blame, derogation, weakness and shame" on the individual (Fohring 2018b:152). In an attempt to better understand the views of individuals who have been a victim of crime, victim participants were asked "would you use the word victim to describe yourself, or would you use a different word?". Table 13 below shows the breakdown of words victim participants would use to describe themselves, alongside the agency from which they sought support in Area A, whilst Table 14 shows the same breakdown for Area B. Figure 3 shows these responses as a word cloud.

Table 13 – Victim Participant Terminology Breakdown in Area A

Word	Agency	Type of Offence	Number of Victim Participants
Victim	Home Protection	Burglary	3
Survivor	Home Protection	Burglary	1
Unfortunate, slightly stupid	Home Protection	Burglary	1
Involved	Restorative Justice	Assault	1
Not victim	Restorative Justice	Burglary	1

Table 14 – Victim Participant Terminology Breakdown in Area B

Word	Agency	Type of Offence	Number of Victim Participants
Victim	Restorative Justice	Harassment/death of family member	2
	Domestic Abuse	Domestic Abuse	1
Survivor	Restorative Justice	Historic child sexual abuse	1
	Domestic Abuse	Domestic Abuse	1
Survivor when healed	Domestic Abuse	Domestic Abuse	1
Not sure	Domestic Abuse	Domestic Abuse	1

Figure 3 – Victim Participant Terminology Breakdown

Figure 3 – Victim Participant Terminology Breakdown
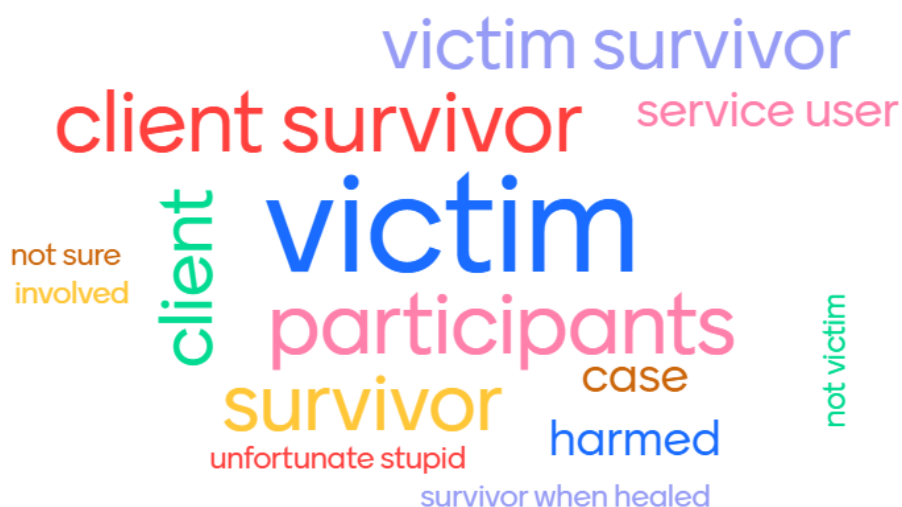
Six participants (43%) said that they would use the word victim to describe themselves, but they would often expand this to justify why they would use the word victim, referring to levels of victimisation and the legality of the recognition of an offence taking place. It is interesting to note that one victim of domestic abuse would use the word victim to describe themselves when this is not the typical language employed by domestic abuse support services who prefer the term "survivor… as it emphasises an active, resourceful and creative response to the abuse, in contrast to "victim", which implies passive acceptance" (Women's Aid 2022).

Many of those who had been victims of offences such as burglary were keen to point out that whilst they were a victim, there is a scale of victimhood and they were not at the top of that scale as there are far more serious offences, a common reaction from victims (Shapland et al. 1985) with sexual offences given as an example of more serious offences. AHPP3, for example, referred to "degrees of scale" and acknowledged that had there been a threat of violence or physical harm to them by the perpetrator it would have been a "completely different level of victimisation" to that which they experienced which was a break in, discovered by someone else, and they felt their role and involvement as a victim was "very peripheral" as a result, stating "we weren't really violated so there wasn't really anything for us to feel upset about". Similarly, AHPP5, in addressing whether they would use the word victim to describe themselves, explained how they were not a victim on the same scale as someone who had been the victim of a rape, although they did talk about a mental rape or a violation of their mind, and were very keen to make it clear they were not equating the burglary that happened to them to a rape, just the violation of the mind and this was what they could think to describe it. This creates an interesting distinction between how victims perceive themselves and portrayals of victims in the media where the victimisation itself is not considered on scales, rather the background and make up of the victim is considered, for example in Nils Christie's (1986) ideal victim, as well as their relationship to the crime and whether

they are a direct or indirect victim, or the subject of secondary victimisation (Rock 2002, Walklate 2017). It is interesting that the victims scaled their level of victimhood, whether they fit the mould of the ideal victim (Christie 1986) or not. More recent literature has focused on victim needs following victimisation (Goodey 2005), the effects of victimisation (Shapland and Hall 2007) and the victim label and how this is viewed/and what this says about/does to the victim. Whilst victims of crime may look at it as "it could have been worse", they also minimise their own experiences. Despite that, AHPP3 did acknowledge that they would use the term victim to describe themselves because "that, if you like, is how we felt. Somebody had targeted us" (AHPP3), however they did not see themselves as "heavy duty victims" because, whilst inconvenienced, "we weren't really violated so there wasn't really anything for us to feel upset about" and "we didn't feel as if we'd suffered a great deal compared to a lot of, a lot of other things" (AHPP3).

BRJP1, who lost a family member in a hit and run, acknowledged that they were a victim, but also talked about different levels of victimisation, pointing out that they were on a different level to other family members who were closer to the victim who passed away. BRJP1 pointed out that they were victims because of the process they were forced into as a result of the death - "we were victims because after this, after the death of [relative], this process we've been stuck there ... then all the stresses ..." but they go on to point out that had their relative not been killed they would not have had to go through all of this and with all the stressors that came with the passing they are "mentally" victims from the impact/effect this is having on them. Here the family member who passed away was the direct victim, whilst their family members were indirect victims, including BRJP1 who, in addition to going through the grieving and stressors of losing a loved one, also managed communication etc. with agencies on behalf of the family (Hall 2010, Walklate 2017). From the positive feedback about their interactions with agencies in relation to the family member's death, BRJP1 did not experience secondary victimisation, which can occur over the course of engagement with the criminal justice process, as they were well supported and only reported positive interactions (Walklate 2017, Rock 1986a, Newburn 2017, Fairclough and Jones 2018).

BDAP5 considered themselves to be a victim because they could not think of another word. When survivor or harmed were suggested as alternatives BDAP5 shared more about their experience and why they thought they were a victim:

> Well I 'spose I have survived it but I am, I would say yeah a victim, you've been victimised, you've been made to feel that you're nothing, you've been - I'm changed. I used to be a bit, this is a life that I would never have known about before this I was very naïve, I was like a princess fairy living in a life where it was all, I had nothing bad, I didn't know about drugs, I was always living life where everything has been perfect, I've been very lucky but it's changed me as a person 'cause I would get, I would feel like he wanted me to kill myself 'cause he'd be putting me down constantly, I feel now I'm emotional all the time, I'm scared to leave the house erm yeah so I'm still living in fear so yeah I would say I was a victim actually.

For some, their explanation for acknowledging that they would use the term victim to describe themselves was around legality, a crime had taken place, leading to a crime number, an acknowledgement by the police, therefore they were a victim. AHPP4, for example, pointed out "it's all legitimate, I've got a police crime number therefore in my view, bluntly, I'm a statistic". Similarly, ARJP7 acknowledged that as a crime had taken place they were a victim, however they were keen to point out that they did not see themselves as a victim, but acknowledged that they fit that category, that is that a 'transgression' was carried out by a 'transgressor' towards them (Rock 2002, Rothe and Kauzlarich 2017, Walklate 2017). ARJP7 was also keen to point out that there is a stigma attached to being a victim and that being a victim is seen as a weakness, despite what victims endure. This assertion is supported by the research of Fohring (2018b), Goodey (2005), Weisstub (1986) and van Dijk (2009).

AHPP5 shared that they "did feel a victim at the beginning, yes I did, because they told me I was though, they told me I was a victim because it says on the piece of paper victim support". This is interesting because AHPP5 was told that they were a victim, through the labelling of the paperwork, so they felt like a victim. However AHPP5 went on to explain that "as time has gone on not so much now I don't. Too much is happening in the world". Here they have shared the changes in their victim journey, that they did feel like a victim but do not any longer as time has passed, but they, like others, added a caveat that "too much is happening in the world". As this interview took place during the Covid-19 pandemic it seems as though they are comparing their victimisation through the committal of a crime against them to the experiences of individuals suffering as a result of a global pandemic. Perhaps the global pandemic has put things into perspective for them and they are seeing this as a minor incident on the scale of harm which could have been caused.

As explained above, ARJP7 was a serving police officer at the time that they were the victim of crime. ARJP7, like others, acknowledged that they were a victim based on the legality side of things, a crime had been committed against them. As a result of the fact they were in a role where they were dealing with victims of crime on a regular basis it is fair to assume that their views on the victim label were informed by their experience as a police officer. ARJP7 acknowledged this "now that I think about it more, my perception of it is probably shaped by the fact that I wear a uniform and at the, at the time of things happening I was in unform".

For some of the burglary victim participants interviewed, the perpetrator was disturbed (by an alarm or person) and did not make it upstairs in the property. Many commented that had they made it upstairs they felt the impact would have been worse. This would potentially have meant acknowledgement of them being a victim higher up the scale, as opposed to on the periphery. In contrast, AHPP4 commented that because items were removed from upstairs, and downstairs was not trashed, it was almost like it did not happen because they were not reminded of things being amiss as they went about their day-to-day life working from home where they spent most of their day working downstairs.

Whilst 43% of the victim participants in this study would use the word victim to describe themselves in the situation they were in, the remaining 57% of victim participants (as shown in the tables above) used different terms with three (21%) of the victim participants using the word survivor to describe themselves, whilst one (7%) said that they would use the word survivor when they had healed as they did not feel they were there yet, showing how victimisation is an ever evolving process with changes occurring over time.

One victim participant who said they would use the word survivor to describe themselves shared that they did not think that others saw them as lesser as a result of their victimisation. When questioned further on this they corrected themselves to say "That's not the right word to use, lesser … I think it's more … somebody who's pretty vulnerable. I probably am seen as a little bit vulnerable, I am an anxious person. Yeah, maybe the word vulnerable". Whilst this could help to explain the choice of words used, AHPP1 explained that they were a survivor as they had raised children and forged a successful career for themselves, making them a survivor. AHPP1 drew on all their experiences to explain their reasoning, whilst making clear that "you connect the word victim with being pitied" (AHPP1), and they were not to be pitied. AHPP1 clearly sees being a survivor as being their identity based on previous experiences they had gone through and things they have achieved. Therefore, to them, to be seen as a victim is to see them as 'less'.

The remaining four victims (28%) did not use the term victim or survivor, although one (7%) did say "not victim" but was unable to choose a term that they felt was more appropriate to them and their situation. The remaining descriptions were "involved" (one victim participant, 7%) and "unfortunate, slightly stupid" (one victim participant, 7%). In addition, BDAP6 explained that they would not use the word victim but were unable to think of another word. When survivor was suggested they said no because "I understand that what I've gone through is, is abuse but I don't look, I don't look at myself as like, as a survivor". They did, however, acknowledge that they had been harmed and affected by what had happened to them but felt that victim was not the right term as when they went to stay in a refuge they did not think that they should be there when hearing the stories of other residents compared to their own, another example of the scaling of victimisation.

ARJP6 explained how they do not like to think of themselves as a victim because "that word victim is, has got to be for people who are murdered or abused horribly … it doesn't apply to me", seeing victim as being for the people affected by the more serious crimes, not themselves. They then went on to point out that the word victim "it's a very pejorative sort of word", linking the abhorrent behaviour of the more serious crimes to the word victim and that the act towards the victim was pejorative, as opposed to the individual victimised. However, they did say that they did not mind if they were seen as being a victim by others i.e. support services "because I realise there's jargon and terminology in all, in all walks of life so if I go under a category as that … it doesn't bother me really" (ARJP6).

As explained above, there is a clear split as to whether victim participants would use the word victim to describe themselves (43%), whilst those who preferred another word (57%) shared a variation of terms or phrases that may be used. In addition to exploring

their preferred terminology, victim participants were also asked whether it mattered to them if others – support agencies, friends, family, colleagues – thought of them as having been a victim.

The majority of victim participants shared that they did not mind if others saw them as a victim with BDAP5 saying that others viewing them as a victim actually helped them to understand that these people were there for them, believed in them and were supporting them:

> I didn't realise it but obviously I am yeah, it wouldn't, no, it wouldn't affect me if they thought that because obviously it's actually made me realise that they're there for me and they support me and they know that what's going on is true.

For BRJP1 it did not matter if anyone viewed them as a victim "because at the end this is the truth … I was a victim". BRJP1 explained that they may not have been as much of a victim as other family members, closer to the deceased, but they were still a victim who was having to deal with the paperwork and supporting communication between their family and the police, an overwhelming experience for which they were receiving support, due in part to the fact that they are a victim.

For ARJP7 "the term victim is the right fit" for everyone to be using, before they reflected on the way the media use the term as well as the fact that having a Victims' Hub highlights that this is where you go for help for victims of crime:

> The term victim is the right fit … it can be skewed and used, the media use it in ways I don't think they should … but I don't think there is a better word because that is what you are … but I have no problem with other agencies referring to, I think it's great that we call it the Victims' Hub because we know that that is where any queries I have about victims of crime, I can go to that Hub and they're the one stop shop for victims (ARJP7).

BDAP3 explained that they did not mind if others viewed them as being a victim, because they saw the word victim as a word that showed it was not their fault, something had been done to them that was not their fault. As a victim of domestic abuse, they did not like the label being associated with their abuser i.e. John's victim, they were simply a victim and just because they were once a victim does not mean that they still were.

AHPP3 did not mind if others viewed them as a victim, because "I don't see any stigma in being a victim". AHPP3 explained:

> We were just unlucky. We had a guy who wanted to go to prison and he got his wish … as soon as he put his foot inside the door the alarm went off and he left. So our involvement as a victim was very peripheral, we weren't even here, we didn't come back, we didn't find it … we weren't really violated so there wasn't really anything for us to feel upset about … and so we weren't, a

strange use of words, heavy duty victims, so no we didn't feel violated, no we didn't feel as if we'd suffered a great deal compared to a lot of other things.

Here AHPP3 shares the distance between themselves and the crime that occurred. They were not home when it happened, the break in was not discovered by them, so the impact was greatly reduced as a result, but they would still use the word victim to describe themselves and did not mind if others did the same.

It is interesting that some victim participants did not mind others using the word victim to describe themselves but would not use it themselves. For the victim participants in this research this linked in with the behaviour of others towards them if they viewed them as a victim. For BRJP7 it did not matter to them if others thought of them as a victim, although they did say "I don't put myself in the bracket of being a victim I guess 'cause I was only, like I've been able to get over it" and this is important, they have moved on from what happened and are no longer a victim.

BDAP6 explained it did not matter if others thought of them as a victim – whether that was support agencies, friends or family – "as long as they don't treat me differently because of it". For AHPP5 they felt that their friends, family and neighbours saw them as a victim and actually reacted to it "I think I got a bit cross with them really ... not with the police but maybe friends ... I kept trying to say to people but you know I was not hurt, I wasn't physically hurt was I? I could have been in the house". AHPP5 went on to explain that whilst they perhaps lost some of their dignity and privacy as a result of the break in at their home, things could have been worse and had they been home they may have actually been harmed in the pursuit of the burglary, something that does happen, and AHPP5 explained "I think those people, to me, are real victims", again showing there are levels of victimhood and because they were not physically harmed and only had some items stolen, they did not sit very high on that scale and therefore did not deserve to be seen as a victim by others.

For BDAP4 it did matter to them if friends, family or colleagues thought of them as a victim as they "wouldn't want anybody to, to judge me in any other way than what they actually see in terms of how I need to present myself in that situation". BDAP4 explained that they felt that the word victim "makes you first think of weakness" and "I wouldn't want that". They did add, however, that "it shouldn't do really should it because I'm certainly not weak". This ties in with the literature around the victim where the term victim is associated with weakness, but victims themselves are not weak and do not see themselves as weak, such as Sabine Dardenne (discussed in Chapter 2), who took back her victimhood to show she was not weak (Dardenne 2004, as cited by van Dijk 2009). This was not well received, however, by those who felt the victim should be a quiet, meek and weak person, something that has been disagreed with by the victim participants in this research.

AHPP1 thought that some people may have viewed them as a victim and pitied them, but that "they usually see me as a pretty strong women actually, I think that's how I'm viewed. I don't think it's dented my kind of persona or identity as such". It is interesting to note that they had considered being viewed as a victim as something that could dent

their identity. AHPP1 wondered whether they would have been seen as more of a victim if someone had been harmed when the burglary took place, but went on to explain that "people afterwards said oh you know I'm really sorry this happened and you know it's never happened before and all that but I don't think they saw me in a kind of um lesser way if you like".

For BRJP2 it did matter if they were viewed by others as being a victim as "I would like to think I'm a survivor because I survived, what I've survived is a hell of a lot more and come through the other side of it".

Summary

Views around victimisation continue to be contradictory (Fohring 2018b), including the views of victims themselves. Whilst a victim may be happy to consider themselves to be a victim, they may not be happy for others to do so due to fear of judgement and changes in behaviour towards them (as identified in the literature by van Dijk 2009 – see Chapter 2). This will be given further consideration in the discussion, alongside the views of the agency participants. Stereotypical views of victims being 'weak' have not appeared strongly in this research. Instead, many victim participants were seemingly happy to acknowledge themselves as a victim because legally they are. Moreover, they were happy for others to see them as a victim, though there was some concern expressed by victims within this study, that they might be treated differently by friends and family due to their victimisation.

The failure of some victims to live up to the stereotype of being a victim has not gone unnoticed (van Dijk 2009) but some of the victims in this research preferred to look for a new term in the use of the word survivor. For those who did use the word victim, it was not without caveats, including the scaling of their victimisation, but with many seeing it as simply a word, a label. Victim participants are split over the terminology that ought to be used to describe people in their situations, and it is important that agencies adapt to the victim and do not try to mould them to be a victim or a survivor.

The victim participants in this research clearly had a view on the terminology to be used and they should be supported and empowered to use the terminology they want to describe themselves. Further consideration will be given to the terminology and the victim label in the discussion, alongside the views of the agency participants.

Agency Participants

This section is going to focus on the results from interviews with the participants employed or volunteering with each agency participating in the research, as well as providing a breakdown on the participants from the Office of the Police and Crime Commissioner (OPCC) across both Area A and Area B. Staff/volunteers participating in the research were recruited from six agencies across Areas A and B (three from each area). Table 15 below shows how each of these services were funded by the PCC.

Table 15 – Agency PCC Funding

Area	Agency	Funding
A	Restorative Justice Service	Full
A	Home Protection Agency	Partial
A	Victim Support Service	Partial
B	Restorative Justice Service	Full
B	Domestic Abuse Agency	Partial
B	Sexual Abuse Agency	Partial

This section will first provide an overview of the staff/volunteers working directly with victims of crime, before moving on to the Strategic and Operative Leads for each participating agency, and finally, each staff member interviewed from the Office of the Police and Crime Commissioner.

Focus Group Participants

In Area A and Area B staff/volunteer participants working directly with victims of crime were invited to participate in a focus group. A total of 19 staff and volunteers participated in this research, eight from Area A and 13 from Area B. The make-up of the agency determined whether the participants in this research were staff or volunteers, not the recruitment process. For example, individuals supporting victims at both the Domestic Abuse Agency and Sexual Violence Agency were all paid staff, they did not use volunteers, whilst the support provided by both Restorative Justice Services was provided by volunteers, with paid staff in the operative/strategic lead roles who provided support and guidance to volunteers.

Staff and volunteers were recruited from all three agencies participating in Area A – the Home Protection Agency, the Victim Support Service and the Restorative Justice Service. Table 16 below shows that for this research there were two members of staff from the Home Protection Agency, one member of staff from the Victim Support Service and two volunteers, and two volunteers from the Restorative Justice Service. Of these volunteers, one volunteered for both the Victim Support Service and the Restorative Justice Service but will only be referred to once under the Victim Support Service when exploring the

demographic breakdown of focus group participants. Focus group participants were recruited if they worked directly with victims.

Table 16 – Agency Breakdown of Staff and Volunteers in Area A

Agency	Staff	Volunteers
Home Protection Agency	2	0
Victim Support Agency	1	2
Restorative Justice Service	0	2

In Area B staff and volunteers were recruited from all three participating agencies– the Domestic Abuse Agency, the Sexual Violence Agency and the Restorative Justice Service. Table 17 below shows that for this research there were four members of staff from the Domestic Abuse Agency, four members of staff from the Sexual Violence Agency and five volunteers from the Restorative Justice Service. Neither the Domestic Abuse Agency nor the Sexual Violence Agency used volunteers.

Table 17 – Agency Breakdown of Staff and Volunteers in Area B

Agency	Staff	Volunteers
Domestic Abuse Agency	4	0
Sexual Violence Agency	4	0
Restorative Justice Service	0	5

As explained earlier, the self-identified gender of participants was collected as part of this research, as shown in Table 4 above. Table 18 below, however, shows the self-identified gender breakdown of the staff and volunteer cohort participating in the focus groups. Six of the staff/volunteers were male (33%) and 12 (67%) were female. The numbers of each gender volunteering are very close, although there is a difference from the research by The National Council for Voluntary Organisations (NCVO) which found slightly more females than males volunteer (NCVO 2021). However, this is not a breakdown of all those volunteering for the agencies, but a breakdown of the volunteers who participated in this research and may not be representative of the agency and volunteers in Areas A and B.

Table 18 – Gender of All Staff and Volunteer Participants

Gender	Staff	Volunteers
Female	9	3
Male	2	4

Table 7 showed the age breakdown of the focus group participants in this research. Table 19 below shows the age breakdown of staff and volunteers with staff ranging in age from 21 to 64 years with the majority (n=4) being aged between 20 and 29 years. Volunteers ranged in age from 49 to 75 years with the majority (n=3) being aged between 50 and 59

and 70 and 79 years. This supports the research by the NCVO (2021) who for 2020-21 found that those aged 65-74 were more likely to engage in formal volunteering, whilst 25-34 year olds were the least likely.

Table 19 – Age Range of All Staff and Volunteer Participants

Age Range	Staff	Volunteers
20-29	4	0
30-39	3	0
40-49	0	1
50-59	2	3
60-69	2	1
70-79	0	3
80+	0	0

Table 20 below shows the self-identified ethnicity of staff and volunteer participants where all have identified as white. The NCVO (2021) research found that different data sources presented different results when identifying which ethnic groups volunteer more. And, again, the staff and volunteer make up is not necessarily representative of the entire agency and it is not possible to make that assumption as this research did not require access to all staff/volunteers, but a selection. If this were to be representative of the entire agency this could be a potential area for concern as the agency would be lacking in ethnic diversity. Different ethnicities bring different experiences and different viewpoints which could be beneficial to victims seeking support. For example, SafeLives (2015b) points out that women from a BAME background experiencing domestic abuse may benefit from support from an individual from the same background due to the "unique challenges" they face such as potential concerns around their legal status, potential lack of knowledge of UK systems and language barriers.

Table 20 – Ethnicity of All Staff and Volunteer Participants

Ethnicity	Staff	Volunteers
White British	9	7
White European	2	0
White Irish	0	1

Finally, staff and volunteers were asked how long they had been in post/volunteering in the role. This was to help better understand the experience levels of participants. Table 21 below shows that the longest a member of staff had been in post was 7 years. This was a member of staff from the Sexual Violence Agency in Area B. Table 21 below also shows that three volunteers had been volunteering for 6 years (n=2) and 6 or 7 years (n=1). All three were volunteers in restorative justice (two from Area A and one from Area B).

Table 21 – Length of time in post for all staff and volunteer participants

Time in Post	Staff	Volunteers
0-1 years	2	1
1-2 years	4	0
2-3 years	2	0
3-4 years	1	0
4-5 years	1	2
5-6 years	0	2
6-7 years	0	3
7-8 years	1	0

On reflection, it might have been beneficial to obtain the socio-economic background of volunteers to help better understand their experiences and how this may have informed their volunteering. This is an area for potential future research to explore.

Operative and Strategic Lead Participants

Across Areas A and B the Strategic and Operative Leads for each agency were invited to participate in individual interviews. A total of 13 Strategic and Operative Leads participated in this research, five from Area A and eight from Area B.

Strategic and Operative Leads were recruited from all three agencies participating in Area A – the Home Protection Agency, the Victim Support Service and the Restorative Justice Service. Table 22 below shows that for this research there were two Strategic Leads and three Operative Leads from Area A. There was no Strategic Lead from the Restorative Justice Service because they were not involved in liaising with the PCC etc. as this fell under the Strategic Lead for the Victim Support Service because of it being set up as a hub.

Table 22 – Agency Breakdown of Strategic and Operative Leads in Area A

Agency	Strategic Lead	Operative Lead
Home Protection Agency	1	1
Victim Support Agency	1	1
Restorative Justice	0	1

Strategic and Operative Leads were recruited for the research from all three agencies participating in Area B – the Domestic Abuse Agency, the Sexual Violence Agency and the Restorative Justice Service. Table 23 below shows that for this research there were four Strategic Leads and four Operative Leads from Area B. As the Strategic Lead for the Restorative Justice Service was on maternity leave at the start of this research they were interviewed on their return, however their cover was also interviewed which is why there were two Strategic Leads for that agency. There were two Operative Leads from the Restorative Justice Service because there were two Coordinators serving in this role and

both were interested in participating. It was therefore decided to include both in case they had different individual responsibilities within this role.

Table 23 – Agency Breakdown of Strategic and Operative Leads in Area B

Agency	Strategic Lead	Operative Lead
Domestic Abuse Agency	1	1
Sexual Violence Agency	1	1
Restorative Justice Service	2	2

As explained earlier, the self-identified gender of participants was collected as part of this research. Table 24 below shows the self-identified gender breakdown of the Strategic and Operative Leads. Of the seven Operative Leads, all of these participants were female (100%). Of the six Strategic Leads, one of these participants was male (16%), whilst the remaining five (84%) were female. This reflects Victim Support's 2021 staff demographic data where 69.9% of staff were female, whilst 11.7% were male (Victim Support 2022), although this is based on all staff as opposed to those in Operative and Strategic Lead roles.

Table 24 – Gender of All Strategic and Operative Leads

Gender	Strategic Lead	Operative Lead
Female	5	7
Male	1	0

Table 7 showed the age breakdown of all participants in this research. Table 25 below shows the age breakdown of the Strategic and Operative Leads, with the majority of the Strategic Leads (n=2) being aged between 50 and 59 years, whilst the age of the Operative Leads was relatively evenly spread between 20 and 29 years (n=2), 40 and 49 years (n=2) and 50 and 59 years (n=2).

Table 25 – Age Range of All Strategic and Operative Leads

Age Range	Strategic Leads	Operative Leads
20-29	1	2
30-39	1	0
40-49	1	2
50-59	2	2
60-69	1	1

Table 26 below shows the self-identified ethnicity of the Strategic and Operative Leads. The majority of the Strategic and Operative Leads (92%) identified as British, with two Operative Leads adding English and Other alongside British. One Strategic Lead (8%) identified as Greek Cypriot.

Table 26 – Ethnicity of All Strategic and Operative Leads

Ethnicity	Strategic Leads	Operative Leads
Other – Greek Cypriot	1	0
White British	5	5
White British/English	0	1
White British/Other	0	1

Finally, Strategic and Operative Leads were asked how long they had been in post. This was to help better understand the experience levels of participants and their involvement in the changes which had taken place. Table 27 below shows that the longest an Operative Lead had been in post was 4 years, 11 months. This was the Operative Lead from the Sexual Violence Agency in Area B. Table 27 also shows that two Strategic Leads had been in post for over 8 years. These were the Strategic Leads for the Victim Support Service in Area A (8 years) and the Strategic Lead for the Sexual Violence Agency in Area B (13 years). For AVSSSL3, having been in the post for this long meant that they were involved in the early piloting and development of victim support services in Area A and had been involved in the service since its inception. For BSVSL4, having been in their role for 13 years meant they had worked under the previous ways of commissioning and funding of victim support services before the introduction of Police and Crime Commissioners. This allowed them to be able to make comparisons between how this new way of commissioning impacted their work and to be able to share the changes which they had experienced. Having spent significant time in their posts, it could be considered that they may lack the "healthy churn" (NPCC 2016:8) required to allow for "a positive creating space to recruit new capabilities which would take many years to develop internally".

Table 27 – Length of time in post for All Strategic and Operative Leads

Time in Post	No of Strategic Leads	No of Operative Leads
0-1 years	1	1
1-2 years	0	2
2-3 years	0	2
3-4 years	1	0
4-5 years	0	3
5-6 years	0	0
6-7 years	1	0
7-8 years	0	0
8+ years	2	0

In terms of age representation, the Operative and Strategic Leads were widely spread from being aged in their 20s to being aged in their 60s. However, all but one identified as being White and all but one were female, showing they are unlikely to be a fair representation of the individuals they offered support to.

Office of the Police and Crime Commissioner Participants

One individual from each area represented the OPCC for this research. From Area A this was the commissioning and strategic partnerships lead (APCC), whilst from Area B this was the commissioning lead (BPCC). Both representatives were female and White British. One was aged 30-39 years, whilst the other was aged 40-49 years. One had been in post for 4 years, whilst the other had been in post for 7 years. The representatives from the OPCC for each agency had different backgrounds and experience prior to taking on these roles. APCC had previously worked in communications with the OPCC and the police whilst BPCC had significant experience around relationship and contract management before moving into procurement.

Summary

It is important to understand the make up of participants in this research to help better understand the insight they were able to offer around victims and the support services available, as well as any effects on the move to tender competitions. For example, a 70 year old volunteer could be assumed to have more life experience than a 25 year old volunteer which may influence their responses, whilst an individual who has been in that post/volunteering in that role for 5 years is likely to have better understanding and experience of working with victims at that agency than an individual who has only been there for 6 months.

The majority of agency participants in this research were female (79%), and every agency participant was white. This is clearly not representative of the demographic make up of England and Wales, and consideration should be given to the potential impact this could have on the delivery of services. However, as this is a selection of the staff and volunteers working and volunteering with victims obtained through convenience sampling, it may not be representative of the workforce itself. There does, however, seem to be a heavy lean towards White British staff, not only in the management roles but also, as discussed above, in the direct staff and voluntary support roles as well as a high proportion of females in Operative/Strategic Lead roles. This is something for agencies and researchers to explore further as Victim Support (2022) data shows that they continue to have a high proportion of females working for them, however the breakdown of those roles has not been considered.

How the Services Work

To better understand the victim experience of victim services, it is important to understand how those services work from the point of view of the staff and volunteers working directly with victims of crime, as well as the strategic and operative leads for each agency. For the purpose of this research, the Operative Lead (OL) is the individual responsible for the coordination and allocation of referrals into the service, whilst the Strategic Lead (SL) is the individual responsible for the management of the service, including liaising with the PCC.

This section will consider the changes made to victim support services and explore how each of the services works, starting with the agencies which participated in Area A – the Victim Support Service, the Restorative Justice Service and the Home Protection Agency – before moving onto the agencies which participated in Area B – the Domestic Abuse Agency, the Restorative Justice Service, and the Sexual Violence Agency. For each agency this thesis will consider the Referral Process, What Support is Offered, and the Impact of the Covid-19 Pandemic.

Area A

Area A was one of the early adopters of the changes to victim support services in England and Wales, engaging in research undertaken by the Home Office to establish whether changes needed to take place or if the systems and processes in place were sufficient for victims of crime (AVSSSL2, APCC). As a result of this research concerns were raised about the support being provided by the victim support service at that time which was set up with a "regional call centre where the staff didn't know where the towns in our county were" (APCC), meaning that the staff in these centres did not know where to refer victims of crime. APCC explained that support was being offered based on the type of crime committed, rather than the needs of the individual victims. This was a concern because whilst there may be similarities in individuals' reactions to crime, there are also significant differences. For example, an individual who is a victim of crime away from their home may feel safe at home if they live in a block of flats with a requirement for individuals to call up for entry, whilst a victim of the same crime living alone in the countryside may not feel as safe because they are more physically isolated. It was therefore felt that a local service focused on local need was needed, leading to the creation of the "new Victim Hub which would coordinate the support, it would sit within the constabulary, the Chief Constable would be responsible for ensuring that element of the service worked and it would work seamlessly with victim support, who would receive referrals from the Hub, rather than everything going to [the victim support agency]" (AVSSSL2).

Before making the decision to change the structure of victim support services in Area A significant research was undertaken to establish the needs of residents of that Area and to ensure that they had a robust evidence base (APCC). APCC explained that they found "a really high proportion of victims were migrant victims of exploitation" alongside the fact that victims of crime who had an existing mental health issue or who were

predisposed to mental health issues were going to find that these were exacerbated as a result of the victimisation. This prompted the inclusion of qualified mental health nurses and specialist support workers for migrant workers of exploitation, starting with the ethnicity with the highest number of identified victims – Lithuanian – before employing a second worker as part of their regular reviewing and tweaking of support services once another high number of victims was identified from another ethnicity – Romanian (APCC).

APCC explained that their priority when it came to developing services "ultimately was that it was a local service delivered by local people. For local people. Local was sorta the key. And that it was needs based not crime type". As a result changes were made across the whole spectrum of victim support services in Area A with APCC explaining "It was so disjointed, so bitty, so unresponsive to victims ... there was a couple of charities who did very ad hoc work" and that there were different referral pathways to support whilst Victim Support were described as being "very, very, very flaky in our area ... the volunteer base was very retired ladies ... was very tea and sympathy, there was no science behind it. It wasn't about looking at how people can support themselves in the future, looking at linking 'em in ...". The changes made in Area A were specifically made to have an effect on victims and to help individuals learn to support themselves.

Whilst domestic abuse services participated from Area B, in Area A these were an in house service within the local authority who worked with the OPCC but were not commissioned by them (APCC). They therefore did not meet the criteria for this research, but APCC did confirm that they worked closely with them and had some of the domestic abuse staff co-located within their hub, further emphasising the importance of partnership working in Area A. In addition, whilst the sexual violence support services were commissioned by the OPCC, who had devolved rape support funding and did meet the criteria for this research, they declined to participate. When discussing the commissioned sexual violence support agency APCC was very proud of the support they had commissioned, referring to it as "the jewel in our crown", however when attempting to engage with the sexual violence support agency to include them in this research, they were not overly enamoured by the OPCC, although they declined to say anything more and failed to respond to attempts to engage them in this research.

Area A – Victim Support Service

Three individuals were invited to participate in a focus group from the Victim Support Service (VSS). One was a staff member who, along with their colleague, specialised in supporting victims of human trafficking through outreach alongside the police. During the Covid-19 pandemic this work was significantly reduced and they supported the work being undertaken by the VSS. AVSSFG3 was interviewed alone. The remaining two focus group participants from the VSS were volunteers who participated in a focus group. One of these participants, AVSSFG5, also volunteered for the Restorative Justice Service. Focus group participants from the Victim Support Service explained that they provided "emotional and practical support for victims of crime" (AVSSFG5).

In addition, individual interviews were conducted with AVSSOL3, the Operative Lead at the service whose role involved checking incoming referrals to ensure they were appropriate and allocating to staff/volunteers, and AVSSSL3, the Strategic Lead for the VSS who was responsible for ensuring delivery of the service across the PCC area, as well as working "with partners at a strategic level to ensure that the service is embedded and links in with other partner agencies" (AVSSSL3).

The VSS itself consisted of the Strategic Lead, a Delivery Manager, three supervisors, three support officers (assisting with administrative needs) and 20 paid coordinators which had just been increased to 21 at the time of interview after the PCC agreed to a temporary two year uplift to help support with the backlog of victims still needing support through the courts (AVSSSL3). At the time of interview their volunteer pool had taken a hit because of the Covid-19 pandemic and they were looking to build this back up again (AVSSSL3).

Referral Process

When being referred to the VSS, individuals could either self-refer or agree to their details being passed on by the police after reporting a crime (AVSSFG4, AVSSFG5, AVSSOL3). In addition, third parties through "interoperability links", such as Action Fraud, may refer as well as GPs and other areas if an individual had been a victim in another part of the country as they were "entitled to support in the area where they live" (AVSSSL2, AVSSFG5).

Being an in-house service meant that there would not be "any issues around consent or information sharing between the service for victims and the, and the constabulary who are the, who would be the primary source of referrals" (AVSSSL2). AVSSSL2 explained that having an in-house service meant that they would be able to "tailor the support by triaging victims from the outset to identify those who may have needs as opposed to those that clearly don't have needs … so the limited resources of the Hub could be focused immediately on those with needs, rather than spending a lot of time sorting out a data dump with all victims". Triaging services is supported by the MOJ's (2012a) consultation, *Getting it Right for Victims and Witnesses*, which highlighted that in 2010/11 Victim Support received over one million referrals, but only 60% were assessed for support (600,000), 400,000 were not assessed and of the 600,000 assessed, 200,000 actually required support. Triaging from the outset would allow them to focus their resources where they were required. However there remains the potential for prejudice/pre-conceived ideas around victims who need support following an offence and inconsistency if it is relying on the professional judgement of police officers in relation to responses from victims. To triage from the outset "a new assessment of victim needs was incorporated as part of the crime recording process within the constabulary" (AVSSSL2). This way those who were identified as having needs would be referred to the Victim Support Service for further information/support, whilst those who were not would be sent a letter or an email which would outline their rights under the Revised Victims' Code and the service available should they be interested, together with details of how they could get in touch with them, ensuring that all victims received some form of contact advising them of their rights under the Code and where they could go for

support should they need it down the line (AVSSSL2). This does, however, rely on the police accurately triaging at the time of reporting.

Police referrals were created by police officers who "log the referral and the manager from the VSS distributes those referrals" (AVSSFG3, AVSSSL2). These referrals came through quite soon after the incident had occurred/been reported, and could even come through on the day, but tended to be received within one to two days after the incident (AVSSOL3). The VSS would then make contact with victims within 24 hours of receiving the referral (AVSSOL3). For those who were not logged as a referral, perhaps because they declined support or did not (apparently) present with any needs at the time of asking, a letter or email would be sent to them by the Victim Support Service to ensure that they were aware of the support that was available, should they change their mind down the line and wish to utilise the support available (AVSSOL3). For individuals who had been the victims of crime where specialist support services were available i.e. sexual offences, these would not be picked up by the Victim Support Service as they would not want to cause harm to the victims because they were not specially trained and expected that these had already been picked up by the sexual abuse agency (AVSSOL3). This does, however, assume that sufficient referral processes were in place for victims of sexual abuse at the time of reporting. It also only takes into account those referred by the police and does not take into account victims who may be seeking support for sexual abuse who have not reported to the police but have been referred to the VSS or self-referred to the VSS and may not be aware of the specialist support services available. For individuals who had been the victims of domestic abuse, the DASH risk assessment score would be considered and if they were classed as 'standard risk' the VSS would offer support (AVSSOL3). It is important to note, however, that the DASH is subjective, and Turner et al. (2019) point out that "each element of the DASH questionnaire is, at best, weakly predictive of revictimization" (p1013). Their findings include the fact that the risk predictions from police officers "are little better than random" (Turner et al. 2019:1013). Those who were medium or high risk would be passed on to the local specialist domestic abuse services (AVSSOL3). It is surprising that this was not also the case for the victims of sexual abuse and should have been to ensure none of the victims fell through the gap and everyone had the opportunity to access support if they wished to.

For self and external agency referrals there was no standard referral form, however AVSSOL3 explained that as long as there was a summary of the incident and the basic contact information for the victim (for agency referrals), then they would be able to start work with it.

For the victims of migrant exploitation who were identified through outreach (explained further in the Methodology), AVSSFG3 explained that they would visit the "high risk industries" such as car washes, nail bars, sex workers and construction sites with the police who would often arrive in police cars and then want to question the individuals there. AVSSFG3's role would be to offer "reassurance that they've done nothing wrong because the whole thing of this, the whole idea of my team … is to treat them as victims first of all, not as criminals". AVSSFG3 stressed the importance of this as the entire situation could be intimidating to victims of human trafficking so AVSSFG3 would provide

reassurance to the victims, as someone who was able to speak their language, and explain what was happening and that they were there to help:

> First of all it's just that reassurance that they're okay, they've got someone that speaks their language, I can explain what we're looking for, tell them what we might be able to do for them ... we can make the referral to the National Referral Mechanism and we can find them a safe place ... and we can help them with food, clothing, all that sort of thing, emotional support, mental health support ... at the end of the day their, it's their choice what they want to do.

For VSS volunteers, new referrals would be brought to them by one of the coordinators working in the VSS. These referrals would have been checked prior to allocation and the individuals being referred could have been the victim of any crime, "from burglaries to neighbour issues and ... sort of everything in between (AVSSOL3). If the volunteer agreed to accept the case it was allocated to them on *Case Tracker*, the online system used to monitor referrals. Once allocated, volunteers could log onto the system to access the contact information for the individual allocated to them and before contacting the victim would review the file and "the background as to what's happened from the files located from Athena" (the police system) (AVSSFG5). Volunteers were issued with laptops and smart phones to ensure that they were contactable and were able to access emails and secure systems (AVSSFG5). This is a significant investment in volunteers and assumes that they are fully knowledgeable about newer technologies.

What Support is Offered

The Victim Support Service in Area A was merged with the Witness Care Unit within the police and "all the staff work with both victims and victims and witnesses at the court" (AVSSSL2). This meant that individuals could be supported from reporting through to the conclusion of their case in court and beyond, if necessary (AVSSSL2). This also meant that they could work with the same person the whole way through the process (AVSSSL2). Once a case had been allocated, pre-Covid, the individual assigned to the case would establish contact with the victim, introduce themselves and seek to arrange a suitable time for a meeting and would look to build a rapport with the individual (AVSSFG5, AVSSSL2). Since the Covid-19 pandemic this support has been over the telephone. AVSSFG3 explained that they would tell the victim that they were "aware of what happened, I always let them tell me the story". AVSSFG3 felt this was important and explained that it was:

> Just to listen to their point of view ... I know what happened but it's always helpful for me at least ... to have their point of view and I think this is, it's important for them to actually talk about it and ... telling me what happened it's like, making a bond, creating a bond knowing that I can, I listen, and I don't judge, and there's someone there that can do that ... some of them they've got family, friends, but sometimes it works better to unload and to speak to a stranger so yeah this is why I always let them tell me what happened, just to create that bond and just to, to tell them that I, I'm not gonna judge and I'm

just there to listen and, if I can, provide an advice or guidance or whatever and most of the time they just want to talk to someone.

The VSS team predominantly provided emotional support to victims of crime referred to them (AVSSFG5, AVSSOL3). The support they offered included signposting, helping with practical matters such as filling in forms, or accompanying the victim to court during the criminal justice process (AVSSOL3). AVSSOL3 explained that the key to their role was "just listening to that person", and this was highlighted by AVSSFG4 and AVSSFG5 as the support they both offered most, being there to listen to the victim, much like being a Samaritan, something the volunteers had training in:

> They can talk through what has happened to somebody who doesn't know them and they can offload how they are feeling to us (AVSSFG5);

> It's being there and being able to talk unemotionally and a lot of the time the, their family or friends are so fed up hearing about it but they need to talk, they need to get it off their system (AVSSFG4).

One area of potential contention for the Victim Support Service was around a victim's entitlement "to support whether they want to report their crime to the police or not" (AVSSSL2, AVSSOL3). AVSSSL2 explained:

> We're also the service that will support victims who want confidential support around their victimisation. Which is a slight wrinkle in terms of the policing service providing the support. So we never obfuscate our links to the constabulary, although we have got our victim services website, we're also on the constabulary website, but what we've managed to do is to balance the competing priorities. So from a police point of view under the National Crime Recording Standards police are required to record crime as soon as they're aware that a crime has been committed so we're police staff, if someone phones in and says I'm a victim of crime, technically under NCRS we're the police, we should be recording it. But if we did that then we would be depriving the victim of their right to not have their crime recorded and to a confidential service so, what we do is if the call comes through to us through the freephone number, we deal with that as a confidential service support unless there are any safeguarding concerns and then if there is, you know, then we'll explain that we can't offer a confidential service if there's a risk to them or any other person from them.

Both AVSSOL3 and AVSSSL2 were very clear that there would be no pressure or insistence towards the individual to report the crime if they did not want to, focusing on the needs of the victim and their wants and rights under the Victims' Code (Chapter 3 and Appendix A). AVSSSL2 felt this was important and the fact that individuals would still contact them for support, "despite being part of the police" was positive as they "feel that we're still trusted" and this would often lead to them asking about what would happen if they did report it. AVSSOL3 shared "on a number of occasions they said well actually I would like to report it and that's because they've had time to think through,

they've got some element of control". This speaks to the impact of victimisation on an individual. As explained in the literature review, victims often feel ashamed of having been victimised, with a stigma attached to their victimisation of them being weak (Fohring 2018a, Goodey 2005, Weisstub 1986), and they may be reluctant to report the crime as a result. Having a service which offers support to victims, whether they have reported or not, which can provide advice and guidance around the processes and potential outcomes of reporting takes the power afforded to the offender in victimising an individual and gives it back to the victim as they make that informed decision as to whether or not to report the victimisation event.

When providing support to victims of crime, the VSS volunteers were flexible. It could be just one or two calls, it could be support over a matter of weeks, or it could last in excess of a year (AVSSFG3) but just those initial phone calls still counted as successful engagement. All three VSS focus group participants explained that for those who declined support following that initial conversation they still took away some satisfaction as the victims had still been grateful to them "for taking the time to call and check" (AVSSFG5). All the VSS participants had experienced to some degree a victim declining support at the initial call, but then contacting them again at a later stage. AVSSFG5 explained:

> I've always said to them look, you know, if it is early days for you and you feel you don't need the help that's fine but you, you know that you can call me if you do need the help.

Perhaps this is an indication that contact with victims may be taking place too soon for some, or an indication that closure of cases is too quick and that a further attempt should be made to contact the victims at a later date to see if they require support as some effects of victimisation are not immediately apparent and may present themselves further down the line (Shapland et al. 1985). For AVSSFG3 undertaking outreach:

> I always give my contact details when I'm out on my outreach work, and I did have some victims at first point they've just said no I'm good, I don't need any help, I don't need any support I'm doing this because I want to do this and then they came back and they rang me in a few days and said I need help, I want to get out of this, I wanna go back home or I've got no money ... I can actually help them ...

AVSSFG4 explained that they often came across older victims of crime who simply needed the company and valued the contact from the support workers and AVSSSL2 shared that it was important that they avoided becoming a "befriending service". Both AVSSFG5 and AVSSFG4 had cases lasting in excess of a year and shared that they found it difficult to bring these to a close:

> It was over a year and I kept thinking my goodness, it's gonna be hard for this person ... but we did, we, we cut the cord eventually but it was, disengaged bluntly and fairly ... It was, well this person, you've got your strength now and you're in a good place and I think it's time for me to let you go (AVSSFG5).

AVSSFG3 described their work supporting victims of human trafficking as being similar to that undertaken with other victims referred into the VSS, although their role also included outreach prior to the pandemic. AVSSFG3 explained they also undertook additional reassurance work including advising the victims of human trafficking of their legal rights, supporting through the criminal justice process, should they proceed with it, and supporting them to visit the court:

> They might have done something wrong but first of all you're just going there and you've seen someone that's vulnerable and you just want to make them aware that nothing, there's nothing wrong going on and they can trust you and they can tell you things because most of them they've been threatened, they're not allowed to leave the house, they have their ID documents taking away, they've got no one, they don't speak the language they don't know their rights, some of them they've been threatened to be deported … I've been really surprised to see that there are people that believe that they can be deported when it's not the case (AVSSFG3).

AVSSFG4 found the victims they had offered support to had mainly been victims of harassment, particularly during the Covid-19 pandemic when everyone was at home, with some cases of theft. AVSSFG4 explained that it was a mixture of racial discrimination/harassment and harassment by neighbours during lockdown, which they found to be "very frustrating because the police can't do anything unless there is violence". AVSSFG5 on the other hand had supported victims of a whole range of crimes from theft to rape, to murder.

The Impact of the Covid-19 Pandemic

As a result of the Covid-19 pandemic the outreach undertaken by AVSSFG3 and their colleagues was suspended, with the only support being offered being over the telephone when police officers would call them if they came across a victim so that they could speak to victims. It was unclear why this was suspended as it could be argued that their roles should be classed as key workers, however it may have been because the high risk businesses – nail salons, construction, car washes – had all shut down because of the pandemic so there was not any outreach to be done. This also led to a reduction in referrals as no outreach could be undertaken, although AVSSFG3 did try "to maintain awareness that the service is still available for referrals". In addition, the Covid-19 pandemic held up the progress of cases with one going on for over two years because they were unable to go to court (AVSSFG3). AVSSOL3 also highlighted that they had noticed victims retained their support a little longer than they had pre-Covid, which they thought could have been linked to the fact everyone was at home and missing interacting with friends and family. Whilst no concerns were raised about this having an impact on their ability to provide services to other victims who may require support, the fact that the OPCC approved the employment of an additional coordinator to support with the backlog for two years shows that there was an impact and concern around this and actions taken to try to ease this.

The VSS continued to provide support throughout the Covid-19 pandemic, but this was also only available over the telephone (AVSSFG4, AVSSOL3). AVSSSL2 explained that they had always been a phone-based service but that their outreach was undertaken by volunteers and they would "recruit, train and deploy volunteers to provide the face-to-face" if, during the victim needs assessment, it was identified that a "victim would benefit from some face-to-face longer term support". AVSSOL3 added that having volunteers available to meet with victims face-to-face "was just nice to have", highlighting that this was particularly useful for elderly victims of crime who "tend to prefer to have that option of face-to-face". This highlights not only the importance of building relationships and in-person communication for victim support services, but also the stereotype that elderly victims prefer the face-to-face support, similar to the views shared by APCC in relation to the Home Protection Agency that elderly victims do not get out much and therefore appreciate that emotional, face-to-face support. It also risks volunteers, rather than paid staff, getting caught up with elderly victims for longer than they may need because they require more hand holding (as highlighted by both restorative justice and victim support service volunteers). AVSSSL2 highlighted this as an area which had "withered" as a result of the Covid-19 pandemic and that as they moved out of the restrictions they would need to look to "completely refresh that", but did highlight that they had "maintained the relationship with the volunteers" and when it came to this face-to-face support it was all about balancing the needs and wants of the individual victims. Interestingly APCC felt that services had been delivered "in different ways which the victims have really engaged with well" and that Covid-19 had "forced us to explore new ways of working so we've been doing walk and talks ... and some people really like that because you're not sat in a room looking at each other, it's more informal". This is not something that was highlighted as part of their work by any of the participating agencies, but may have been another commissioned provider who did not participate in this research. If this has been working for one provider though, it is surprising that this success was not shared by the OPCC with other providers or encouraged during the Covid-19 pandemic to get people engaging face-to-face rather than over the telephone given the importance of this was highlighted by all three agencies.

AVSSFG3 explained that during the Covid-19 pandemic they would actively retrieve referrals from the system before they reached the hub whilst the two volunteers participating in this research had vastly different experiences when it came to caseload. Pre-Covid AVSSFG5 was travelling all over Area A, meeting with victims, but after the Covid lockdown hit found they were not being allocated as many cases, "I don't know if they didn't need the help as much". In contrast, AVSSFG4 found that with their support being over the telephone post-Covid that they had cases scattered all over Area A, having up to 16 active cases at one point which seems a disproportionately high number for a volunteer to be managing. AVSSOL3 explained that they also had to make changes to allow themselves to socially distance in the office, including some people working from home, although they noted that this had not had much of an impact on them personally.

One thing about the Covid-19 pandemic highlighted by the volunteer participants was how they found that they had less motivation at times as they had to make an effort to engage in the volunteering, to get their laptops and log on and check emails etc. This could have been due to the burnout many volunteers reported experiencing during the

Covid-19 pandemic which was a stressful time and impacted "professional and social lives, as well as physical and mental health" (Kanemura et al. 2022). This was likely to have not been helped by them feeling like they had lost touch with the people who they were volunteering for because they were stuck at home and not able to visit the office:

> We kinda lost touch with people ... and the hub is, is a sort of family organisation, I think everybody kind of knows everybody and it's, it's a nice small organisation and I think we're very much missing out on that at the moment (AVSSFG4).

This is likely not to have been an unusual impact of the Covid-19 pandemic with so many people working remotely (49% in June 2020) and with changes in priorities (Mutebi and Hobbs 2022).

Area A – Restorative Justice Service

As explained in the participant breakdown, participants from the Restorative Justice Service consisted of two volunteers and the Operative Lead. The Restorative Justice (RJ) facilitators at the RJ Hub were not paid staff, but trained volunteers. Two volunteer Restorative Justice facilitators participated in the focus group for the Restorative Justice Service. One of these participants, AVSSFG5, also volunteered for the Victim Support Service. The Operative Lead for the RJ service, ARJOL2, was the only paid member of staff and the Coordinator for the service, responsible for undertaking the initial enquiries on receipt of the referral.

Focus group participants from the Restorative Justice Service in Area A described their work with victims as helping "victims have a voice so that the offender understands the harm caused by their actions" (ARJFG6). The service itself consisted of one staff member (the Coordinator) and approximately 7 volunteers. All participants were facilitators for the Restorative Justice Service in Area A. There was no restorative justice specific Strategic Lead as this fell under the remit of the Victim Support Service Strategic Lead.

Referral Process

Referrals into Area A Restorative Justice Service could be victim initiated or offender initiated (around a 50/50 split) and were allocated to volunteer RJ facilitators by the RJ Coordinator (ARJOL2). Referrals may come directly from the victim, the offender, Victim Liaison Officers, prison, probation and the Victim Support Service with offender-initiated referrals having seen an increase as a result of offenders completing victim awareness courses whilst in prison (ARJFG6, ARJOL2). This is important "because the whole process ... is voluntary ... it does need the buy in of everybody" (ARJFG6) and restorative justice cannot take place without all parties being in agreement. When a referral was offender-initiated contact would be made by the facilitator to establish if they were genuine and "really want to show remorse", before making contact with the victim (AVSSFG5). This is interesting because it is not a requirement of restorative justice for the offender to show remorse, although it is a requirement for them to accept

responsibility for any harm caused by their actions (RJC 2015), which was not highlighted by the focus group participants. Referrals for restorative justice may be made by either party at any time (RJC 2015) so the offender may still be on licence, they may be in custody or they may be "already sort of out there living normal lives again" and they would then "facilitate the meetings to start the RJ process" (AVSSFG5).

ARJOL2 explained that referrals for restorative justice could take place days, weeks, months or even years after an offence has taken place, although under the Victims' Code a victim must be told about their entitlement to engage in restorative justice within five days of the offence taking place (MOJ 2021d). As the Restorative Justice service was within the Victim Support Service this entitlement was covered by the Victim Support Service who would often write to victims to inform them of their Rights under the Code.

The restorative justice referral form asked for the referrer to provide a brief overview of what had happened, and for serious and complex cases ARJOL2 would explore the police systems further to have a better understanding prior to making contact with the victim. However, they did explain the importance of the victim sharing their story for themselves and so when contacting them ARJOL2 would say "I've received a referral, I've got an overview of what's happened, would you wanna tell me in your words what you've gone through and how you feel". ARJOL2 explained that they do this "because then people aren't feeling judged and they feel that there's a sort of set process that's happened, they are just offloading what's, what's happened".

For victim initiated referrals ARJOL2 would contact the victim within a week of receiving the referral to explain who they were and what restorative justice was, ensuring that they understood that it was a voluntary process for all parties involved. Once the victim confirmed that they were interested in pursuing restorative justice, ARJOL2 would work on locating the offender. This would include identifying whether the individual was in prison or the community, if they were in the community whether they were under probation supervision, and making contact with them to explore whether they would be interested in participating in the RJ process (ARJOL2). For offender-initiated cases this would be the other way round, ARJOL2 would need to locate the victim. Once contact had been made with both parties and they were agreeable to moving forward ARJOL2 would either take the case forward as a facilitator, or allocate it to two of their volunteers.

What Support is Offered

Support offered as part of an RJ intervention may be letter writing, shuttle mediation or a face-to-face meeting (AVSSFG5). RJ facilitators needed to consider if the interest was genuine (AVSSFG5), with ARJFG6 explaining that it was also important to ensure that there would not be any harm caused to either party through the RJ intervention:

> It depends really on how the victim feels and obviously the offender as well, you know they wouldn't feel comfortable meeting face-to-face, they just want to write a letter, so we would then facilitate all that.

RJ facilitators started by meeting with the victim and explaining the RJ process to them (AVSSFG5, ARJFG6). ARJOL2 explained that there were scripted questions which facilitators would use to guide the conversation including asking the victim to share what happened, how they felt at the time, their feelings at that time and what it was they would like from the RJ intervention. Facilitators would then be assessing the victim, considering their understanding of the process, how they had processed the harm which they had experienced and whether it would be appropriate to move the RJ process forward, based on the victim's journey at that time (AVSSFG5). If following this initial meeting the facilitators are satisfied that there would be no harm and they did understand what was involved the facilitators would meet with the offender and complete the same process (ARJOL2).

ARJFG6 explained their role as:

> To discuss the harm that's been caused to them, with them, to help them prepare to have that conversation with the offender about the impact of that and then what, if any, reparation or restoration can, can come from that, whether that's an apology or just having that voice, being able to say to the person that has harmed them 'You harmed me, this is the impact that it had on me', so it's helping them, using the RJ process, work through those thoughts and those feelings to get to a point where they are comfortable and confident to speak to the offender to get their voice heard without re-harming them, without wanting to do it for the wrong reasons.

RJ facilitators were required to consider not only what victims were saying they wanted, but also what they actually needed as "they may think they're in the right place to do it, or the right time, but they may not be" (AVSSFG5). ARJFG6 explained that "a victim may be too angry or they may not be ready but it's making sure that we are there to help them have a conversation, not talk for them, but prepare with them so that they know kind of what they're gonna say, what the key points that they want to say are".

RJ facilitators were always undertaking dynamic assessments with their co-facilitator throughout the process:

> Those kind of assessments happen all the way through, it's not kind of a once and tick box and it's done, because then we'd meet the offender ... wherever that needs to be depending on where they are in their journey and then do a similar assessment about their understanding of the process ... their reasons for wanting to do it, and similarly with the victim is it gonna do more harm than good either to the victim or to the offender (AVSSFG5).

In describing their processes, ARJFG6 explained that they were:

> Quite wide assessments that we do, and it's all part of, like AFG5 said, making sure that the process doesn't do more harm than good and making sure that they understand their opportunities for feedback, understand all the way through that it's voluntary ... so that we know what their expectations are and,

not necessarily manage those expectations, unless they're completely unrealistic, but it's about preparing them to get the best out of the meeting, to be as prepared and comfortable as possible.

When it comes to preparing, "we would meet with the victim and offender as many times as necessary to prepare them for a panel, so there are no surprises at the panel … and so that they feel as comfortable as possible" (AVSSFG5). RJ interventions were about more than simply setting up an RJ conference, "a lot of thought goes into where, when, what support networks people have got, what's gonna happen to them afterwards" (AVSSFG5).

One of the benefits to meeting often with the victim prior to the conference taking place was that the facilitator could become very familiar with what the victim hoped to get from the meeting and prompt during the conference should they freeze or forget what they wanted to say, something both AVSSFG5 and ARJFG6 discussed during our focus group. RJ is all about the preparation for and then the conference itself. After undertaking feedback with the victim following the intervention the facilitators' involvement would come to an end.

RJ facilitators were only involved for the duration of the intervention, they worked towards the panel meeting, went through the panel, obtained feedback afterwards and then moved on. ARJOL2 explained that every case is unique but that it would probably take "six months to a year to do a full-blown conference … 'cause it takes months and months to get people in the right place to do it". During the focus group AVSSFG5 and ARJFG6 explained that it could move at relative speed, or it "could take a year and a half" (ARJFG6):

> In theory you could do one in about a month but that would have to be where all of the organisation was in place, everybody was available, everybody was in the right place in their heads and emotionally (AVSSFG5).

The RJ volunteer participants shared examples of cases they have worked on with ARJFG6 sharing an example of when the process took too long for one party who withdrew their consent after they had moved on with their life, showing how long the process can take and that it is a voluntary process, if one party no longer wishes to proceed then it must draw to a close:

> I've also had ones where it was really, it looked like it was going to be a really good one on a burglary, and we, the victim was really hit by it because of the sentimental things that had been lost and then just keep needing more time and then what it, it took so long that the offender went do you know what, no. They came out of prison and they were really ready to do it, and all the signs were there … the offender was a mother and it was about the sentimental value of children's clothes that had gone and things like that. When she first came out of prison she was really ready, we felt, but what happened was the victim, because it had affected her so much kept having, I suppose relapses and then by the time, about 8-9 months later after the offender had come out

of prison her life had moved on and she wasn't interested anymore … but, because it's a voluntary process and you have to be sensitive to people's needs, as frustrating as that was … it was what it was.

AVSSFG5 shared an example of when they needed to manage the expectations of three victims – the direct victim and her parents who were all in different places:

The mother and the daughter both were really keen and they were the ones that wanted us to get involved but the father was dead against it. But because the mother and daughter needed to give it a chance we, we went to the home and we had an initial meeting with the victim, you know, in front of her mother and father, and it ended up, sort of, kind of backfiring a little bit with the, you know, with the father being there being so angry, he was still in an angry stage. So we had to manage kind of three different expectations. And that was, that was quite difficult really, it's, you know, you're in the middle of a family argument you know. Because it's not just the victim that, you know, is involved, it's, it's the whole ripple effect it has on, on other family members. So it's, it's treading very careful when you're there, you know, to talk about the offender.

This is an interesting example of managing the expectations of different people because here the direct victim was the daughter, but her father's (indirect victim) opinions were obviously quite strong and in direct opposition to the wishes of the direct victim. This is also something that victims wishing to engage in restorative justice have to deal with, friends and family having opinions on their decision to engage with the individual who has caused them harm which may not be positive, an issue that was shared by ARJP6 who had people telling them that the perpetrator was looking to play the system and reduce their sentence.

The Impact of the Covid-19 Pandemic

At the start of the Covid 19 pandemic the RJ Hub stopped undertaking RJ interventions. Although they continued to accept new referrals into the service, they did not process them during that time (ARJOL2). Staff at the hub split home and office working so the service would be maintained and staff were able to physically social distance in the office "but volunteers, … we were put on hold until they could sort out a way forward … and I, I didn't get any cases during lockdown" (AVSSFG5). After around 6 or 7 months (ARJFG6) they started to explore virtual interventions, as this was how most people were now working, and using this "as another way to communicate" (ARJOL2). Consideration needed to be given to additional risk assessments and "what the pros and cons of virtual panels were", but none progressed to that stage during lockdowns (ARJFG6).

ARJFG6 explained that there were concerns to moving RJ interventions online, such as considering the IT skills of individuals participating, location of facilitators, dealing with any technical difficulties, and the importance of body language – something that was focused on in their facilitator training – and not being able to fully see this if meeting virtually. In addition, it would not be possible to know if someone was having technical

issues or if they chose to leave the call for whatever reason, and there would be no control over others entering the room or if someone was to ring the doorbell (Archibald et al. 2019, Deakin and Wakefield 2013). ARJFG6 therefore felt there was a need for additional guidelines around how the meetings would run.

Interestingly, whilst the focus group participants felt there were a number of concerns to be considered in moving to virtual communication, ARJOL2 seemed to think it was all very positive and that people were more set in their ways pre-Covid. ARJOL2 explained that "restorative justice needs to be more open and flexible to the way that people wanna communicate and I think Covid has allowed that sort of confidence and flexibility … rather than just saying you've got face-to-face, you've got a letter facilitation, or shuttle, we could be a bit, lot more fluid with that", giving the example of how an elderly victim who was unable to leave their home could attend via Microsoft Teams with their supporter, whilst the facilitator could attend with the offender. This would, however, risk the balance of the neutrality of the restorative justice facilitator if they were sat with the offender and not between the two parties.

The volunteers reported conflicting views on how the structure and processes worked for them. ARJFG6 struggled with IT issues, they could only access systems from a police station, which meant an overreliance on administrators keeping them updated and being "drip fed information". ARJFG6 explained that "it would be nicer to feel more involved" and this would potentially mean they would be allocated more cases as well. AVSSFG5 had no access issues though and was able to log in regularly which they found helped them to stay in touch, as well as visiting the office from time to time (pre-Covid) to keep themselves in touch with the staff which was easy for them to do as they lived local to the office. It is unclear, however, whether the concerns highlighted came about because of the Covid-19 pandemic and the way of working at that time, or if this was already an issue that people simply accepted, driven by the ways of working and exacerbated by the Covid-19 pandemic because people could not just pop to the office if local/convenient, or it had to be really important/urgent to go out during the pandemic. It is then unsurprising that they have so few volunteers if they are not working in an inclusive, easily accessible way. These concerns were not raised by the Coordinator.

ARJOL2 shared that they were unable to show any outcomes during the Covid-19 pandemic, something they would usually be doing but that this was understood by the PCC, although this was not raised by APCC. A change in the RJ Coordinator who oversaw all the cases and referrals also meant a reduction in referrals, so as Covid-19 restrictions eased, referrals came through in "fits and starts" (AVSSFG5).

Area A – Home Protection Agency

The Home Protection Agency comprised four members of staff: the Strategic Lead, the Operative Lead and two staff members who worked directly with victims. Support for this agency was split between AHPFG1 and AHPFG2 who covered the entire geographical area, including two cities and multiple towns, villages and rural areas, providing support to victims of burglary. They did not have any volunteers. The Strategic Lead shared that

they were responsible for managing the rest of the team, accounts and sourcing funding (discussion around funding can be found later in this chapter). Their role also included marketing, day-to-day data entry and speaking to people on the phone (AHPSL1). The Operative Lead explained that their role was to act as "the first point of contact ... fielding all enquiries that come into us" (AHPOL1). The staff participants from the Home Protection Agency were AHPFG1 and AHPFG2, two members of staff who attended separate individual interviews, as opposed to a group interview. This was due to the fact that they were heavily impacted by the Covid-19 pandemic and were alternating being furloughed at the time of interview. It was therefore not possible to interview them together. The staff from the Home Protection Agency explained that they provide "moral and physical support" to the victims they support (AHPFG1), as well as "peace of mind" (AHPFG2) whilst APCC described it as "a target hardening service for elderly victims of burglary" with AHPFG1 and AHPFG2 doing "a physical, visual audit of the house, they put window locks on, new locks, deliver reassurance, pre-Covid had a lovely cuppa tea with whoever's there and to be honest a lot of these people don't meet, they don't get out and about as much so they deliver emotional support as well". The assumption that the burglary victims "don't get out and about as much" is one that perpetuates that idea of the ideal victim (Christie 1977) as elderly and lonely and is likely not how the victim participants viewed themselves.

Referral Process

The referral process for the Home Protection Agency was somewhat different to other agencies involved in this research. When an individual contacts the police to report a burglary/break in at their property, the details are recorded on the police system. The Home Protection Agency had access to that system and as AHPFG2 said, they were able to "mine" the database to identify individuals who "hit the criteria for the age range that we visit" (over 60 years) (AHPFG2), running reports to generate a list of victims who may require support (AHPOL1). The Home Protection Agency would then contact the victim to see if they would like a visit from AHPFG1 or AHPFG2. AHPSL1 described their first contact with "elderly people" as "a courtesy call" when they would notify the victim that the police had been in touch, tell them a bit more about the service and ask if they would like a visit. In addition to this, individuals could self refer and external parties such as Age UK and social workers could make referrals directly to the Home Protection Agency when they were working with vulnerable individuals who would benefit from support (AHPFG2, AHPOL1). Referrals could also be received from agencies working with victims of domestic abuse such as IDVAs, Women's Aid, local authorities and housing associations (AHPFG1). When someone was referred into the Home Protection Agency, they would try to contact the victim within 48 hours of receipt of the referral (AHPOL1, AHPSL1).

AHPSL1 explained that there were two cohorts offered support by the Home Protection Agency: "elderly victims or 60+" and domestic abuse victims, although the funding they received from the PCC was for their work with elderly victims. Referrals for domestic abuse victims would "usually come from IDVAs and police officers" (AHPSL1), and as part of their role AHPSL1 would consider whether they met the criteria and explained "I kind of feel that if there's children at risk it's not their fault what's happened and if it

doesn't fit our criteria because of that I don't want that to be a barrier for us not to go", going on to say "but at the same time you still need to be careful because of your resources, you can't say yes to everyone, and sometimes it might be a case that we refer them on to somebody else rather than us dealing with it". It is interesting to note that even where there is risk to an individual, agency resources have to be considered and could result in a referral onto other services, although it was unclear what potential services could help in this situation.

What Support is Offered?

Specialised support for victims of burglary is hard to find. Generally support is offered via generic victim support services. When confirming that the police will now attend the scene of every home burglary, the National Police Chief's Council also shared examples of proactive work being undertaken to address burglaries including the "We don't buy crime" initiative in West Mercia where residents can sign up for forensic property marking kids, funded by the PCC, and includes crime prevention advice; a burglary prevention campaign in the West Midlands with bespoke information leaflets for local areas and crime prevention advice leading to a reduction in burglaries across the area; and in Surrey they have launched a "Suspicious Activity Portal" where residents and communities can upload CCTV, dashcam and doorbell camera footage of anything they feel may be suspicious in their community when no crime has been reported but could help to identify suspicious behaviour linked to burglary (NPCC 2023).

For the Home Protection Agency in Area A support for victims of crime "starts from that first referral, from that first phone call", when they would obtain information about "what the incident is, the age of the victim, their circumstances" (AHPOL1). AHPSL1 shared that when explaining the service to victims "what I try generally to tell people is that if we do come and visit you the [staff member] can explain about all sorts of ways of staying safe, not just at home but … when you go out shopping or online … or rogue traders or door step scammer or, or you know anything really". This support went far beyond that of simply visiting the scene of a burglary and giving practical support and advice to a victim of crime. The support then provided by the Home Protection Agency consisted of one visit to the victim at their home, ranging in duration from around 45 to 90 minutes (AHPFG1 and AHPFG2).

AHPOL1 shared that when they would have their first call with the victim there could be a variety of reactions to the support being offered "it can be very raw and emotional for people, so some people get upset, some people are angry about what's happened … some people just want to put it behind them, they don't want any more support, and then obviously other people are very grateful to hear from us and sort of welcome that support". If an individual declined a visit then the Home Protection Agency would offer to signpost to anything else they may need and would let them know "it's an open-ended invitation", or if they accepted they would advise that AHPFG1 or AHPFG2 would be in touch to schedule a visit (AHPSL1). This does, however, beg the question as to why the visit was not scheduled during that first phone call. From the agency's perspective it is understandable – if AHPFG1 and AHPFG2 manage their own diaries and are travelling over a large area then they can better plan their days and visits, but if the office had

access to those diaries it would not matter. However, in having AHPFG1 and AHPFG2 call to schedule the appointment themselves this adds an extra step and potential delay to victims getting access to the support that they need and does not prioritise victim needs and swift support.

During the visit the staff member would discuss what had happened with the victim and any concerns they may have, before setting out to help secure their property:

> When I get there have a little chat with them, find out what their concerns are and basically find out what's happened ... have a little look round, see if there's any advice I can give 'em there and then to help their security and then we go into sort of more physical security (AHPFG1).

AHPFG2 explained that a significant part of the visit was around giving further advice and guidance as "we tell 'em how they can change what they do" (AHPFG2) to reduce their chances of future victimisation, but AHPFG2 also stressed the importance of simply speaking with the victim stating that "the biggest part of it comes down to talk to 'em and, you know, working out their frame of mind". In addition to giving advice and guidance, the staff at the Home Protection Agency gave practical support during a visit, including fitting alarms, doorbell cameras if requested, early warning devices and dummy cameras (AHPFG1 and AHPFG2). This is important support as research has found that "one of the most effective ways of providing emotional reassurance is to provide practical help, in particular by securing the home to prevent re-victimisation (Victim Support and Direct Line 2005) and is support that generic support services, such as Victim Support, could not provide and would refer on to charities such as Age Concern and Help the Aged.

AHPSL1 tried to explain that the work they did aimed to give the victims they supported "peace of mind" as the work undertaken by AHPFG1 and AHPFG2 would:

> Secure their homes ... I guess that gives them peace of mind ... we might have changed the lock, we might put a chain on ... and it just acts as a little reminder that they must do all these things because sometimes these people are victims because they failed to do something ... if they don't put the chain on then it might not make a difference so they have to be able to do that as well so by seeing, having a presence there and having somebody explain to they why they should do it, when they should do it, it's affirmation to them really and it perhaps sinks in a little bit more ... sometimes it's not until something actually happens to you that you do actually take more notice (AHPSL1).

Although this was likely not the intention, there is a degree of victim blaming here in pointing out that "sometimes these people are victims because they failed to do something" (AHPSL1) and meet some of the characteristics of the typology of victim proneness developed by Sparks (1982) of Precipitation (encouraging their own victimisation by not doing something), Facilitation (putting themselves at risk by not doing something) and Opportunity (providing the opportunity to break into their property by not doing something). Furthermore, given the age of the victims being considered to

be 'elderly' they could further be considered to be demonstrating Vulnerability (having a perceived vulnerability due to their age) and Impunity (being seen as an easy target because of their age) (Sparks 1982).

APCC was well versed in the support provided by the Home Protection Agency explaining:

> We have a target hardening service for elderly victims of burglary. We have the loveliest two men … and they go out and they do a little, they do a physical, visual audit of the house, they put window locks on, new locks, deliver reassurance, pre-Covid had a lovely cuppa tea with whoever's there and to be honest a lot of these people don't meet, they don't get out and about as much so they deliver emotional support as well.

APCC has added a degree of vulnerability to the victims being supported here by assuming that they need emotional support to be offered to them by the Home Protection Agency because they did not get out of the house, as opposed to considering that that support could have been provided by their in house Victim Support Service, a service (as discussed above) that offered face-to-face and over the telephone support. It seems to be expected that this should be provided by the Home Protection Agency, whose support was more about the practical than emotional needs, rather than utilising the hub model and increasing the reach of the victim support services within Area A. This then begs the question of why not simply add the support by the Home Protection Agency into the Hub, where they are thoroughly trained in providing emotional support and could be trained to deliver practical support, ensuring that victims of burglary are receiving emotional support from fully trained professionals.

As well as providing support to victims, the Home Protection Agency would also refer on to other agencies to help support victims with AHPFG1 sharing:

> I've got a gentleman at the moment who's been a victim of a rogue trader on three separate occasions now, mainly because of the condition of his garden, so I've referred him to one of the local charities who are actually going out … to clear all his garden for him and remove all the rubbish for him.

This shows that the support needs of victims are not always specific to the victimisation event but also other things happening in their lives or other struggles they may have in their lives and that referrals may need to be made to external agencies to provide that support. It also highlights a failure in statutory services – if an elderly individual is struggling to care for their home then statutory support services should be stepping in to support them as needed. Instead, here, it has been the repeated victimisation of an individual that has led to a victim support charity referring them on for support.

When enquiring as to whether they were ever called upon again by victims to provide support because they had been the victim of a further burglary at their home, AHPOL1 shared that they "could probably count … on one hand" how many victims had had another incident at their property since support was provided by the Home Protection

Agency, with AHPSL1 sharing that the re-victimisation of individuals supported by them was less than 1%.

For AHPFG1 and AHPFG2 support for victims was all provided during one visit, without the need for further ongoing support, which is quite different to support provided by other victim support services, including those participating in this research, who have all shared that the duration of the support offered may vary, but it would often be more than one engagement with the victim. The staff in the office, however, had a different view, considering their support to be "indefinite" as they were happy to help someone again down the line if they needed support finding a trade, installing a doorbell camera, or if batteries on window alarms needed replacing (AHPOL1). This is an interesting view to take because these cases were not kept open indefinitely, and they did not have infinite funding available to do this for everyone and would perhaps be better considered as the service being available down the line to provide help and guidance and practical support if needed, although these do sound like the kind of support which may be available from charities such as Age UK. Considering their support to be indefinite was also in contrast to the other agencies participating in this research who were keen to ensure professional boundaries and a clear exit plan to ensure victims were not coming to rely on them for support.

The impact of the Covid-19 Pandemic

From the interviews with the staff at the Home Protection Agency, it is clear that the Covid-19 pandemic had a significant impact on the work of the Home Protection Agency in a number of ways. Firstly, with more people at home most, if not all, the time, it stands to reason that there would be a reduction in home burglaries, although AHPFG1 reported an increase in shed and garage burglaries. A further impact of Covid-19 restrictions was that the two staff were unable to deliver support to victims of home burglaries as they only provided in-person support. With the Covid-19 restrictions in place both staff members were furloughed for 12 weeks in the first lockdown, and at the time of interview were still being furloughed at times as they would "just monitor the diary day-by-day" (AHPFG2). In addition, AHPFG2 explained that they had had cancellations as "people don't wanna invite people into, you know, outsiders into the house with the Covid going on", and this sentiment was echoed by AHPOL1. AHPOL1 explained that as a result of the Covid-19 pandemic they were unable "to operate for periods of time" as AHPFG1 and AHPFG2 were likely considered in the same way as tradespeople entering the home, as opposed to as key workers, offering a support service to victims of crime. This is in direct contrast to the Sexual Violence Agency in Area B who were considered key workers and continued to provide in person support throughout the pandemic (BSVSL4), but in line with the Domestic Abuse Agency who provided support remotely and stopped meeting face-to-face, unless they were able to do it within the confines of the Covid-19 rules (BDASL3). It was in line with the approach taken in Area A though as face-to-face support was also stopped by both the Victim Support Service and the Restorative Justice Service.

According to the UK Health Security Agency (2021) "charities and works delivering critical frontline services" and "those working with ... victims of domestic abuse" were considered to be essential workers during the Covid-19 pandemic (further consideration

of which can be found in Chapter 7. It could be argued that the support provided by the Home Protection Agency fell under this umbrella, rather than "handyman". However, as the support officers were visiting individuals (over 60s) who were classed as more vulnerable to Covid-19, needing to enter the home and experiencing cancellations when they were open, this is perhaps why they took this stance as the support for elderly victims (installing doorbells and window alarms) may not be considered critical, coupled with the reduction in break ins due to everyone staying at home during the pandemic, meaning there would have been far less need for support.

AHPOL1 felt that the Covid-19 pandemic "was addressed by the Trustees and [the strategic lead] very successfully, we got all our PPE and we put all our risk assessments in place, so the challenge was met but then there's only so much you can do, you can't physically carry out the work that's required at a property due to a lockdown, we don't want to break the law obviously". The carrying out of work at a property does seem to be why they considered themselves to fall under the trade umbrella, rather than critical frontline services.

With the reduction in burglaries, the Home Protection Agency saw an increase in domestic abuse and doorstep and telephone scams with people at home more (AHPFG1, AHPSL1). The Home Protection Agency were therefore prioritising domestic abuse referrals when open due to their high risk (AHPFG2). In addition, with the agencies who would usually support victims of doorstep and telephone scams not visiting because of Covid-19, e.g. Trading Standards, AHPFG1 explained that they were "doing more of their job for them".

Interestingly the Strategic Lead for the Home Protection Agency did not feel that the Covid-19 pandemic had had an impact on their service:

> I don't think it has really. During the first lockdown we stopped working but that was mainly because we ... were really rigid with the rules and the restrictions and everything ... I think the general kind of consensus was between myself and the Trustees, we did have several meetings during the lockdown, that we were working towards how we open the [Home Protection Agency] and continue to work following the restrictions and the rules because, you know, people do need our service.

However the fact that the service did shut down shows that the Covid-19 pandemic did have a significant impact on the service as they were not offering any support at all for a time and there likely were victims in need of support during those first few weeks for break ins which had taken place before the Covid-19 lockdown. When they did reopen and start providing support to elderly victims of burglary they did not have enough cases for the frontline staff (AHPFG1 and AHPFG2) to return full time and they were required to alternate their days between working and being furloughed. When it came to actual service delivery though, they were still providing the same support and guidance, following government guidelines around PPE etc.

As these interviews took place after the main Covid-19 lockdowns the staff were only just getting back to offering support to victims of burglaries and break ins, with the work having "tapered off a bit" with referrals coming through in "fits and starts", but, as AHPFG2 said, "it just enables us to visit people sooner rather than later". As they reopened and returned to providing in person support, AHPSL1 noted that they had worked "obviously with PPE, social distancing, following as many of the guidelines as possible, not being in the home for as long and all of these different things". During this time they also started to provide well-being bags with a leaflet about what they did, a laminated card with emergency numbers people may need, some track and trace slips, small packets of biscuits, tea, purse bells, key ring and cable ties, together with a donation slip so individuals could donate to the service if they wished (AHPSL1).

The section above has highlighted how each of the services in Area A work, from the paid staff and volunteers, as well as the operative and strategic leads, helping to better understand the referral process for each agency, the support offered by each agency, and the impact of the Covid-19 pandemic on their services. It is interesting to note that the common theme across all three agencies in Area A is that victims of crime need an independent, non-judgemental individual to talk to about what has happened, someone who understands the situation and is able to provide advice and, sometimes, guidance. This is something all three agencies shared that they do, although restorative justice a little less so when it comes to advice and guidance owing to their need to remain an impartial party. It does, however, remain unclear whether this support needs to be offered by specialist commissioned services, or if it could simply be offered by a generic agency.

The same consideration will now be given to the three participating agencies from Area B – the Domestic Abuse Agency, Restorative Justice Service and Sexual Violence Agency.

Area B

BPCC was not in post at the time that the development of the current structure of victim support services was taking place. They did, however, confirm that a large scale needs assessment was commissioned to identify what was needed within Area B. At the time support services were already in place providing support in relation to sexual violence and generic victim support. The needs assessment identified that whilst there were agencies in place providing support to victims of sexual abuse this did not cover the entire PCC area, with a number of gaps identified. The specification developed therefore required full coverage of Area B, leading to the individual agencies coming together to form a consortium which delivered support to victims of sexual abuse across the whole of Area B. This therefore meant that the same agencies were providing support before the changes took place and afterwards. Whilst BPCC was unfamiliar with the steps taken previously to support victims of domestic abuse or the outcome of the needs assessment, it does look to have followed a similar trajectory (see Methods and below).

The needs assessment also identified a need for "an all crime support service" which, at the time, was being delivered regionally by Victim Support (BPCC). Victim Support were

again commissioned by Area B to continue to deliver that "all crime support service" but this time on a localised level, meaning the same service, again, was continuing to deliver support to victims of any crime. Like Area A, they had identified the need for the service to be delivered on a localised level but unlike Area A they were happy for this service to continue to be provided by a national agency. Victim Support declined the opportunity to participate in this research. Whilst Victim Support declined to participate, BPCC did share "I call 'em so fondly our catch all … if a particular crime spikes that means there is now a need. We've got a Victim Support contract who have been really flexible and can provide that immediate emotional support in time". This is an interesting view to take because it does mean that there is general support if a particular crime increases, and perhaps they could then look to commission a specialised service if there continued to be that need and they are being utilised to pick up all victims of any crime within Area B. In addition this contract included a Communities Worker to engage with hard to reach communities, highlighting an identified need, but as Victim Support did not engage in this research this was not explored in more detail.

BPCC shared that they were "servicing more victims than ever, we have built, brought new services in in terms of that criminal justice and victim journey". However, from the information gained from the three services who participated in this research and knowing that there was a fourth service, it does not appear that new services have been brought in, rather they have expanded the reach of their current services by setting up specifications that require services to cover the whole of the PCC area (sexual abuse support services), introduced a community worker to engage with communities (Victim Support) and set up a Triage Agency (domestic abuse services, discussed below). These may be considered new services in terms of when the contracts started because they moved to PCCs and bids had to be made for these, but there is nothing to suggest that these are not simply the same providers providing the same service under a different banner.

Area B – Domestic Abuse Agency

Four staff members from the Community Outreach Team participated in one focus group from the Domestic Abuse Agency. The Community Outreach Team consisted of 16 frontline practitioners, trained IDVAs referred to by the Domestic Abuse Agency as Domestic Abuse Practitioners, or DAPs (BDAOL3, BDASL3). The DAPs within the Community Outreach Team "look after victims who are on the standard or the medium level of domestic abuse", whilst those on the higher level of risk would be supported by the IDVA (Independent Domestic Violence Advisor) team (BDAOL3, BDASL3). Generally, the difference between the two roles, in addition to the risks, is that the IDVAs "spend a higher proportion of their time on safety planning, risk management and supporting with the criminal justice system" whilst DAPs "spend a little more time on emotional support and onward recovery work and support with family courts" (BDASL3). In addition to the focus group, interviews were conducted with the Operative Lead (BDAOL3) – the Community Outreach Domestic Abuse Practitioner Service Manager, the manager responsible for overseeing the Community Outreach Team – and the Strategic Lead (BDASL3) – the Director of Adult Services.

BDAOL3 explained that the role of the DAPs was "to support and guide and walk alongside victims of domestic abuse at whatever point in their journey they happen to be at", whether that is "starting to recognise and understand" abusive traits within their relationship, or someone seeking support in moving past historic domestic abuse. Focus group participants from the Domestic Abuse Agency shared that they "provide victims with emotional support, safety advice and help them to move forward with their lives and rebuild their lives following domestic abuse" (BDAFG3). The rest of the focus group agreed, with BDAFG4 adding that they help with sign-posting to other agencies and developing a support plan, drafted by the DAP, to help them and the victim they are supporting to personalise an action plan to address identified risks and a safety plan detailing the advice they have given to the victim (SafeLives 2015c). In addition, BDAFG6 shared that they help to educate victims, "teaching them about what domestic abuse looks like" and listening to and empowering them (BDAFG5). BPCC explained that through the domestic abuse service there was "a real collaborative approach with our local authorities", with a strong board and team to deliver the service across Area B.

Referral Process

There were a number of different routes into the Domestic Abuse Agency. In addition to creating a domestic abuse consortium (see Methodology), the consortium agencies also created a Triage Agency for their referrals (BDAFG6, BDASL3). Here, referrals for support could be made via the Triage Agency who would pass the referral on to the relevant agency's Duty Team (BDAOL3, BDASL3). The Duty Team would make contact with the victim to undertake the initial assessment. Once completed the individual would be passed to the relevant team, based on the completed risk assessment. This potentially meant that a victim spoke to two different teams before they were allocated to a practitioner, having to repeat their story on multiple occasions before finally receiving support. This does seem excessive as the full assessment should have been completed by the Triage Agency who would then refer on to the relevant agency for allocation. Standard or medium risk cases were referred to a Domestic Abuse Practitioner (DAP). High risk cases were referred to an IDVA. As the participants in this research were DAPs, supporting standard or medium risk victims, the focus will be on their work, not the IDVA team. It is unlikely all areas of England and Wales follow the same structure of supporting high risk as well as standard and medium risk cases in one agency and are likely to have generic agencies to support with the lower risk cases. In Sheffield, however, DACT[5] have been commissioned to provide support to standard and medium risk victims of domestic abuse and is "unique to Sheffield" (Potter 2017:2). In Area A, for example, specialist support was available for high risk victims who would be passed to the relevant agency, whilst medium and standard risk victims were offered support by the Victim Support Service (AVSSOL3), a generic, not specialised, service.

When receiving referrals, the Domestic Abuse Agency confirmed that most of these came through the Triage Agency, although occasionally individuals who had used the service before would get in touch directly (BDAFG6, BDAOL3, BDASL3). The majority of the referrals coming through were self referrals, and BDAOL3 explained that they had "a

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[5] Drug and Alcohol/Domestic Abuse Coordination Team (Sheffield DACT 2023)

higher success rate with self referrals as opposed to referrals in from other agencies", although BDASL3 highlighted that they had a good relationship with the police and would receive regular referrals from them. One reason for this was highlighted in the focus group when BDAFG6 explained "we can get repeat referrals because the second that people mention domestic abuse they automatically refer in some way", therefore failing to really consider the needs of the victim, instead opting for a tick box exercise of having made a referral for support, even if they do not actually need it. BDAOL3 explained that sometimes it may be seen by other agencies as a way to "fob clients off" when an agency has done everything they can do to offer support from their own services e.g. substance misuse services, but more is needed so they refer on to domestic abuse services. This is interesting to note as it seems other agencies think making a referral for domestic abuse support, just because domestic abuse happened at some point, is all that is needed to 'fix' everything, even though there are generic support services and local authority support available. In this research the victim participants referred into the service were all in the process of working through domestic abuse and it was therefore appropriate for a referral to be made. It is a concern that agencies are not necessarily considering the needs of the victim, rather just which agency they can send them to when they are unable to help them and would be an interesting area to explore for future research around domestic abuse.

New cases were allocated to DAPs by the Operative Lead, who would then undertake regular case reviews (every six weeks) with the DAPs (BDAOL3). These case reviews formed part of a wider one-to-one with practitioners when BDAOL3 would also 'check in' with the DAPs, "how they're doing and check on their health, well-being, their needs, make sure that those are all being met" before working through their caseload.

Once allocated, the DAP would make contact with the victim within 48 hours (BDAFG3, BDAOL3, BDASL3). When allocating cases BDAOL3 considered practitioner capacity, geographical location and the support needs of the victim. BDAOL3 explained that their team was made up of individuals with particular strengths e.g. practical or emotional support, as well as "good all rounders who can do a bit of both". This would also be taken into consideration when allocating new referrals. Working within the DAP team were specialist DAPs who would be allocated cases when a specific need had been identified such as housing. So, for example, if an individual disclosed during the initial assessment that they needed housing support, they would be allocated to a Housing DAP (BDAFG3).

What Support is Offered

The support offered by the Domestic Abuse Agency was dependent upon the needs of the individual seeking support. Upon allocation of a new referral, DAPs would attempt to contact the individual that same day, or the next day at the latest (BDAOL3, BDASL3). The initial contact with the victim was about the DAP introducing themselves and finding out from the victim what they want from the service (BDAOL3, BDASL3). BDAOL3 explained that there is no need to "retraumatise them by asking them to explain the whole situation again because obviously we had access to the case notes ... we've had access to the DASH", so instead they asked if anything had happened since the initial assessment was completed and let the victim lead the conversation. Whilst it is positive

that they were not asking the victim to explain the whole situation for a third time, it would likely have been beneficial for the DAP to be the one who the whole story was explained to, rather than the Triage Agency or Duty Team as they would be the ones taking the support forward. What DAPs would do, however, was get as much information as possible from the victim about what they wanted to happen next, as well as sharing what it was they were able to do (BDAOL3, BDASL3). This would all help to form the support plan, for which the DAP and the victim were jointly responsible but may have differing levels of input at different times (BDAOL3). For example, a victim may not be "in the right headspace to be able to do very much and they need a high level of support", whilst in contrast another victim may "want to be very proactive and their way of coping with it is to get on and keep busy doing stuff for themselves" (BDAOL3). It is positive that they were able to adapt to the needs of the individuals they were working with to ensure that they received the support that they needed, rather than forcing them to take an active role when they could not or doing things for them. The DAP would also take the time to set the boundaries of their professional relationship, highlighting that any safeguarding concerns would be acted upon and ensuring the victim was aware of when they would not be available and agreeing frequency of contact (BDAOL3).

BDAFG6 shared that they started their first conversation with the victims they supported by asking "what has happened, what brought you to us" to better understand their situation as, if it was a social services referral they would know they needed to work with the victim around domestic abuse, but if they said "because he is abusive" they would look at techniques to help with grounding and anxiety. This shows that not all victims are seeking the same support and present with varying needs (Goodey 2005).

BDAFG3 explained that sometimes the individuals they were working with were unaware of what domestic abuse actually is, so "we talk them through the cycle of abuse, the power of control wheel" and would refer onto their Healthy Relationships workshops. These workshops were "a four-week course where they learn about boundaries and what's acceptable within a relationship, what's not acceptable ..." (BDAFG3), aiding in their understanding of what has happened to them. This highlights the need for more education for the public about what domestic abuse is, how to spot the signs of domestic abuse and where individuals can seek support in these situations.

BDAFG3 explained that a lot of their work involved signposting to other agencies for specialised support away from the victimisation, for example to help support with any debt, mental health needs etc., as well as "walking alongside them" (BDAOL3, BDASL3) to help them work through their support plan. Furthermore, they might advocate on their behalf, for example in social care meetings if their children have child in need plans etc. or provide support at court (BDASL3) but, as BDAFG3 explains:

> It literally depends on what the client needs and sometimes, sometimes they don't need anything, just need emotional support and someone to listen ... in that case we can do that ... it depends as well if they're still in the relationship, we can provide support for them to move into a refuge, and do extensive safety planning with them as well, if they are still in that abusive relationship ... sometimes they just need some reassurance and someone to give them

general advice ... if they've got a child arrangements hearing that's gonna be held ... they can kind of sometimes say what is the process, how long does it take ... a lot of the time I say well I had a previous client ... this is the process that they went through, it's likely to be similar ... they can talk to you and they know that you've got the experience of being with people that have been in similar situations to them (BDAFG3).

The support highlighted here by the staff from the Domestic Abuse Agency is the support which victims have reported as finding invaluable – "independent advice, information and emotional support that they would not otherwise have received" (Madoc-Jones and Roscoe 2011:1).

The Domestic Abuse focus group participants seemed to agree that the role they played was often reassuring, but also offering an opportunity to the victims they supported to have a rant and get their frustrations out to someone who simply listens:

I think it's quite, you know, reassuring sometimes, that you can have a rant, get off the phone and then you can go on with your day and like you've dealt with that, you know, so like it's not like lingering over, I think that's a big thing (BDAFG4);

I would say for lots of them it's a safe way to just rant and get it off their shoulder, how they feel, what they do, what they want to do, even if it's just the frustration ... I had a client who was swearing because that was the way she expresses herself, she wasn't swearing at me, it was just the frustration and she said I can't talk to my family because they will be asking me why you haven't left, why you haven't told us, because we don't ask them *why*, we just listen to them and tell them what they can do, they find it more easier to talk to us (BDAFG6).

It is interesting that the DAPs highlighted the importance for victims of having someone they could rant to about their situation and any frustrations they may have, providing emotional support to the victims. This need was highlighted as being addressed by most of the agencies through their own support services, rather than referring on to another support service, counselling service, talking therapies service or Samaritans-type service.

The DA focus group participants explained that there was no average period for which they provided support to victims of domestic abuse and that they worked to the needs of the individuals they were supporting. BDAFG5 explained that "every case is unique", so cases could be open to them for a variety of reasons, with BDAOL3 pointing out that "generally speaking it's between three and six months but for some clients it can be much shorter than that and for some clients there is a need for it to be much longer than that". The response here was again different from the Strategic Lead who felt eight to 12 weeks was "about right if everything goes according to plan" (BDASL3).

BDAFG6 shared that their longest case was 13 months as a result of delays due to the Covid-19 pandemic, and shared the same concerns as BDAOL3 and BDASL3 around attachments:

> We try to support them for as much or for as long as they need to but we have to keep in mind they don't get kinda attached to us, so they don't rely on us always being there for them. So you know we will support them with everything they need … but if we are noticing that there is like attachment, they getting too much relying on us which is not healthy for them, we will then try to kinda ease it off and work towards closing as we don't want them to become dependent on our support.

BDAOL3 posited that their "firm belief is that anything over sort of eight, nine months, becomes counter productive because they become too reliant upon that support and they, they build that attachment to the support worker … apart from getting them free from abuse, apart from educating them around what abuse is and coming to terms with it, the biggest part, the biggest impact we can have on somebody's life is in empowering them to move away from it and part of that empowerment process means being able to stand on your own two feet" and this meant not replacing the abuser with a support worker whom they became dependent upon (BDASL3). Attachment to support workers was also highlighted by the Victim Support Service in Area A as something they had to work hard to avoid, and with the increased support times as a result of the Covid-19 pandemic, likely increased the risk of this happening, particularly given the fact that the pandemic forced people to stay at home (potentially with the perpetrator) and kept them isolated from their usual support networks, likely increasing their reliance on their support worker.

BDAFG3 explained that "sometimes people will come in and out of service depending on what their needs are", using the example of working with someone and then closing their case whilst awaiting a court date, and then reopening to provide support in the run up to and during the court case. Movement in and out of the service was not uncommon, whether that was because of the type of relationship the victim had with the abuser i.e. parent child, partners etc. or because they found themselves in another abusive relationship as "the evidence suggests that people go round that cycle of abuse up to 50 times before they're at the point where they actually want to break free and they cannot take any more and they know that they have to change" (BDAOL3):

> I've had a client that I worked with many years ago and again she came into service this year. I think it just depends on the situation … this was her son, I feel that it's harder for them to move away from that because of that maternal instinct so she's been in and out of service a lot (BDAFG5);

> It's very common that they come back into service, whether that's because they're in a new abusive relationship or whether they're still suffering the effects of, for example, housing issues from the previous relationship (BDAFG3);

Part of our support is to try and work with them around that so that they notice the warning signs of when they first meet somebody new so that they don't end up repeating that abusive relationship again, but it does happen (BDAFG5).

BDASL3 shared that often they received repeat referrals with the victims they supported becoming repeat victims:

Quite often they might work really hard to be strong and empowered and to move on on their own, but quite often they might go straight back into another relationship that's not, not healthy, being on your own sometimes is a bit too scary and any relationship is better than no relationship for some clients that aren't quite ready ...

In similar circumstances, BDAFG6 provided an example of an individual they worked with who "couldn't break the trauma bond". Here, rather than finding themselves in a new unhealthy relationship, as described by BDASL3 above, they would seek support after an incident, but then return to the perpetrator because they temporarily improved their behaviour, before returning for support when they became abusive again:

After every incident she will call, she wanted support, she wanted help with putting things in place but because the perpetrator started behaving the way she always wanted him to so she just slid back into it. So then she gone back, everything was 'okay' for a while, things got worse, she call us again. So it was the trauma bond that kept her in it and she keep calling us back. But she's been closed [fingers crossed motion], she's been free from him for over a year so hopefully that will actually be the last time ... first it was working to get her to understand it, then how to deal with it, then to break it and the whole process just took little bit longer for her (BDAFG6).

BDASL3 explained, however, that even if someone had "a little wobble" they could always call and get in touch with their practitioner for some "reassurance" and if it was more serious than that a new referral could be opened, although there was no guarantee they would be allocated the same practitioner but, if they just needed a 'chat', "we're happy for them to do that, 'cause sometimes just that chat can help them, you know, be strong enough to keep going".

The Impact of the Covid-19 Pandemic

The Domestic Abuse Agency staff focus group participants shared that the Covid-19 pandemic had had a significant impact on the service they provided. The biggest change for them was not being able to meet with the individuals they supported face-to-face which was the first thing they would arrange during their initial call with victims (BDAFG3, BDASL3). These appointments would take place anywhere, with the Domestic Abuse Agency having spaces in other buildings/businesses/agencies so it was not evident that an individual was going to meet a domestic abuse agency about domestic abuse (BDASL3). In adapting to these changes most contact was telephone based, but BDAFG6

shared that for those who still preferred face-to-face they would use Microsoft Teams or Zoom to "try to have that kind of a personal touch with them". In addition to the support they provided moving online/to telephone calls, the Healthy Relationships workshop and any others moved online too and they were forced to give up face-to-face drop ins at their local community locations (BDASL3). One has to question why, when the Sexual Abuse Agency were considered to be key workers, the Domestic Abuse Agency were not considered key workers too, especially when the UK Health Security Agency (2021) highlighted "those working with ... victims of domestic abuse" provided an essential service and therefore were essential workers during the pandemic.

The focus group participants agreed that the changes forced on them by the Covid-19 pandemic actually made their way of working better:

> There's nothing that we can't do over the phone to be honest that we were doing face-to-face ... we've learnt from lockdown that we can support clients, and we can, we can support more clients in a day by doing, by working remotely than we were when we were going to, doing home visits, obviously because we haven't got the drive time now ... (BDAFG5);

> You get so much more done working from home and I never thought that that would be the case ... at the end of the day you can look at your caseload and you've contacted 10 people but when you're doing visits ... the maximum visits we could ever do was three in a day ... (BDAFG3).

These examples support the BDASL3's view that:

> Covid has made us look at that differently because I would have said to you before Covid that the face-to-face erm work is, is the best way for the majority of our victims, but actually I think Covid has shown us that for a good proportion of our victims actually telephone support is better for them, it's meant that they've been able to engage more, they're more happy to do it over the phone initially. Still, there's still face-to-face that's needed for some clients and that's fine, we do it very much on a needs led basis, but we have been really surprised.

The benefits highlighted by the focus group of remote working as a result of the Covid-19 pandemic are benefits to the staff for their ways of working and management of their workload, rather than benefits to the victims they are supporting. However, BDASL3 highlighted that many victims were happier with support over the telephone, although they did not talk about the risks to those still living with their perpetrator in being forced to engage remotely with their DAP. Furthermore, if victims are only offered one method of communication they will say that they are happy with it, especially in the midst of a global pandemic when there was a stay at home order in place.

As referenced by BDAFG6 above, the Covid-19 pandemic had a significant impact on the courts leading to long delays which meant that cases were being held longer whilst awaiting a court date (BDAOL3). In some cases this led to individuals deciding not to go

through the criminal justice process due to the cancellations and significant delays being experienced (BBC 2020). These delays were not limited to England and Wales, with similar delays experienced in the US in relation to family proceedings where domestic abuse cases were considered "non-essential" (Klein 2023). In contrast, Godfrey et al. (2021) posit that measures undertaken in the courts as a result of austerity were in fact the underlying cause of delays and the build up of a backlog, with the Covid-19 pandemic "merely extending the scale of the crisis" (p1).

BDAFG4 had only ever worked in this role during the Covid-19 pandemic and had found it to be "really really efficient" and could not imagine working the way the service did pre-Covid as "it just seems like you'd just be in the car the whole day. Like it's just crazy", and BDAFG5 agreed that that was how they spent their time, eating lunch in the car with BDAFG3 explaining it was difficult to book a full day of appointments in just one town so there was a lot of driving around. As above, this highlights the benefits of the changes required as a result of the Covid-19 pandemic to the staff and helping to make their days more manageable with less travel and able to handle more cases as a result.

It was felt that the Covid-19 pandemic actually had a positive effect (BDASL3) and helped the staff to be more efficient (BDAFG5) and more focused on the individuals they were supporting (BDAFG6) and allowed them to increase their workload as they were able to support more individuals remotely than face-to-face (BDAFG3). This also made things better for the agency itself as "they haven't gotta pay like the fuel costs that they were previously paying" BDAFG3). This also highlights an area for future consideration when it comes to commissioning and the targets being set by the PCC in the future in terms of victims being supported by the Domestic Abuse Agency as, from the feedback here, they could manage more cases because there was less travel and it was all being done remotely. If they were to go back to face-to-face support, they would be unable to meet the needs of as many victims, from the agency perspective.

However the larger concern here is that these advantages/benefits are from the agency perspective – the time and workload of DAPs, as well as money saving as a result of not needing to drive around, but what were the benefits of this change for domestic abuse victims? Did they feel they still received a good, full service? Is there more that can be offered face-to-face than over the telephone? The focus group participants did not think so as they claimed that they were able to deliver the same service over the telephone as they had in person. The Victim Support Agency in Area A offered hybrid support when needed pre-Covid, with volunteers meeting victims who it was considered would benefit from support face-to-face and telephone support was otherwise offered by coordinators, and this seemed to work so are domestic abuse victims missing out by not having a hybrid approach? Madoc-Jones and Roscoe in their research which took place 10 years before the pandemic (2011) identified the largest issue with telephone-based support being that they would have preferred to interact with the individuals supporting them face-to-face.

These points were also highlighted by BDAOL3 who explained that:

> Covid's probably taught us that going forward we could continue with, with the way we do things at the moment … a mixture of face-to-face and telephone support so I think it's really important to have that initial meeting with the client face-to-face but prior to Covid … the majority of our visits were face-to-face … when Covid hit all of our visits were over the phone and I do not think it's impacted across the board, I mean there have been pockets of different cases where you know it has been a barrier, and you know there have been occasions where we've even had to sort of make the exception and see somebody face-to-face but I think looking at it overall the phone support has worked well for our client-base and we will continue to do it that way.

The focus group participants did, however, acknowledge that domestic abuse was worse for many because of the Covid-19 pandemic, which increased the number of individuals needing support as a result (BDAFG6, BDASL3), as well as making it more difficult for victims to come forward (BDAOL3). This, as a result, led to increased funding for domestic abuse support meaning that they were able to increase the number of practitioners, albeit on short term contracts (discussed further in Commissioning) as well as expanding communication methods to implement a web chat function (BDAOL3, BDASL3). BDASL3 pointed out "we've benefited more than we've lost through Covid" which they certainly did financially, but it is unclear whether this was also the case for victims of domestic abuse seeking support. The victim participants in this research seem satisfied with the service they received, but it is also unlikely the agency would have put forward any service users who would not provide a positive perspective of their work.

Area B – Restorative Justice Service

Five volunteers participated in two focus groups from the Restorative Justice (RJ) Service from a total of around 40 volunteers. Two participated in the first focus group, and three in the second. In addition to the five volunteer participants, interviews were held with the Operative and Strategic Leads. The RJ Service in Area B had two Operative Leads (Coordinators) who were jointly responsible for "allocating, risk assessing and training … recruiting new facilitators and training them", as well as awareness raising, supervising and monitoring their active cases and supporting and managing the volunteers to deliver the service (BRJOL1, BRJOL2). In addition to the two Coordinators, interviews were also held with two Strategic Leads. BRJSL1 was the maternity cover for BRJSL2, the Manager for the RJ Service. As BRJSL2 returned before fieldwork was complete they were also offered the opportunity to participate in this research. Interestingly, because the RJ Service was an in house service BPCC had minimal contact with it because they were not contract managed in the same way as other service providers.

The RJ manager role included managing staff/volunteers, ensuring good relationships with stakeholders, awareness raising, increasing referrals, recruiting volunteers for the facilitator roles and sharing case studies (BRJSL1). BRJSL1 explained that this role would usually include the training of volunteers, however, this was retained by the manager on maternity leave who was running the training as part of their keeping in touch days.

BRJSL2 explained that they were originally employed as a Development Manager to develop RJ practices within Area B in 2014. This started as a small pilot with the RJ service in house within the PCC's office, before the service was rolled out across the whole of Area B, and with this the role changed to Service Manager as they moved away from developing a service and into an established service (BRJSL2). BRJSL2 explained that their role was to "strategically manage the service, including budgets and managerial oversight, as well as case managing 'the most complex and sensitive cases'".

The focus group participants from the Restorative Justice Service in Area B described their role as being "to work with and support victims to facilitate communication within the RJ framework" (BRJFG9).

Referral Process

Referrals into Area B RJ service were made by a variety of different agencies including the police, probation, prisons, youth offending service, victim support services, local authorities, housing associations, schools, Victim Support, fire service, support groups and partner agencies, as well as self referrals (BRJFG1, BRJFG7, BRJFG8, BRJFG9, BRJOL1, BRJOL2, BRJSL1, BRJSL2), with BRJFG1, BRJOL1 and BRJSL2 pointing out that the majority of their referrals were made by the police.

Referrals for restorative justice would go into the office where "they set up the case and they do their research, they have access to police records so they can look to see if there's any markers, anything we should be aware of and they, they set up a case … on MyRJ [case management system]" (BRJFG8, BRJOL2, BRJSL2). Research for referrals would take up to a month to be completed, depending on the source of the referral, seriousness of the offence and information provided (BRJOL1). This also included undertaking the initial assessment (BRJFG7, BRJFG8, BRJFG9), with the team looking to make their initial contact within three days of the referral (BRJOL2). Once this was complete, "the difficult bit happens because they send out an email to all of us trying to get us to volunteer to do it in the main … now and again if they think that someone's got a particular skill that would work well with a case they might offer it to someone but I think in the main it's offered for anyone to say yes I wanna do it" (BRJFG8).

Whether an individual volunteers to take on a case depends on a variety of factors including "their current workload, their other commitments, some of the volunteers are working so they have to fit around their regular working hours, others are retired but still may have other commitments" (BRJFG2). In Area B RJ facilitators worked in pairs, so there would always need to be two individuals volunteering to take a case (BRJFG2, BRJFG8). Once these were in place they would work together on next steps and progressing the case further (BRJFG2). No agreed timescale was shared of how quickly this would take place, and BRJSL1 shared their frustration about this being a voluntary role as, at the time of interview, they had eight cases awaiting allocation and no volunteers, meaning the paid staff would need to take them all on, on top of their main duties/responsibilities. Usually one facilitator would lead, with the other acting as co-facilitator, however as BRJFG7 explained, "depending upon the working relationship that

you have with people that can be, that can be much more even than it sounds I think, it can be much more of a partnership" (BRJFG7).

Within the Restorative Justice Service there was a small group of facilitators who were trained to handle what they referred to as complex and sensitive cases, which may have included:

- Actual, or threats of, serious or sexual violence;
- Vulnerable participants for example, vulnerable because of physical disability, age or mental impairment;
- Domestic abuse;
- Harm caused over a substantial period of time (over three years);
- More than three perpetrators and/or more than three victims;
- Risk of continuing harm or intention to cause further harm;
- Multiple agencies (RJC 2016b).

Four of the participants in this research were trained for these cases (BRJFG1, BRJFG9). These cases may take longer (two years plus) to conclude owing to the complexity of what had occurred and "are generally high level crime, murder, rape, crimes at that level" (BRJFG1) and these tended to be offered to specific individuals or the smaller group, rather than all participants (BRJFG9).

What Support is Offered

In starting an RJ intervention the facilitator's first job was to make contact with the victim to establish their interest, whether the case was victim or offender initiated. This first contact also afforded facilitators with the opportunity to find out more about what happened from the perspective of the individual being referred in: "you pick the phone up and if you've got too much information it actually biases you when you're talking to people, or it can do, so just saying 'tell me how', 'tell me what's happened from your point of view'; is much more effective than having a police report that gave you what everybody did on the day in question. 'Cause people's perceptions of incidents are completely different and that's what we deal with, the perceptions that people have about what happened to them" (BRJOL2). BRJFG7 further explained:

> That first phone call from us is critical I think to the introduction of the service and it's the potential that our, the RJ process might offer for them … I think quite often the offer of RJ that's been made by a third party is not necessarily very helpful because they don't actually understand what RJ is so when we come along and speak to somebody I think that first conversation is really about exploring what RJ is and how they understand it to be actually, in their own minds really (BRJFG7).

BRJFG7, BRJFG8 and BRJFG9 all agreed that this initial call and understanding of the victim's expectations was crucial, because, as BRJFG7 pointed out, these can change:

"And their, their expectation changes ... in between the referral being made, the contact being made by the offence and then contact being made by the facilitator their life has moved on and their expectation from the process, 'cause that can be quite a little while potentially, their expectation might be quite different to what it was when they first thought that this might be something that they would want to do. So it's really, I think BRJFG8's right, I think it's, the, the first, the initial contact is really about hearing what they think RJ can do and is for them.

Not only could the expectations change, but victims may have unrealistic expectations which need to be managed throughout the process, for example considering what may be possible, what may not be possible, and what needs to be done to get there. BRJFG7 believed that victims were often let down because of a lack of communication, so it was important that communication was always ongoing, that when facilitators would be in touch was agreed and that facilitators made contact as promised, even if it was just to update that there had been no progress:

I think we would often say oh we'll give you a ring in two weeks, three weeks, whatever so that they know what that gap's gonna be. And sometimes it is a matter of ringing someone and actually saying I've nothing really to tell you because whatever, 'cause someone's moved prison and we can't find out who their prison officer is or whatever but just keeping in touch so that they know that you've not forgotten them so that's, that's important too (BRJFG8).

Whilst this is positive from the RJ facilitators in setting expectations from the start and ensuring they are in regular communication with victims, it does highlight the negative role the criminal justice system plays in this in that it can take weeks, even months to locate an offender to see if they would be open to engaging in restorative justice, further lengthening the time the victim is waiting, unsure of what the outcome will be. It was important to stay in touch as throughout the RJ process facilitators were risk assessing the suitability of the intervention. As neutral participants, RJ facilitators "don't work for the victim, they don't work for the perpetrator, their role is the facilitation of the communication, rather than being there to support either party" (BRJSL2).

BRJFG7, BRJFG8 and BRJFG9 were all trained to handle complex and sensitive cases, and had all been volunteering as facilitators for two to three years before they started working on these. With the complex and sensitive cases they took a different approach, which BRJFG7 summarised best:

We really mainly just introduce ourselves in a complex and serious case and say this is who we are, this is where we come from, is there anything you might wanna know so it's a very, very much simpler, less intense if you like, if that's the right word, less comprehensive introduction perhaps at the beginning and we will just take it a very small step at a time, not least of all because we don't really know anything about what's happened (BRJFG7, agreed by BRJFG8 and BRJFG9).

BRJFG9 pointed out that they recognised that in these situations they were often "dealing with traumatised victims" and BRJFG8 added that "we would be quite explicit in that first meeting with a complex and sensitive case to say this is going to take some time so that they're not expecting something to happen fairly quickly". Furthermore, BRJFG7 added:

> We are all humans, we all understand what hurt and pain and trauma mean, we may not have experienced it to the extent that some of these people have but that actually does play a part in the way that we work ... [BRJFG8 and BRJFG9 agreed].

When asked about the support offered to victims during an RJ intervention, BRJFG1 responded:

> I'll be honest Katrina, I don't like the word support because we don't support them in a sense of, it depends how we interpret that. But we don't support them, I think BRJFG2 will agree with this [they did agree], in the way that to give them a different level of support from that which we would give the offender. We're there to get them to find the answers to the questions that they're looking for ... Now if you mean do we support them in terms of finding those answers out through the offender, yes we do. But we don't go to the victim and say look we're here to do every single thing we can for you ... that is not our role, we don't support in that way, okay" (BRJFG1).

What they would do, however, was signpost victims to further support, utilising the staff in the office to help advise on appropriate support:

> We try to make sure that they have external support, they have, they're working with agencies, you know support agencies because obviously we're not professional counsellors ... that's not our role in supporting them ... it's keeping them informed, keeping them up-to-date, managing their expectations ... not support for what they've been through or how they're managing that, that's not, that's not our role (BRJFG9).

Whilst the focus group participants in Area B were very clear about their boundaries for support and that they did not support victims but helped them to find answers, Area A did not describe it in such a way, although that does not mean that they did not feel the same way, perhaps it is just that they simply used the word support to describe what they were doing. From Area B, however, it did appear that they had to rely on the office to help them to refer on to other services who may be able to offer support, potentially highlighting the need for a hub to act as a central place where the RJ facilitators could have referred/passed them back to if support was required.

Everything that happened as part of the process leading up to the final intervention in restorative justice was seen as important (letter, conference etc.). As BRJFG9 points out:

> The first meeting is key ... we work in a pair ... we always do a lot of preparation, we always have a script because we need to ensure that ... we're explaining

the right things, we're asking the right things to get the most information out of somebody ... It is a risk so we want to ensure that they understand restorative justice, and how it can work for them ... to talk about how they think they can benefit and therefore do they want to engage and what are the risks of engaging, what are the risks if it doesn't happen and it doesn't go ahead ... it's very much a risk assessment on the first meeting and you know whether they're suitable, we can always deem that somebody is not suitable and that may be ... for the sake of their mental health they're not suitable and that they are potentially at risk. Or ... that we think they're doing it for the wrong reasons ... it's trying to judge what their motivation is and ... that's a difficult one because who are we to say that's a, that that motivation is yeah the right motivation to want to do this and that's an inappropriate method for want, to want to do this. So that's a difficult one for us I find.

This is problematic as, whilst it is important to be constantly risk assessing and considering motivations as they relate to causing harm to an individual or others (as set out in the RJC Practitioners Handbook 2016d), what would be the right motivation to engage in restorative justice, and who gets to make that decision? You have to wonder whether there is potentially even too much preparation going into the restorative justice intervention, cutting out some who may benefit because they are not considered to have appropriate motivations.

Restorative interventions discussed by participants in the focus groups included letters of apology, shuttle and restorative justice conferences. Letters of apology would not be sent to the recipient, rather the facilitator would go through this with them. This then raises the question as to whether this is even part of a restorative practice approach as it is not bringing those harmed together with those who caused the harm, it is bringing the harmer and the facilitator together and it is bringing the harmed and the facilitator together. It does not allow the harmed to actually consider the letter and the words written if it is simply read to them, nor does it allow them to play a part in repairing the harm if they are just being read a letter of apology, rather than a shuttle discussion back and forth (RJC 2016a). In this case there is a degree of restorative practice as the harmer looks to repair the harm caused, but the victim is not empowered or given a voice to share their views or contribute to repairing that harm. During the Covid-19 pandemic facilitators would share the contents of the letter over the telephone. The length of time these took to reach a conclusion could vary, but as BRJFG7 said, "as long as necessary" [BRJFG8 and BRJFG9 agreed]. This sentiment was echoed by BRJOL1 and BRJOL2 who cited the complexity of a case as influencing the duration. This is because "we need to make sure that people are in the position where the meeting will be of benefit to them and will cause no harm" (BRJOL2). As discussed above, this does highlight significant power being in the hands of the facilitator in making these decisions as to whether a restorative justice intervention would be of benefit to an individual, but they must also consider the risk of harm. This is why facilitators are important as part of their role is to ensure that they are moving "at an appropriate pace" (BRJSL2). Letters of apology during lockdown were often being done alone, rather than in pairs. During this time the timeframes for most letters of apology were often quite short, with BRJFG1 sharing that one took less than one week:

> It was three ambulance, paramedics, who were verbally assaulted by an offender who had to write a letter of apology to all of them. He was on drugs at the time and came off the drugs very quickly and realised the terrible harm that he'd caused and, I phoned up the three paramedics, we spoke, I spoke to the offender, he wrote a letter, a four page letter full of remorse and apology which … we made the victims aware and they were happy, all concluded within a week (BRJFG1).

Whilst it is interesting that the letter of apology was able to be completed in a week and the individual who caused the harm expressed remorse for their behaviour, as discussed above, this is not the aim of restorative justice and it does not sound as though the harmer had much choice, he was to write a letter of apology and he did. There was minimal input from the individuals harmed who did not get to respond to the letter, something which may have benefited both them and the harmer. BRJFG8 explained that they were able to go through the whole process of a letter of apology in a day which is unusual as usually there would be some back and forth by the facilitator between the parties which can take time to orchestrate with them needing to meet the victim and the perpetrator before the letter can be written. In this case, telephone calls allowed them to make contact with both parties on the same day, before the offender wrote, and shared, their apology that same day, which was then quickly relayed to the victim:

> We were doing it by phone and I phoned the victim and talked through what we can offer and you know basically what would be, what do you want in the letter of apology, I then phoned the offender who was actually a, a young man, a boy and so I spoke to Mum and I spoke to him, Mum and the boy, after we talked about what to put in the letter they sort of worked through and drafted the letter and she emailed it to me and so I then rang the, the victim and read the letter, they were more than happy with that, job done … that's the other extreme, in a day. And I think to be fair that was partly because of Covid because if, if we weren't in lockdown we would have gone to see both parties and the chances of seeing them both in the same day was probably quite slim.

Here they were clear about what was asked of the victim and what they wanted to see in the letter of apology, but there was no follow up or response to that letter. As the RJC (2016) explains, "restorative justice brings those harmed by crime or conflict and those responsible for the harm into communication, enabling everyone affected by a particular incident to play a part in repairing the harm and finding a positive way forward". In the example above they were able to contribute at the start, but there did not appear to be an opportunity for further engagement once the letter had been written. BRJFG7, BRJFG8 and BRJFG9 described the work they did as putting together a jigsaw puzzle. As a result they did not talk about the offence itself and what happened, but they did talk about the impact and the effect it had on them:

> We don't talk about the offence [with the victim or perpetrator], we might talk about the impact of the offence, how it has affected them you know and how it has affected their family and their relationship with their family, quite often that's been damaged, and we talk about … how they think restorative justice

can work for them going forward but we don't, we don't go you know tell us what happened then, we don't ... it could be months, it could be, you know, a very long time and you just get, you get little, you get drip fed little bits about the offence and the incident but we don't specifically ask about it, we piece it, we piece the picture together but we're not, it's from information we're given, it's not that we're seeking the information (BRJFG9).

BRJOL2 explained that on completion feedback evaluation forms were completed – although it was unclear from the interviews whether these were completed with or independently of the facilitators. If they were completed with this would potentially impact the responses as participants would be unlikely to write anything negative about the person/experience with the person present. Individuals requiring further support at this time would be signposted to appropriate services (BRJOL2).

The Impact of the Covid-19 Pandemic

Throughout the Covid-19 pandemic the restorative justice service's biggest concern was for "the safety of all the staff, that's their prime consideration, that we are safe" (BRJFG1). During this time they were therefore "using whatever safe method of communication we can" (BRJFG1) because, as BRJSL1 pointed out, a lot of their volunteers were retired and therefore shielding as a result of the pandemic. BRJOL2 explained that they would share ideas for working during the pandemic with their volunteers to gain their feedback as to whether they thought this would work, as well as making an effort to stay in touch through weekly informal video calls and weekly email updates.

The Covid-19 pandemic meant no face-to-face work was taking place. BRJFG2 pointed out that some advantages of this included the reduction in travel expenses, as well as the fact it had allowed them to do a lot from the comfort of their own home, as well as perhaps taking on more cases because they did not have to travel around the county to meet with people. However, as BRJSL1 pointed out, they "had to quickly transition to a digital world" and they were held up by the fact that it took them three months to get Microsoft Teams and they were having to rely on people using Zoom or Whats App to communicate via video calls.

There were, however, also disadvantages to this. Not being able to have face-to-face contact meant it was not possible to read people's body language (BRJFG9) and, when they did start to meet face-to-face they were having to spend money on venues to do initial visits they would not have done previously to secure a space for a period of time (BRJSL1). In addition, "there's an element of, it's almost rudeness" (BRJFG7) from people not turning up for scheduled appointments:

> It's brought an element of frustration as well because although we have the opportunity to conduct conversations like we're having today I've had, I have current cases where, where people who should know better keep letting me down ... because it's not a personal, you're not knocking on somebody's door, that fact that they've not bothered to say I can't come to the meeting 'cause it's online, they just leave you hanging (BRJFG7).

This led to BRJFG8 pointing out:

> I suspect that we are probably more of a reality if they've actually met us, they've seen the person, rather than a person that they see on screen who with the best will in the world isn't, isn't quite a person you know.

Whilst face-to-face meetings had to be put on hold, it was still possible to prepare for conferences remotely, it just meant waiting for a time when in person conferences were possible again (BRJSL2). BRJFG2 shared that one of their cases had "dragged on and on because of Covid and the fact that we weren't able to get together" whilst BRJOL2 shared having prisons on complete lockdown due to the Covid-19 pandemic had a significant impact initially, but they felt that as courts moved to video links so did the RJ service. The prisons however did not and BRJFG7, BRJFG8 and BRJFG9 found that as a result of prisons continuing to remain in lockdown there was a backlog of video call meetings and they were faced with having to wait months to have a video call meeting with a perpetrator if they were in prison, further holding up their cases. None of the participants shared whether this had a significant impact on victims waiting to progress, simply noting that they made an effort to stay in touch with all parties they were engaging with to keep them informed at all times.

BRJSL2 returned to work sometime after the initial Covid-19 lockdown measures so was unable to personally comment on the impact of the pandemic, however they did share that on their return everyone seemed to have adapted to the changes required and that there was mixed feedback from volunteers – some were eager to get back to face-to-face meetings, whilst others saw the benefits and wanted to keep some of the virtual elements of working.

Area B – Sexual Violence Agency

Historically, Area B had multiple agencies offering support to victims of sexual abuse, each covering a different geographical area, leaving gaps in support in some areas (BSVOL4, BSVSL4, BPCC). When the commissioning of victim support services moved to PCCs the Sexual Violence Agency, together with two others working in Area B, decided to form a consortium to bid for the service, working together to ensure that between them they would cover the whole of Area B (BSVOL4, BSVSL4). They were successful and have continued to work together to deliver support for victims of sexual abuse across Area B. BPCC spoke strongly about how their sexual violence consortium was "really leading the way" in the support provided to victims, the measurement of their outcomes and constantly looking at ways to improve the support they were providing. The Sexual Violence Agency was the lead within the consortium and agreed to their agency participating in the research.

Four staff members therefore participated in individual interviews from the Sexual Violence Agency in place of a focus group due to their workloads and management not wanting to risk impacting service delivery by having them all in a focus group at the same time and therefore unavailable to the victims they support. All four participants made

broadly similar contributions about the Sexual Violence Agency. They shared that they support victims with "emotional and practical support" (BSVFG12) "through the criminal justice process" (BSVFG10), "to provide them with independent information and emotional support" ... to "make sure that they're well-informed and support the options and choices that they make. It's really important that we give that control back to them" (BSVFG11), whilst BSVFG13 talked about the importance of empowering the individuals they supported "to regain some power and control".

In addition, interviews took place with the Operative and Strategic Leads for the Sexual Violence Agency. The Operative Lead was the individual responsible for assessing referrals into the First Contact Team (discussed below) before passing onto the relevant sexual violence agency support centre (BSVOL4), whilst the Strategic Lead was the Service Manager (BSVSL4).

To aid the referral process the consortium established the First Contact Team (BSVFG11, BSVOL4, BSVSL4). This team was the first point of contact for referrals, before passing on to the relevant agency (BSVOL4) (discussed further below).

Referral Process

Referrals into the Sexual Violence Agency had to first go through the First Contact Team (BSVOL4, BSVFG10, BSVSL4). The Coordinators within the First Contact Team would then look to undertake a number of tasks upon receipt of the referral and as part of their assessment of the referral (BSVFG13, BSVSL4):

> ... contacting the referrer, gaining further information if not been given that information, ascertaining what support they needed, then making contact with the client, explaining regarding counselling, ISVA [Independent Sexual Violence Advisor], informed choice session ... the whole basket of support that's available ... I would then be doing assessments, explaining what the service is available for them, if they have other needs, looking at them holistically ... have they got debt problems, housing problems, are they in crisis, are they at risk, who's working with them, who could be offering them support ... and then once we've done what we've done we then pass it on to the relevant worker for that centre (BSVOL4).

Unlike the Domestic Abuse Agency where the victim would have to explain their story to the referral centre and the individual agency for assessments before they were allocated a support worker, here the First Contact Team obtained as much information as they could from the referrer before making contact with the victim to identify any additional needs, as well as explaining the support services available to them from the service. Once they had a better understanding of the victim's needs they would then pass them on to the correct centre for support. This way of working almost shadows that of the hub model whereby a referral is made into the hub, information obtained and then referred to the relevant agency for support and means that the case is received by the support worker with all the background information and needs identified from the start.

Referrals into the Sexual Violence Agency would come from a variety of sources including Sexual Assault Referral Centres (SARCs), GPs, mental health, drug and alcohol services, social care, sexual health, dentists, schools, colleges, solicitors, football coaches, Refuges, Probation, NHS, organisational referrals, parents and self referrals, but the majority of the referrals received came from the police (BSVFG10, BSVFG11, BSVFG12, BSVFG13, BSVOL4, BSVSL4).

These referrals would come through the secure NHS mailbox, the helpline number or their online referral form (BSVOL4, BSVFG11). Non-emergency calls to the police were sometimes referred so that support could be offered at the earliest opportunity (BSVOL4). In addition, Area B had a direct referral pathway from the police whereby "every rape that is reported in [Area B] is referred to us the next working day, even before an officer is allocated to the case" (BSVSL4). Individuals would then be contacted within two working days of receipt of the referral, although this target was increased to five to 10 days during the Covid-19 pandemic (BSVOL4). If there was any pertinent information missing from the referral the First Contact Team would make contact with the referrer to go through this because "I know this person is already going to be traumatised and I don't want to bombard with questions that [the agency] already know" (BSVOL4), highlighting the importance of thorough referral forms in reducing revictimisation and helping agencies to be prepared.

Following the initial assessment individuals were placed on the waiting list for counselling, if needed, and those with open police cases or who had "expressed an interest in gaining a bit more information about the police, the process or just has some general questions really regarding what it's like for the police investigation and how to report it" were referred onto the ISVA (Independent Sexual Violence Advisor) team at the relevant centre (BSVFG12, BSVFG11).

When an ISVA first met with a victim they went through their own assessment of the individual's needs:

> We will go through a risk assessment with them, we will talk about confidentiality, safeguarding, we will give them information around the criminal justice process, answer any questions and concerns, look through and support them with their options and also look at other needs so mental health, housing, sexual health ... (BSVFG11).

This is not a repetition of the work already undertaken by the First Contact Team, but rather is starting to move into the role of the ISVA (guiding through the criminal justice process) and looking at anything that may have changed since the referral was submitted.

What Support is Offered

For those yet to make a decision about reporting what had happened to the police the ISVA would do an 'Informed Choice' session where they would "sit there with them and talk them through what could happen if they reported, just so they've got all the

information there to sort of make their own decision if they want to report it or not" (BSVFG10). The aim of this session was to give the victim as much information as possible to help make an informed decision, whilst managing their expectations:

> We tell them what, what basically the realities are of how many cases we know from our experience do actually make court, a lot of people unfortunately feel, you know, in terms of time that once they've reported to the police, six months they're gonna get a trial ... we know the realities are likely to be at least two years if not longer ... (BSVFG11).

One thing BSVFG13 highlighted they did was "make sure that an ISVA is something they want" before they started working with them and then going onto the next steps, using their internal ISVA Toolkit which provided a visual step-by-step of what happened when these types of offences were reported, something they had found individuals they had supported had found useful to use as a reference tool.

BSVFG13 described the ISVA role as one where they knew what it was the victim/survivor they were supporting wanted, and then empowering them to tell their ISVA "this is how I work best" to help them know how best to approach supporting them.

BSVFG13 explained how, following the agreement of the victim, they would make contact with the officer in the case and could act as a link between them, if they wished. The initial call would be an introduction and finding out the status of the case, before feeding back to the victim and devising a support plan. This "is really tailored to the individual's needs" and would take into account the frequency of contact, whether they only wanted updates via the ISVA or the police, and any other needs they had:

> I've got women who for their own various reasons do not wanna speak to the police at all. Reported and then they're like I want minimal little contact, BSVFG13 can be my single point of contact, which is in the Victims' Code that they're entitled to (BSVFG13).

The ISVA would then support the victim throughout the criminal justice process:

> It may be that they're considering reporting to the police but maybe they want to go and have forensics taken, if it's a, a very recent rape, within seven days. And we can talk through what that means, what's gonna happen, what takes place there, go and support them if they need us ... if they want to report to the police we can support them with that and if they then provide their first account and an ABE, which is the Achieving Best Evidence video interview[6], we can be with them but obviously not in attendance when they give their evidence, we will be in a, a room close by to provide emotional support. Before and afterwards (BSVFG11).

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[6] The Achieving Best Evidence interview is a video interview conducted with vulnerable witnesses with the view that it will be played in court "as evidence-in-chief" so that the victim/vulnerable witness does not have to give evidence in court (MOJ 2022a).

This support would also involve helping them to understand what was going to happen, the intimate questions they may be asked, to help prepare as best they could, "and at the end of the day they may, you know, decide that actually it's not for them at this time or they just need a bit of clear head space, they may need some more sort of emotional support first" (BSVFG11).

Support would then be ongoing for as long as it was needed:

> We check in with them like either fortnightly, monthly, just to check in and obviously try and build that sort of bond 'cause obviously we need them to like trust us and feel comfortable which obviously in that sort of situation is probably hard for anyone to try and trust anyone ... we build that with them ... basically we just watch them make their own decisions ... from when they come in ... to when you finish with them ... the growth in them and the change is, yeah. It's quite rewarding (BSVFG10).

There had also been occasions where individuals had decided not to progress with the case and returned down the line for further support, this could have been for a multitude of reasons including not being ready, further incidents or other trauma bringing these to the fore (BSVOL4, BSVSL4):

> It may be a further incident, it may be that they withdrew from our police case initially, they didn't feel emotionally ready to support an interview, provide an ABE or support an investigation. Occasionally the police have come knocking on their door and reopened their case because somebody else, another victim's come forward (BSVFG11).

For BSVFG10 there was no average or agreed time to provide support to the victims they worked with. BSVFG10 shared that their colleague had been supporting a victim for around four years because their court case had been cancelled and postponed on three occasions, whilst they themselves were supporting someone whose investigation began in 2017. They supported them in court where there was a hung jury and a new court date was set for 11 months later, by which point the case would have been going, with on and off support, for five or six years. BSVFG10 explained how difficult this was for the victim and at one point they did not know if they could go through it again. Having a hung jury was "disheartening" for the victim and, with so many cancellations, "we don't even know if when it comes to it if they'll wanna stand up and do it now" (because they "have that hanging over them" for such a long time) (BSVFG10).

Similarly, BSVFG11 shared "my longest running case has just been to trial about six months ago, and that was five, I want to say five, five and a half years to get to court from report. But the average is sort of ... about two, two and a half years". BSVFG11's example does appear to be at the extreme end when considering the median length of time for cases of rape (1020 days) and sexual assault – excluding rape (695 days) in 2021 (Home Affairs Committee 2022). When considering the mean, however, it is significantly higher (rape = 2,767 days, sexual assault – excluding rape = 2,115 days) (Home Affairs Committee 2022. It is important, however, to consider that the Home Affairs Committee

Report considers from when the offence took place to completion and, with an increasing number of allegations of historic abuse being reported, this will skew the data. In 2021 from reporting to the police to police referral to the CPS the average length of time was 218 days (Home Affairs Committee 2022). None of these figures are positive and this is a significant amount of time that is passing, with significant delays, to have hanging over a victim.

For BSVFG13 they had two cases with court dates where the victim had identified what support they needed until that time:

> I got a charge in May, the court case isn't 'til next July so the woman that I'm supporting in that instance turned around and said d'ya know what BSVFG13, I'm absolutely fine, [I'll] pick back up support with you in January (BSVFG13);

> I have someone in who's got a court date end of next year that instead of monthly support says actually I would still like contact with you every three months so then we've dropped down to sort of ad hoc, infrequent, monthly plus basically. Again that's down to the victim and the survivor what they feel they need (BSVFG13).

The conclusion and closure of a case could be due to a not guilty verdict or a decision being made for no further action (NFA) to be taken. ISVAs would then provide emotional support during that time and could help draft a police complaint and aid with any claims for Criminal Injuries Compensation (BSVFG13).

One of the ISVA participants, BSVFG12, predominantly provided support to children who had been the victims of sexual abuse. Their description of the support provided was very similar to that provided to adults, except that they would start by making contact with the referring individual/agency to identify what they thought was best for the child, before speaking to the child directly to see what they wanted:

> So I work with the parent, the social worker or education what's best for that child. I speak to the child directly and see what they prefer and then arrange to do that assessment. And that assessment just helps us get an idea of any additional needs that they might have in relation to advocacy and also any additional needs themselves that we might need to adapt or tailor our support for them. We also go through the consent form which talks to them about you know how we will use information and safeguarding and when we might need to share information and they can go through that and say who it's okay for us to speak to ... So I would then go through with how they best want to be contacted, is that through parent, is that themselves, how they'd like the support to work, whether that be telephone, email, face-to-face, how often and how regular they'd like that contact to be and also that's the point where I will discuss the limitations and boundaries of the role as well. We will then work out what's best for that person and usually for most people they like intermittent face-to-face support, phone calls around police updates and text messages every now and again just to sort of check in that they're alright. And

I will always let them know they can contact me should they wish to access any services that I haven't already offered, or if they want any signposting or anything like that. I would then make contact with the police officer, so the officer dealing with the case, and usually they would then keep me updated throughout the process so that I can best support them around the updates, manage their expectations, talk to them about the Victims' Code and their rights and make sure their rights are being met, particularly the children, there's a heavy involvement with social care as well so attending child in need and child protection, making sure their voice is heard, and that all aspects of the support covered within those meetings as well … we will work for that person for as long as the criminal justice process is ongoing so if it's a no further action we can help them then with the right to review process, if they want to make a police complaint we would help them with that and if the case was to go to court we would then liaise with witness care and help keep them updated and inform them what each stage is in relation to the criminal justice process and we would then become part of the special measures[7] to support at court as well. And following court we would then help them apply for criminal injuries compensation, point them in the direction of it, show them how and where to do that, and any other kind of additional signposting or onwards support as well.

The only real difference between adults and children appeared to be that a decision for no further action may be taken sooner for children than adults, although at the time of interview BSVFG12 was supporting a young person who was now an adult and still waiting to go to court:

I do have a young person who is now an adult who I've been supporting for over four years and it's still yet to go to court. And it's a, very very difficult for her to stay engaged and her mental health is being used as kind of the reasons for the delays so we're not, we're not even at charging decision yet [laughed].

The Impact of the Covid-19 Pandemic

Following the initial lockdowns in England the ISVA team were quickly identified as key workers and back working face-to-face within three months of the courts shutting in March 2020. They continued to provide face-to-face support throughout the pandemic, as "we felt it was vital for us to meet the needs of the clients, to be able to provide that face-to-face support" (BSVFG11, BSVFG12), with them being "deemed essential workers by the Minister of Justice" (BSVSL4) and as discussed above, were considered essential workers under the UK Health Security Agency (2021). The First Contact Team

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[7] Provisions put in place by the Youth Justice and Criminal Evidence Act 1999 to "help vulnerable and intimidated witnesses give their best evidence in court and help to relieve some of the stress associated with giving evidence" (CPS 2021). This was subsequently updated by the Coroner's and Justice Act 2009 to include "special provision for adult complainants in sexual offence trials in the Crown Court" (CPS 2021).

also took telephones home with them that they could turn off when not on call to enable them to manage the referral centre (BSVOL4).

In addition, as touched on above, BSVOL4 shared that for many the isolation etc. of the Covid-19 pandemic left them feeling scared and vulnerable, leading to traumatisation. This then reminded them of a previous time when they experienced trauma, leading to them seeking support in addressing this, increasing the number of referrals being made to the Sexual Violence Agency for support.

BSVFG12 shared that they felt the biggest impact of the Covid-19 pandemic had been seen in the delays they were facing in the criminal justice process with court cases being adjourned multiple times and the build-up of a large backlog of cases waiting to get to trial. This issue was echoed by BSVSL4 who explained that they were continuing to hold cases because of the Covid-19 pandemic and whereas "it usually takes two years from report to court … we're looking at about four years at the moment". BSVFG12 gave two examples, one where the case had been adjourned three January's in a row, and another where the individual was suffering severely from the emotional impact these delays were having on them, with BSVFG12 pointing out that people seem to forget about this impact on victims, but they were releasing the alleged perpetrators because they had been waiting on remand for so long:

> I in particular am working with a person whose court case has been adjourned three January's on the trot so they've been waiting, they will have been three years to get to court, they're a completely different place in their life and this is holding them back, time and time again;

> Another person it was adjourned, adjourned, adjourned, every time it got adjourned she ended up getting sectioned because of the emotional impact that this had on her and it, it's this kind of thing that I think everyone understands the process, they understand that there's been delays, but they don't take into the fact how devastating this is for the victims. They do however look at how long someone's been remanded for and then if they've been remanded for a significant amount of time they then tend to apply for bail and get released on bail because they have been remanded due to the adjournments after adjournment and they can no longer keep them there and they do tend to then be released on bail which then has another impact on the victim/survivor who's then worrying about their safety whilst they're waiting for trial (BSVFG12).

BSVFG12 further noted, interestingly, that these adjournments continued post pandemic, which would support Godfrey et al.'s (2021) assertion that the backlog was not created by the Covid-19 pandemic but as a result of the austerity measures in place pre-pandemic and continued post-pandemic.   BSVFG11 noted that they had had an increase in referrals during the Covid-19 pandemic as people had more time to reflect and consider what happened in their past with so much time spent at home, as well as an increase in the need for emotional support due to the increased anxiety caused by the pandemic:

It did go up during Covid, just gradually. But I think as well more and more people had time to reflect, particularly on historic abuse, a lot more adults came forward around her childhood abuse. Because I think it gave them that space to start to reflect and think about things and obviously you know there's always something in the press isn't there, whereas they weren't as busy and their time wasn't taken up maybe so much with, you know, working and stuff so they were furloughed … I think there's definitely been an increase in the emotional support we've been providing as well, there's been a lot of increased anxiety, obviously about the pandemic and that's led to further anxiety about their police case or their abuse, it's triggered a lot of people around their own trauma (BSVFG11).

BSVSL4 explained that, in partnership with the PCC, they had been able to secure some additional funding during the Covid-19 pandemic but that it was unclear what would happen at the end of that funding period and they were expecting to "make ISVA's redundant and waiting lists go right back up again" as a direct result of this loss of funding. Further identified areas of concern included the lack of mental health support for victims who did not have allocated Care Coordinators when they should have or support following suicide attempts who they were also trying to support (BSVSL4).

Considering How the Services Work across Area A and B

A reoccurring theme across both Areas A and B and across all agencies is the importance of communication and building a relationship and rapport with the victims they were there to support either as staff or as volunteers. This was particularly important during the Covid-19 pandemic as individuals had not been likely to be able to meet often/at all for the duration of the intervention due to the restrictions placed on the country during that time. This building of a relationship is important as it allows for the trust this creates to lead to the staff and volunteers providing the emotional support victims of crime require. It is important to note, however, that in Area B the restorative justice volunteers were keen to point out that they do not offer such support, they have a specific role, to help find answers, and that any support required beyond that, i.e. emotional support, falls outside their remit and so they would signpost to further support as required. This view was not posited by the restorative justice volunteers in Area A, however they did not share any examples of providing emotional support or anything outside of the restorative justice process. It may be that it is simply a difference in the choice of vocabulary as Area B see it as helping to find answers, but it could be put to them that helping an individual to find answers is supporting them, if that is what they want.

It is also important to note the role of RJ facilitators in determining whether a restorative intervention is appropriate for a victim. In Area A they highlighted the importance of remorse being shown by the perpetrator in determining whether an intervention should proceed, however this is not generally a requirement of restorative justice. The Restorative Justice Council (2016a), Why Me? (2022) and the MOJ (2015b) do not highlight remorse as being a requirement or part of the restorative justice process. Does this mean the RJ agency participants actually mean that perpetrators are demonstrating

responsibility and a willingness to own up to their role in engaging in the process, or have they added an extra element to restorative justice where the perpetrator must demonstrate remorse? In instances where restorative justice has been considered the facilitators must consider whether this is the most appropriate time or whether a restorative intervention could cause more harm to the parties involved. In restorative justice the facilitators were explicit in the fact that this is taken into consideration, but other agencies are not, yet work similarly. The Victim Support Service and IDVAs would support individuals for as long as they need to be supported, but were mindful of allowing the victims to become attached and so would determine when their time supporting has to come to a close, another area of support led by the individuals delivering the support, rather than the victims. Participants from the Domestic Abuse Agency, Victim Support Service and Home Protection Agency all shared that sometimes victims simply need someone to talk to, someone to vent to, and that they were able to provide this opportunity, sometimes in addition to other tasks i.e. the Home Protection Agency providing support in securing their property being their primary role, whilst for others their role was simply to be available to speak to victims of crime, albeit on a limited basis. Having someone to talk to was highlighted by many agency participants as a need for older victims of crime.

It is also interesting to note the differences in the length of interventions being offered. Restorative Justice, IDVA and ISVA support all typically lasted a number of months, with the individuals working with the victim through their individual processes, whilst the Home Protection Agency support is a one off visit and the Victim Support Service support may be anything from one telephone call to weeks or even months of support. Consideration should be given to whether cases closed by the Victim Support Service after that first call, where they may have a chat but the victim opts not to proceed with further support, are considered to be a successful intervention or if this is simply inflating the successful outcome figures, something outside the scope of this research.

The inclusion of a hub for victim referrals in Area A does not appear to have benefited the agencies or victims there any more than those in Area B, where they do not have a hub. For each agency victims are forced to tell their story on multiple occasions before support actually starts, but then it could be argued that sharing their story with others actually helps victims. They have a safe space in which to share their story and repeating their story may start to empower them to take control of what has happened, something which they have already started to do in seeking support for the victimisation which has occurred.

There remain concerns around the approaches taken by agencies to the Covid-19 pandemic, not only those involved in this research but externally as well. In Area A the services essentially shut down, no one met anyone in person and it was all conducted via telephone calls, despite the fact it could be argued that all of the agencies were providing an essential service supporting victims of crime. It is plausible that the age of the volunteers, who undertook the face-to-face work for the Victim Support Service and RJ Service, played a part in this decision as they were considered to be at higher risk should they contract Covid-19, but that has not been shared by any participants.

In Area B, despite being listed as an agency providing an essential service (UK Health Security Agency 2021) the Domestic Abuse Agency stopped visiting people face-to-face, and likely will not be returning to full face-to-face support for service delivery because of the benefits identified for the service and the staff delivering the service. This does not take into account the benefits the face-to-face service has for victims; although they have said if requested, they would do it, some may not feel comfortable requesting it. Only one agency continued to operate following Covid-19 guidelines and engaging face-to-face during this time – the Sexual Violence Agency.

Commissioning

In January 2012 the government set out their consultation for reforms to victim support services, with the aim of "a more flexible and tailored system of support for victims of crime, with the vast majority of decisions about what services are needed made at a local level by democratically accountable Police and Crime Commissioners" (MOJ 2012a:4). This was a significant change from the processes in place at that time and moved from a centralised to a localised approach to the commissioning of victim support services (Loveday 2018). This meant that PCCs would be responsible for commissioning victim services, that is, responsible for "the process for deciding how to use the total resource available ... in order to improve outcomes in the most efficient, effective, equitable and sustainable way" (Commissioning Support Programme 2010:7). The government therefore developed the *Victim Services Commissioning Framework* (MOJ 2013b:2):

> To help provide clarity about securing outcomes for victims; to establish performance monitoring so that commissioners can be held to account by the public for the funding decisions they have made while service providers will be accountable to commissioners for the services they are providing; and overall to provide advice and information on commissioning to those involved with victims' services on one useful document.

The changes made and the development of a framework show that contracting and commissioning is a key part of the landscape for those organisations providing victim support services. Despite this, a recurring theme from the focus group interviews with volunteers and staff members working for these organisations was that funding concerns were not seen to be a key part of their role. The majority of the focus group participants felt funding and commissioning was something for the managers to deal with, and not something for them to worry about. Echoing the views of many participants, BDAFG6 said "I feel like I know everything that I need to know to be able to do my job 110% so I think if I was being told everything happens in the background it would, at least me personally, confuse me".

When asked about their understanding of the processes in place for contracting and commissioning, many of the focus group interviews with volunteers and staff members revealed that they were not overly knowledgeable about the processes in place. BDAFG5 and BDAFG6 pointed out that knowing about contracting and commissioning was not necessary for them to do their jobs, with all "those things" being dealt with by managers, whilst AHPFG1 explained "we carry on no matter where the funding comes from". This is a different view compared to that of CRC employees who saw themselves as being "sold to the lowest bidder" (Robinson et al. 2015:18), instead they just worry about doing their jobs. Even amongst those staff and volunteers who expressed an awareness of the organisation engaging in contracting and commissioning, understanding was relatively limited. These findings support Sturgess' (2018) assertion that budgets and policy are of little concern to those working on the frontline. Sturgess (2018) also argued that a localised approach was expected to increase buy in, but this does not appear to have had that impact here. Staff who said they were aware of the contracting and

commissioning process mainly derived this knowledge from their day-to-day working responsibilities (such as data required by the managers from them for reporting purposes and any changes to their service delivery: AVSSFG5, BDAFG5). This may also suggest that any changes wrought by funding may not be passed upwards, if the staff are unaware of the potential implications of these.

This section will consider the implications of the approaches taken to contracting and commissioning in Areas A and B and how the initial contracting and commissioning process worked and the impact of this, and any additional actions that have had to be taken, drawing on the responses of the PCC representative from each area, and the Strategic and Operative Leads from the participating organisations.

Area A

As explained earlier, Area A was an early adopter of the changes to the commissioning of victim support services in England and Wales (APCC, AVSSSL2). Having been aware of the upcoming changes before they were announced Area A started by undertaking a mapping exercise of their victim pathways, including obtaining data from Victim Support and visiting them to get a better understanding of the support being offered (APCC). In undertaking this exercise they learnt that they were one of six areas covered by a regional office for Victim Support, an office where the staff did not know the area, nor the towns and therefore Victim Support staff did not know who to refer individuals onto for further support following an incident (APCC).   Representatives of Area A were therefore concerned that there was "no local aspect" to the support being offered and that victims were being offered support based on crime type, not victim need (APCC). Area A therefore set out to develop "a model that was based on need, not crime type where local people were supporting local victims" (APCC). This included the introduction of the Victim Support Service hub, funded by the Police and Crime Commissioner using the Victims Fund from the MOJ (AVSSSL2). The PCC therefore grants some of that fund to the Chief Constable to cover the delivery of the Victim Support Service hub which was then merged with their Witness Care Unit (AVSSSL2). This therefore allowed the PCC and the police to create a hub offering support to both victims and witnesses.

Gash et al. (2013) and Hall (2018) have concluded that there were no prescribed pathways to victim support services, rather they would be tailored to local need. In order to better understand victim needs in Area A, the PCC commissioned a needs assessment. The purpose of a needs assessment is to identify gaps (Royse et al. 2009). In this case the PCC was looking to identify gaps in service provision and support for victims of crime. If no gap was identified, no change would be needed. If gaps were identified, the PCC should commission services to meet the needs of those in the gap. In their book, Royse et al. (2009) point out that the word 'need' "is a relative term" and can therefore be influenced by a variety of different factors. For example, in Area A the needs assessment showed "if you'd been a victim of crime, and already have existing mental health issues or predisposed to that they're gonna be exacerbated" (APCC). They therefore included two mental health nurses within their Victim Support Service hub. A further area of need identified was through the identification of a high number of victims

being migrant victims of exploitation. They therefore included a support worker for victims of human trafficking, focusing on the nationality with the highest number of victims and recruiting an individual who spoke that language (Lithuanian) (APCC). This has since been expanded and a second worker introduced as they saw an increase in victims from another nationality (Romanian) (APCC). Another area of need identified was the need for support for young victims of crime, something which did not meet the criteria for this research (APCC). The needs identified within the needs assessment are specific, specialist areas of need, risking the abandonment of those with more generalist need in favour of recruiting and providing support services for those with specific need, irrespective of the volume. Victim needs will be considered further later in this chapter and in the discussion. The UK Department of Health highlighted that one of the benefits and attractions of commissioning services was that it allowed agencies to develop "a strategy of how to make the best use of available resources to meet needs" (as cited by Sturgess 2018:157), although specific guidance on how to do this was not found. It is, unfortunately, not immediately clear if this is in fact what the PCCs are doing, although the agency staff did explain that they do what they can with the funding available, there just is not enough.

APCC explained that Area A had "a mixed model of commissioning" which meant "legislation allows us to grant money as well as to put things out to tender". APCC clarified that their sexual violence support service had gone out to tender as it was funded by a pooled budget. Funding for the Home Protection Agency was grant funding "'cause it's a charity that works in partnership with the constabulary with appropriate information sharing arrangements" whilst the IDVA service was run through the local authority so the PCC just contributed to the local authority for that (APCC). They did, however, run an integrated model of victim support services, meaning that they considered everyone to have a role to play in everything and whilst the domestic abuse service was not commissioned by them but an in-house service through the local authority, they were co-located within the Victim Support Service hub.

APCC's role was that of Head of Commissioning and Strategic Partnerships which included the management of all commissioning and grants within Area A. APCC explained "any money coming out of our office, funding any partnership work, I look after it so I manage all the contract management, all the procurement so, every stage of the commissioning cycle that we use which is Understand, Plan, Do, Review". With one person responsible for not only commissioning, but also funding partnership working and undertaking contract management there is an increased risk that commissioning would focus on pre-conceived ideas of victim need or those victims who create a stir in the media and therefore the public realm, as opposed to the higher volume victims (Simmonds 2016, Turgoose 2016, Hall 2018). In both Areas A and B OPCCs had a lot of say about their specialist commissioned services – domestic abuse, sexual abuse, restorative justice – and not a lot of say about support for the high volume crime victims. BPCC's referral to Victim Support as their 'catch all' service minimises the impact of the crimes committed against those individuals, and their support needs. The commissioning cycle explained here "is at the heart of all good commissioning" (MOJ 2013b:5) and, as explained in Chapter 4, required the PCC to understand victim needs, plan what would best support those victims, actually commission an agency to provide

that best support to victims and then review the work being undertaken regularly to ensure they are achieving what they set out to achieve from the newly commissioned service (Commissioning Support Programme 2010; MOJ 2013b). This would be completed through contract monitoring meetings with the providers about the progress of the contract.

APCC explained that in following this process they:

> "Understand: I arrange all the needs assessments, collect all the evidence base, review and make sure that anything we're funding is in line with the joint evidence base; ...

> Plan ... do all the partnership engagement to look at what we need to put in place if there's anything, whether we're just commissioning by influence so we are influencing other specs, getting them to change them or ... slightly amending their work or if we are planning to commission something completely new I'd run our own in partnership so we draw up all the service specifications ... put all the processes in place whether it's a tender or whether we're granting that or whether we're co-commissioning, develop all the outcome framework so every little bit of the stage of the journey; ...

> Do ... contract mobilisation, awarding of contracts and all of that stage or it'll be about just helping them get it, get their services in place so contract mobilisations are the mobile, are either supporting a provider to get it into place or actually supporting maybe another partner agency to change the way they're working;" ... In addition due diligence was required at this stage to include "making sure their accounts are up-to-date, checking that they're legitimate" which needed to be completed with every new provider;

"Review ... contract monitoring" (APCC). Contract monitoring offers commissioners the opportunity to review whether the provider is meeting their goals and complying with the agreed contract (Contract Safe 2023). During the interview, APCC noted that contract monitoring was undertaken on a quarterly basis through meetings with service providers and victim engagement. There was no reference to surveys being undertaken with victims. At the time of interview (during the Covid-19 pandemic) APCC shared that they had followed this process for 80 funding awards that year alone, including 23 for small grants around £3,000 which still required due diligence. They explained "this year's been unprecedented to be perfectly honest" as a result of additional funding being provided by the MOJ and additional reporting requirements during the pandemic. APCC shared that as a result of the additional funding they found themselves working with providers with whom they had never worked before, meaning that all due diligence needed to be undertaken to confirm that the agencies were in fact legitimate. This significantly increased the OPCC's workload alongside three monthly contract reviews, undertaking needs assessments, bids for additional funding to support existing services and monthly requests for data from both the Home Office and Ministry of Justice.

The Home Protection Agency were awarded £50,000 over two years towards their service, rather than being commissioned to deliver a service over a specified period like the Victim Support Service. The Home Protection Agency were still required "to provide figures and show what we are doing is of benefit to victims" (AHPSL1) to the PCC to support their funding. Grant funding in this way, unlike contracted commissioning, meant that the Home Protection Agency were not guaranteed this funding for a longer period of time, unlike the Victim Support Service which was an internal hub so funding is directed there, or even the commissioned services in Area B where they had 3 years plus up to two years extension (as discussed later in this chapter). This therefore meant that there was no guarantee that the support that they provided to victims would continue and additional funding was always required from elsewhere to cover the costs of the agency. For the Home Protection Agency this additional funding came from "grants and funding streams that need to be applied for" (AHPSL1), including the Waitrose green tokens.

Smaller organisations are often "dependent on the public for more than half their income (58%)" (NCVO 2022), whilst larger organisations depend on the government for their income, at a time when central government funding has dropped by 3%, and local government funding has dropped by 9% (Tabassum 2022). In 2010/11 government contracts made up 82% of incomes in the voluntary sector, however this had dropped to just 23% by 2019/20 (Tabassum 2022). This has meant that agencies, such as the Home Protection Agency, are needing to spend a lot of time looking for and applying for funding (AHPSL1), to make up for this reduction. This seems like time that could be put to better use, improving and expanding the support services to better serve the victims in need. Instead AHPSL1's time was spent looking for "quick wins" for funding, i.e. small pots they could get quicker, sometimes having to change their approach to try to fit the criteria of the pot they were applying to, a similar theme to that highlighted by Tomczak and Thompson (2017) who found that statutory funding could create goal distortion. AHPSL1 explained that they would be looking for these "quick wins" so that they were not repeatedly applying for the same funding each time:

> I look for funding and then I apply for it and all the ups and downs that go with that because, you know, you're not always successful, and it's ways of being creative sometimes in that respect as well because, you know, you can't keep applying for the same thing, you've got to try and change your strategy a little bit or find different ways of how you might be able to connect into that community or, you know, fit in with the criteria of that funding that's being offered. So that's, sometimes you have to be a little bit creative in, in how you write things.

That being said, AHPSL1 explained that "if you can offer sufficient evidence then it shouldn't be difficult to have to receive those funds", yet this does seem to be the case if they cannot receive all the funding they need from one source and are having to apply to multiple pots to keep their support going for victims of crime. AHPSL1 explained that they did "need to be careful that we spend the money on what we say we're going to spend it on but if we want we have got the flexibility to do extra things if necessary … whatever that might be because of additional funds we may have raised elsewhere".

In addition, the Home Protection Agency would make it known to the victims they supported, and others, that they could make a gift aid donation, if they wished. Gift aid envelopes were included in support packs they put together during the Covid-19 pandemic. This could, however, be misconstrued as victims of crime having to pay for the support they are receiving, support which should be provided free to them as a victim of crime, or as though the only way to thank the agency is to make a donation to them, something which was not asked by the other agencies involved in this research. Whilst this may not have been their intention, telling the individuals they are supporting that they can donate to them makes it sound as though they are asking victims to pay for the support that they have received. For some this could be seen as empowering the victim to be able to make a donation, for others it may seem as though it is putting some of the responsibility on victims for their healing and recovery, rather than simply offering support to them following a crime. It is clear, however, that part funding of services is not beneficial for the agencies or the victims as significant time is spent sourcing funding from elsewhere, a point considered further in the discussion.

APCC divulged that at the start of the Covid-19 pandemic their role changed from one of commissioner to one where they were supporting services to explore changes to their ways of working as a result of the restrictions in place during that time, including looking at new pathways for support when agencies had completely shut down. One of these ways of supporting was to second staff into services to help with developing the changes taking place, although it did not sound as though these staff were working with the victims, rather there to help with implementing changes (APCC). APCC explained that they were highly collaborative in this way and as a result "nobody went without support".

One area of concern raised by APCC in relation to the Covid-19 pandemic was the frequency with which the MOJ would 'drop things' on them without any notice and expect them to create processes and adapt immediately to what was being asked of them, often resulting in APCC having to cancel planned leave to address what was being asked of them. On 2 May 2020 the MOJ showed a clear prioritisation of offence types when they announced £76 million of additional funding "to support victims and survivors of domestic abuse, sexual violence, vulnerable children and their families, as well as victims of modern slavery" (MOJ 2020g). £25 million of this would be administered through PCCs with £5 million to sexual violence services, £10 million to domestic abuse services already commissioned by PCCs and £5 million to domestic abuse services not funded by PCCs. This document stipulated that PCCs had to undertake a needs assessment and that no more than 14 days should pass from the date of the allocation letter for the funds to the funds arriving with the agencies. (MOJ 2020g). In addition, £5 million was to go to agencies already funded through the Rape Support Fund. This clearly highlights which victims they see as needing the most support, as well as a lack of planning on the part of the MOJ and demonstrates a reactive approach to the Covid-19 pandemic and simply 'throwing money at it' without considering what the problem is and how best to address it in each area. APCC, however, was very proud of the work they had done and explained "we're really really really happy with our model".

Area B

Area B PCC continued to support the services in place prior to the devolution of funding, and as in Area A, Area B commissioned a large scale needs assessment to better understand victim needs within Area B (BPCC). As identified in Area A, understanding victim need was vital in helping to establish a starting point, as a minimum, in the support services needed for victims of crime (BPCC). BPCC did share, however, that sometimes the needs identified for victims fell outside of their remit and were not things that they would commission such as mental health need, support with finances or finding a job. These are all areas identified in *How the Services Work* as areas to which staff and volunteers signposted victims for assistance.

In Area B, commissioned services were typically offered three year contracts, with the option for additional years (BPCC). This allowed stability for both the PCC and the organisations. Short term contracts and grants did not allow anything more than outputs to be measured in relation to the service, whilst contracting for longer periods of time allowed for flexibility in delivery, as well as the opportunity to make changes as necessary, for example around accessibility (BPCC). Alongside their three main contracted services (Victim Support, Sexual Violence and Domestic Abuse) and the inhouse Restorative Justice Service, Area B provided funding to Stop Hate UK, a "national organisation working to challenge all forms of Hate Crime and discrimination" (Stop Hate UK 2023), as well as contributing to a modern slavery helpline, a different approach from Area A where they had funded two posts specifically to support victims of modern slavery. In further contrast in Area B, in addition to contributing to funding for the modern slavery helpline to cover the whole of Area B, they also contributed grant funding to grassroot partnership organisations in one city to support victims of modern slavery.

In addition to the larger scale commissioning of services, the PCC in Area B also had a small grants fund which they managed. This fund was "focused on supporting sort of our third sector, our charitable organisations ... like social enterprises etc." (BPCC). Individuals and agencies could apply to the small grants fund for projects which supported the Police and Crime Plan priorities, which were typically not about victims but more focused on antisocial behaviour etc. (BPCC). By focusing on the Police and Crime Plan priorities as opposed to victim needs and victim support it would have been easy for them to miss some victim needs, leaving gaps in victim support services. They did, however, run an increased grants programme during the Covid-19 pandemic when they successfully secured over £1 million extra in additional funding. This allowed them to not only increase the number of staff to help manage an increased workload, but they were also able to issue additional grants for domestic abuse support agencies which led to them discovering an agency providing support for domestic abuse to the gypsy and traveller communities, which they had not been aware of before (BPCC). These grants were seen as supporting "the larger pieces of work that we might do" (BPCC). Whilst it is positive that they were able to provide additional grants, these are agencies that would benefit from support all the time, not just during a pandemic. So where did they get financial support before the pandemic, and where would they get financial support once all the grants from the pandemic had been spent?

BPCC explained that once services had been commissioned, they moved onto the contract management of those services, ensuring that they were performing and delivering the expected outcomes and, as part of this, continuously working with them to "make things better", exploring areas for adaptation to enable them to do this.

The needs assessment identified a need for an all crime support service which, at the time, was being delivered regionally by Victim Support (BPCC). This service required a victim to be referred into the service and an assessment to be undertaken before support could begin (BPCC). This was a requirement for all victim support services under the EU Directive (2012). Other participating agencies (Domestic Abuse Agency, Sexual Violence Agency, Victim Support Service, Restorative Justice Services (in A and B)) made reference to assessments being undertaken when a victim first made contact/was referred into their service. Unlike in Area A, this service continued, however the support was moved from a regional level to a localised level (BPCC). As they declined to participate in the research it is unclear whether this move from regional to local made a difference to the support service being delivered, and therefore impossible to compare the two generic victim services.

Prior to devolving funding to Police and Crime Commissioners, a number of different agencies provided support to victims of sexual violence in Area B, each covering a small geographical area (BPCC). The needs assessment identified gaps in the provision of support for victims of sexual violence, with some areas not having any support coverage (BPCC). The decision was therefore made to commission a service that would cover the whole of Area B, ensuring no gaps in service provision for victims. To do this the PCC worked with partners who formed a partnership to enable them to cover the entirety of Area B between them (BPCC).

For the Sexual Abuse Agency, BSASL4 shared that just 47% of their funding came from the PCC which covered their ISVA service and "wraparound support services that included counselling, advocacy or anything else that might be needed", leaving them with a further 53% to source from elsewhere for additional support. The Sexual Abuse Agency would source additional funding from local authorities and places like "Children in Need, Lloyds Foundation, Esme Fairburn, Henry Smith" to make up the shortfall to cover the rest of their support services (BSASL4). BSASL4 explained that the tendering itself was not easy, describing it as "a horrible process", one which was "extremely time consuming" for the managers of the consortium:

> Basically myself and another manager and another manager from each centre just have to book a month out of our schedule, drop everything else and all the other good work that we're doing and sit and do hours and hours and hours of paperwork, writing, producing this, that, the other, asking questions on the tender that are designed for businesses to ask them to confirm what the terminology is, because it's out for a business and it's not in our language" (BSASL4).

BSASL4 explained that, despite this, they were "really fortunate in [Area B] to be the only providers of sexual violence and abuse services but when you've got competition from

large multinational companies it, it's hard. It's hard to beat that". BSASL4 did explain that these larger companies lack the specialism they have in supporting victims of sexual abuse, therefore impacting the "quality for the end product for the survivor". Having a thorough tender process therefore benefits the victim as it ensures the right organisation is selected to provide the support that they need, even if it is a laborious, time consuming task because it is about finding the right support for victims.

Historically the Sexual Abuse Agency only provided support to female victims of sexual abuse and sexual violence, however in order to apply for the PCC tender they "were forced into providing services to men" (BSASL4). It is a shame that this was viewed negatively, as opposed to being an opportunity to utilise a local support service for male victims and take a joined up approach to the application to ensure joined up delivery and a better service for victims (Sturgess 2018). This is also something which could have been encouraged by the PCC by involving local providers to utilise their knowledge and skills to develop a plan for commissioning which included male-focused agencies (Shircore and Ladbury 2009). BSASL4 was quick to point out that "it's not that we don't want men to receive services, but our, our ethos is to provide services to women and girls", reflecting on the fact that this had been a difficult time for them:

> That was quite difficult and challenging initially, because what we saw on the introduction of the online portal and [First Contact Team] is a number of males who were also suspects in sexual abuse cases trying to access our services or trying to access victims through our sexual violence services. That was a huge challenge … We've had to then change all our policies, procedures, literature, like the financial implication of being moved away from a women and girls service was horrific [laughed]".

When first applying to the PCC for the tender, the Sexual Abuse Agency included the First Contact Team, however BSASL4 explained there was not enough money available to deliver the services and the triage from one pot, so they applied to the national lottery for funding for the First Contact Team which had provided them with consistent funding. However, BSASL4 highlighted that "funders don't like to continuation fundings, so you always have to come up with a new innovative idea, even though the original idea is working absolutely fine [laughed]". This sounds like a frustrating way of working for a valuable triage service and is something that should be the responsibility of the commissioner, if they wish for such a service to continue, rather than the provider to be scrabbling for funding to continue to provide that support to victims of crime.

As explained in *How the Services Work* support for victims of sexual abuse was provided by a consortium of agencies who came together to bid for the tender for sexual abuse support across Area B. Before PCCs took over commissioning for victim support services, in Area B there was sporadic support for victims of sexual abuse, with some areas not receiving any support (BPCC). The introduction of PCCs and commissioned support services "enabled service users to receive support in areas where before we couldn't get funding" and for the agencies to "work as a partnership for the whole of Area B", ensuring that "every service user, survivor, in Area B has the option to have support if they want" (BSAOL4).

BSAOL4 was not personally involved in the funding of the service, and directed some questions to BSASL4. BSAOL4 did point out "that logic tells me if you've got different pockets of money in different areas coming up at different times, surely that is not easy to work through. Whereas by … the partnership coming together and by us all offering the same support then surely it's easier for the funder".

BSASL4 shared that they felt very fortunate to have a PCC who "fully understands the impacts and needs around sexual violence and sexual abuse", explaining that this is often not the case with many PCCs lumping domestic abuse and sexual abuse together and that in some areas support services for victims of sexual abuse had shut down due to a lack of understanding, or changed significantly from their original ethos as an agency. For example, BSASL4 explained that some Rape Crisis Centres had been "forced to bend away from their ethos to deliver things that don't really sit under the, under the Rape Crisis model and ethos". For the Sexual Abuse Agency it probably did not hurt that they were quite well known outside of Area B as they were involved in a number of things nationally, such as attending MOJ meetings. This would have likely helped improve their reach/audience, as well as providing them with something 'extra' to talk about in funding bids which would provider funders with the opportunity to be associated/involved with funding a well known, established service.

BSASL4 explained that the funding from the Police and Crime Commissioner had "given us some stability because they usually do like three years plus one plus one". As a result of the Covid-19 pandemic they had the plus one and at the time of interview had just been successful in winning the tender for a further three years (plus one plus one) (BSASL4). This therefore meant that there was "some consistency around planning for the future, staff stability, staff happiness [laughed], things like that so they're not always sort of on notice all the time so that's sort of given us a little bit of stability", however, despite this stability there were some negatives to receiving the tender, including there not being enough money there to cover the number of victims who were requesting support from the service and the impact it had on their ability to apply for funding elsewhere. BSASL4 explained that when applying for funding, funders required them to include details of their existing funding streams. BSASL4 therefore discovered that funders did not understand that the money from the PCC did not fund their entire agency, making more difficult sourcing the remaining 53% their agency needed. In addition, BSASL4 explained that they had even been "accused of double funding" by funders such as health services who did not understand that the PCC funded just 47% of their delivery and therefore they would prioritise that around police referrals and criminal justice referrals.

Whilst BPCC was not able to share anything about the commissioning of Domestic Abuse services in Area B, BDAOL3, despite stating that this was not something they got involved in, was able to share that they:

> Understand that we are funded by the PCC to run, so we have a contract which I believe runs for 5 years then with the option to extend for a further two and that is how we have funded the majority, or all of our full time staff but we also have some staff on one year fixed term contracts through funding that we

secured due to Covid pandemic and various funding streams that came into play because of the pandemic.

Clarification of the funding situation for the Domestic Abuse Agency was provided by BDASL3 who explained that they were commissioned by the local authority and the PCC which funded their "outreach service and a proportion of our family refuge", under a five year contract. At the time of interview they were two years into that contract, about to start the third year and BDASL3 explained that they were "really grateful" for this as a longer contract "is almost unheard of in our charity sector which gives us some real, a real foundation to build on so we're really grateful for that". Benefits to funding coming from the PCC, for BDASL3, included strengthening of partnership working and being able to influence "how victims are looked after in the criminal justice world" through their involvement with a variety of local forums to share the victim voice, including the local victims' panel. Despite this, the funding was still time limited and meant that there was still pressure to ensure ongoing funding and BDASL3 explained "I sometimes think the amount of effort we have to put into [finding and applying for funding] we could put into actually doing, providing the service if we knew that funding was a bit more secure", but was quick to point out that the extended five year contract "has been a real game changer", allowing them to hire permanent staff and help their staff to qualify as IDVAs (Independent Domestic Violence Advisors). This supports earlier points made by the Home Protection Agency and Sexual Violence Agency that a significant amount of time is spent sourcing and applying for funding, that could be put to better use actually providing support to victims of crime, and even working on developing and improving their services. Third sector agencies rely on funding from external sources. These could be from contracts, donations, grants, investment or trading (NCVO 2022). The appropriateness of the funding must be considered, alongside any advantages and disadvantages and benefits to the agency and then they still have to put together their application.

Whilst the PCC funding covered their outreach service and family refuge, the remainder of the service was funded by "a mixture of funding from other sources" (BDASL3). This included funding from the Ministry of Housing, Communities and Local Government towards the recovery refuge, as well as funding from "Children in Need, Comic Relief, Tampon Tax donations" and "a little lottery scheme" (BDASL3).

For BDAOL3 the benefits of being commissioned for set periods by the PCC meant "there's far more accountability". BDAOL3 explained that being commissioned by the PCC:

> Makes me feel quite good that they obviously had the confidence in the work that we do and our knowledge and experience and, and what we bring to the table and so it makes me kind of want to do the best job we can and, you know, understand that we're all kind of in this together, we're all kind of trying to, to get the best outcome for victims of domestic abuse that it comes from, you know, that the police are on board with that.

This is an interesting view to take because, as explained in the literature review, PCCs are not the police, they are democratically elected individuals, politicians. For BDAOL3, however, the fact that they are the Police and Crime Commissioner tells them that they have the police on board with their work. This has historically been a difficult feat when it comes to support for victims of domestic abuse, as evidenced in an article by *The Guardian* newspaper in 2021 when a number of victims shared examples of negative experiences with the police, including a failure to respond to a report of domestic abuse made by one woman towards her partner for over six months (Topping 2021).

BDAOL3 further elucidated that time-limited funding not only kept them on their toes, but also helped them to keep their service current and relevant:

> ... you wanna keep it fresh ... I think it keeps you on your toes if you know that there's an end in sight, you wanna constantly be striving for better ... if it wasn't time limited you might ... let things slide a little bit ... I'm not saying we would, in fact I know that we wouldn't but I think there is the, there is the risk that that could happen.

BDAOL3 explained that with time limited funding they would be constantly reviewing what they had achieved as they were accountable for that period, explaining "you can build up a lot of dead wood and not be as dynamic". This method helped them to avoid that and stay on top.

BDAOL3 makes some interesting observations, and if you consider all the money previously given to Victim Support to deliver a victim support service with no accountability and no real outcomes (MOJ 2012a), they have highlighted the risk of complacency in not having a competitive tendering process and one of the key benefits to victims and PCCs in having a competitive process. Perhaps a shake up to both statutory and third sector organisations on a regular basis would ensure there was no complacency in service delivery, although it would need to be done in a way to allow agencies to get fully embedded and give the services a chance before offering up the next tender opportunity. It would also need to take into consideration the need to be a competitive tendering process, that some agencies may not be equipped to manage the entire tender and therefore may wish to form consortiums (as the Domestic Abuse and Sexual Violence Agencies in Area B did), or that a larger agency may lead on the bidding and include smaller, more niche services in the supply chain (ICF International 2015).

It is important to note that there is significant work required from agencies in order to prepare a bid for funding (AHPSL1, BDASL3, BSASL4). BDASL3 explained that there were three of them within their agency working to apply for funding, themselves as the Director of Adult Services, the Chief Executive and the Director of Finance. The skills required to prepare applications for funding are often not the same as those required to deliver or even evaluate a service, requiring more business and sales related skills than those used in the public sector. Oftentimes however with these smaller agencies the staff are required to do both with BSASL3 sharing that they still held a small caseload (five cases) alongside their other responsibilities, increasing the pressures on these agencies (Simmonds 2019). BDASL3 explained that part of their role was managing, tweaking and

changing their services "according to demand and need" and making sure that they were on "the front foot" and "able to maximise the offers that we have". Resources being taken from support services in order for these smaller agencies to prepare a bid was highlighted as a potential barrier in the Government's response to their consultation *"Getting it Right for Victims and Witnesses"* in 2012 (MOJ 2012b). BDASL3 explained "we're a charity so we can't rely on any government funding, we have to go out there and apply for our funding so it's a never-ending battle really to make sure we can keep going". BDASL3 explained that whilst they had "been very fortunate ... you only have contracts for a couple of years at a time and we can't rest on our laurels, we have to keep, keep applying and making sure we're here to keep going", highlighting that their recovery refuge was only funded year to year, requiring them to be constantly working to ensure ongoing funding. Identifying funding streams to support the work that they do alongside the funding from the PCC was highlighted as a concern by Simmonds (2019). This is a real issue within the third sector with no guarantees for funding for key services with Tabassum (2022) saying that the reduction in government funding had led to the closure of "vital programmes", at a time when we are also seeing a cost of living crisis, leading to significantly increasing bills for everyone.

Furthermore, BDASL3 highlighted that one of the biggest problems with funding is that:

> ... most funding is, is really specific so we have to have them in separate pots to make sure that the funding we get in is spent on the specific project we've applied for the money for. Erm and be really strict with that so it's a, that's a full time job in itself, you know it's a real challenge, to, to make sure the money is spent um well. I mean we've been very lucky that ridiculously through Covid, Covid has meant that we have had more funding so we've been able to support more victims and don't get me wrong but they are, more victims have come forward because of Covid but at least we're in a position to, to support them because we've had extra extra practitioners appointed through Covid funding. We're in the process of applying for some more right now which hopefully will keep us going for a bit longer because we know that there's many many more victims out there that have yet to come forward.

It is interesting to note that the service providers are sharing their concerns around funding and the need to always be applying for further funding to ensure that they can continue to provide support to victims of crime. The requirement for victim support services to be provided comes from the EU Directive 2012, a directive placed on Member States i.e. the United Kingdom, to provide support to victims of crime. This directive is placed on the government as the Member State to ensure that support is available to victims of crime, not the victim support service, but the victim support services here are all sharing their concerns about finding enough funding. This should not be their concern; the government should be ensuring that there is enough funding for victim support services to continue to provide the support that victims need.

As the Restorative Justice Service was an in house service and BPCC was not in post at the time PCCs took over victim support commissioning they were not aware of how the commissioning worked for them. BRJOL2 however, explained that the Police and Crime

Commissioner received funding to be used for victims of crime in Area B and then from that money they would "identify services that can deliver support and restorative justice is one of those services so we are given a pot of money to deliver and we have to then report back on the, on the ongoing support, what we do". The money allocated to the Restorative Justice Service came from the Victims' Grant and set their budget which was left to them to decide how it would be spent, "whether you know it's staff, whether it's venues, training and we're given that and then we keep on top of how we're spending that within the year" (BRJSL1, BRJSL2).

BRJSL1 explained that the funding they received from the PCC for restorative justice was sufficient for the service they wanted to deliver, aided by the fact that they used volunteers and "we can recruit them to deliver a service and they provide manpower, willingness to expand on the role that they've been initially trained for" including delivering training for other agencies and undertaking projects within local schools. This funding would run on a year by year basis but when it came to the future of the service BRJSL1 was not concerned about losing the funding explaining that as long as restorative justice was a part of the PCC's plan, which at the time of interview was at the start of a new term, and within the Victims' Code "we should hopefully be safe". BRJSL2 felt that being an internal service was of benefit to them because they were not having to spend their time "trying to prove ourselves in terms of funding", rather they were "spending that time improving our service and working for our participants". This is an interesting point of view: as an internal service they are less concerned with the data and reports other services provide to show what their funding pays for and justifying the continued provision of that funding.

BRJSL1 elucidated that for the year of interview they had received around £210,000 from the PCC for restorative justice, an increase from £160,000 the previous year which they put down to the addition of a maternity cover that year.

The Restorative Justice Service in Area B not only provided restorative justice interventions, but also mediation for incidents of antisocial behaviour, with the funding for the Restorative Justice Service coming from the MOJ grant, via the Police and Crime Commissioner (BRJOL1). BRJOL1 explained that "we've proved to be one of the cheapest ones round the country and we're one of the most effective ones ... there is no cheaper alternative". This view was echoed by BRJSL1 who stated "we're one of the cheapest services in the country as well, running because of our volunteers". Cost should not, however, be the deciding factor in supporting victims of crime.

In Area B the Restorative Justice Service was an internal service, located within the Office of the Police and Crime Commissioner. BRJOL2 explained that they felt that being an internal service not only kept them within the mind of the Police and Crime Commissioner but that it also gave them some legitimacy in the eyes of police officers they may work with "that we're part of their world, or they perceive us to be" and that it also "allows us to share information freely where appropriate without fear of cyber attacks or hacking etc. and it gives the police confidence to talk to us about what they're doing". Adding to this, BRJSL1 explained that being an internal service meant "that obviously you have a closer relationship with the PCC themselves, and then you can have

more of an influence" when the PCC was developing their Police and Crime Plan. This view was echoed by BRJSL2 who explained that in sharing an office "they are constantly seeing the benefits of what we do so that works sort of in our favour". BRJSL1 explained that when it came to drafting the Police and Crime Plan the whole office was consulted and they were able to advocate for RJ services to be included. It is great that restorative justice was being given more attention, however this could be considered an unfair influence compared to the other PCC commissioned services who do not work in the same office as the PCC and perhaps do not have their ear, as the Restorative Justice Service seems to. BSVSL4 has pointed out that support for victims of sexual abuse is 10 years behind domestic abuse support and they would benefit from having that additional input. It is important therefore that the PCC offers all commissioned providers the same opportunities to contribute to their Police and Crime Plan, not just those in their physical office. The PCC should be making decisions around supporting victims based on government guidance, needs assessments and maybe evaluations and research undertaken within their areas. Whether BRJSL2's perception is accurate or not, it is not a good impression of a commissioner and makes it appear that they do not have the right priorities – victims. Should in house services therefore be reconsidered due to the potential risk of reputational damage for PCCs?

BRJOL2 explained that their position as an internal service gave them some legitimacy in the eyes of the police, as well as affording them access to police stations which they would not have had were they not a part of the police and that they were able to "walk through an office of people and say hello to them and that casual familiarisation is always good, networking etc." BRJSL2 also shared that they "work really closely with the police because we are seen almost to be part of the police so we have really good relationships". It is interesting that staff see themselves as part of the police and have highlighted the advantages to them being seen as part of the police, by the police, but they did not talk about any tensions or whether this actually had a negative impact on their engagement with the parties they are attempting to involve in a restorative process. Media coverage of the police has been increasingly negative, with a 2023 YouGov poll finding that 51% of their participants did not trust the Metropolitan police (Smith 2023). If the Restorative Justice Service are telling people that they are part of the police and people do not trust the police, this may discourage engagement, from victims or perpetrators, depending on their own experiences of the police either in the crime that the intervention is for, or in previous experiences with them. The RJ Service would also need to be mindful of the fact that they are supposed to be an independent party in RJ, simply facilitating communication, and by being seen as part of the police they may discourage victims (who have not reported to the police) and offenders (who may feel they will be treated differently because they are an offender) from participating.

Of significant importance was BPCC's view (which will be discussed further in the discussion alongside victim needs) that if there were specialist services for all victims then everyone would get a better service:

> If we could ... commission specialist services for each crime type then absolutely, services would improve ... victims may get an increased, better service ... that gets balanced with the funding that's available as well.

In choosing to focus on specialist support services for domestic abuse and sexual violence victims, like Area A, they are highlighting that these victims need an increased service and that there is a need for specialist support in aiding victims of these crimes, not only through the criminal justice process if they go to court, but through their experience as well.

When it came to the funding of victim support services in Area B, BPCC explained that they would like to see "more pooled funding, more pooled focus in terms of victims", sticking to local commissioning which they felt worked really well and, as a result, is something they would recommend more of – "more devolvement and more local commissioning because I think we can do a lot more". This is positive to hear as, like with APCC, they see value in local commissioning and the importance of local voice and local people supporting local people, embracing the Conservative government's wish to increase both local distraction and empowerment (Brain 2014). However, this would require ensuring that sufficient funding is provided to services to be able to operate on a local level, which is a concern when funding from local government was reduced by 9% from 2021 to 2022 (Tabassum 2022) and further assumes that each area is different and therefore does need that local approach. However, from this research the main commissioned/funded services are domestic abuse, sexual violence, restorative justice and generic victim support services in both Areas A and B which does not support the notion of each area being different and needing a local approach, rather it highlights similarities in the needs of victims in each area.

BPCC explained that a large part of their role within commissioning was writing bids themselves in an effort to obtain more money "to support what we're trying to deliver and what we're trying to achieve". Spending time sourcing funding was also highlighted by BDASL3, so whilst the PCC is sourcing funding for victims, commissioned providers are still needing to source additional funding for themselves to top up what they can get from the PCC.

BPCC pointed out "there is never enough" but the Covid-19 pandemic and additional funding made available as a result of this had allowed them to increase the number of IDVAs and ISVAs supporting the services in Area B, with the recruitment of 10 new ISVAs and 5 new IDVAs, however BPCC did go on to say "that just meets the problem, we don't exceed the problem". In the case of the pandemic, this was not something that anyone could have planned for or anticipated, however it did highlight that funding could be found if it was needed to increase the number of staff providing support to victims, albeit for a short period of time. This additional funding helped to deal with the problem at hand at the time, but did not consider the additional problems to come including increased length of cases, requiring the need to continue the involvement of ISVAs and IDVAs for longer than pre-pandemic as victims waited longer to go to court (Desroches et al. 2020). At the time of interview additional funding had been secured and would not run out for a number of months. BPCC did say that they would need to ensure that plans were in place to deal with the reduction in funding when that came, but this was not something they had planned at that time.

Whilst many of the Operative Leads participating in this research said they were unable to provide much context or explanation of the funding situation, some were able to provide some interesting insight. They did, however, explain that this did not fall within their remit (BRJOL2) and suggested speaking to the Strategic Lead (BRJOL2, BSAOL4) for more information around this, with BDAOL3 stating "that kind of happens more at the strategic level which is, which is more BDASL3's level".

As BPCC was not in post at the time the devolution took place they were unable to provide as comprehensive an overview of the steps taken within Area B to provide support to victims of crime. Support services delivered in Area B do not appear to have gone through much, if any real change since the devolution of funding for victim services moved to Police and Crime Commissioners. They continued to fund the same services that were in place before, encouraging them to move to a localised approach or to work together in partnership to deliver the service Area B wide, without any gaps in delivery, bringing into question whether 'competitive tendering' is in fact taking place.

Understanding Commissioning

Commissioning is a competitive process. Robinson et al. (2015) quoted a CRC (now The Probation Service) staff member who said "if we are getting sold to the lowest bidder it hardly makes you feel proud does it?" (p8). In contrast, staff delivering victim support services did not think about whether their agency had the jobs/service because they were the cheapest, and all were very proud of the work that they were delivering because they had 'won' and had the best bid. For them it was not about the money but the service they delivered. Is this because they were competing with others for the contract, as opposed to the CRC staff who had no say in who they worked for and were simply transferred to those who won the bid? Is this relationship between the staff member and the agency the key? Do victim support services feel involved, like they contributed, because they are a part of that agency already? Rather than someone doing the job and then changing employer when a cheaper bid/provider comes in?

The *Victims' Services Commissioning Framework* (MOJ 2013b) was designed to support PCCs as they navigated the commissioning of victim support services. Consideration was given within this Framework to payment by results, but given the complexities of victimisation and victim needs this would not be feasible, with support needs and duration varying from victim to victim and crime type to crime type (Shapland et al. 1985, Maguire and Corbett 1987, Mawby and Gill 1987, Brickman 2003, Goodey 2005, Zweig and Yahner 2013, Lens et al. 2017, Walklate 2017). The Framework also made recommendations for cross-border collaboration and multi-agency working (MOJ 2013b).

Cross-border collaboration is in opposition to the localised approach recommended and is not something that was mentioned by either area participating in this research.

Multiagency working was also encouraged in the Framework, highlighting the importance of a partnership approach to meeting the complex needs of victims (MOJ 2013b) and the

fact that PCCs could play a key role in facilitating this. Although no guidance was given on how this could potentially be achieved, attempts to do this have been made in Area A with the Victim Support Service operating as an in house Hub with the RJ Service as one arm of this, whilst other agencies were offered space within the offices to work from (local domestic abuse agency). The Victim Support Service said they would ensure, where appropriate, individuals had been referred to specialist support services, but this did not really sound like a fully functioning hub.

When talking about a hub, the researcher had envisaged referral into the hub, assessment and then allocation out to specialist services as required. However, none of the victims interviewed received support from multiple services, and only one sounded as though they would have benefitted from that. It needs to be noted, however, that as not all of the agencies providing support to victims in Area A participated in this research, it is difficult to get a clear picture.

In Area B it did not appear that any multiagency working in terms of victim support agencies was taking place. Victims were supported by one agency, may be signposted to other agencies (not victim support specific services) as needed and the PCC simply commissioned those services but did not appear to be involved beyond citing the great work they were doing.

The commissioning of specialist support services is in line with the MOJ's requirement that support services should be "targeted at those who have suffered the greatest impact from crime" (MOJ 2013b:6). Those considered to fall within this remit were "victims of serious crime, the persistently targeted, the most vulnerable and intimidated" (MOJ 2013b:6). Despite the lack of guidance as to what is meant by this and who qualifies for each category, steps have been taken by PCCs to identify those they feel meet this criteria and services commissioned to reflect this. In addition, steps have been taken to commission a generic support service in each area. This appears to be a blanket approach to capture those who have not been the victims of more specific crimes. In both Areas A and B specialist support for victims of crime was focused on three specific areas: domestic abuse, sexual abuse and restorative justice.

Being Commissioned by the Police and Crime Commissioner's Office

Participants in this research were asked whether they felt commissioning was a helpful way of appointing services to deal with victims in this country, as well as what it was like being commissioned to deliver a service by a politically elected individual who may change every four years.

All operative and strategic leads interviewed said that commissioning was a helpful way of appointing services to support with victims in England and Wales, with a few caveats. BRJOL1 said they did not know, explaining that they had only seen it from their side but for them, it worked; whilst BSASL4 explained that it is helpful but "only if the commissioners understand the needs of victims and survivors of sexual violence and sexual abuse". BSASL4 felt that if the PCC did not have a good understanding of the

differences between offences then this would not have worked. This is a vital point not only for sexual abuse but all victims and victim services. The failure of CRCs in probation services across England and Wales came about because the MOJ and service providers did not understand the true nature and extent of the work and services provided by probation services (Gash et al. 2013). If PCCs do not understand victims, victim needs and victim support services the same is liable to happen. Despite operating in different regional areas, AVSSSL2's response agreed with that of BSASL4:

> It's a bit of a mixed bag really. So on one hand I could easily say yes because it ensures a local focus, it ensures there's an opportunity to refresh services, you know, and to check that … that the service that was created, if you like, is still delivering … with commissioning you've got someone that's coordinating and focusing and making sure that you know the area is getting … the service that is required and meets the needs of, of that locality … on the other hand it, it can be quite disruptive because you will have processes that may require recommissioning every five years, and we're going through a process like that at the moment with some of our services and that can be quite disruptive … as a whole it is a good way of doing it and I 'spose the only other thing is … if whoever's doing the commissioning is doing it on an informed basis, obviously , so the big question is, is where they're basing that information on.

When asked what it is like being commissioned by a politically elected individual who may change every four years there were a variety of responses. There was a clear split between the considerations of those who were Operative Leads and those who were Strategic Leads, with the majority of the Operative Leads less concerned with the implications of this. Two Operative Leads advised that it was not something they had considered (AHPOL1, AVSSOL3) whilst BRJOL2 explained "it's always been like that for me and my working life so to me there's absolutely nothing new about it". In contrast ARJOL2, as someone working for a service exclusively commissioned by the PCC, pointed out that "it can make you vulnerable actually having one source, that could be pulled at any point, however I've never really thought about it that much", and they felt that as long as the PCC was invested in RJ then they did not have any concerns. BDAOL3 however pointed out "the politics side of it is really difficult 'cause you know that, that always slants what, what they view as, as their priorities and you know sometimes we win and sometimes we lose, depending on whichever party comes in". This was an interesting view to take as since the introduction of PCCs in 2012 Area B has only had two PCCs, both of whom were from the same political party and would have therefore had similar goals.

The Strategic Leads had varying responses and concerns when it came to what it was like being commissioned by an individual who may change every four years. AHPSL1 explained "we don't really get too involved with them" [the PCC themselves], likely because they would work with a member of staff within the PCC's office, rather than the PCC themselves, who was responsible for the commissioning of services. They did, however, note that the PCC did not seem to be a fan of theirs, but did not have any further explanation for this. BDASL3 explained that if this question had been asked when they

were in a different role, with a different hat on, they would have had a different response, however as a domestic abuse practitioner:

> ... from a domestic abuse perspective, in my experience, it doesn't change quite so much because I think domestic abuse is so vast, there's so much of it out there that actually there are very few political parties or political persuasions that can ignore it ... there's no hiding from the fact that it's a massive chunk of their work ... DA is, is quite high on the agenda for most people ... I think it's hard to ignore domestic abuse when the numbers are, speak for themselves, without any other kind of, no one else bangs the drum.

From a domestic abuse perspective this is positive, but this could also be detrimental to other agencies, such as the Home Protection Agency who actually saw a reduction of funding when a new PCC was appointed (AHPSL1). BRJSL1 saw the changing PCCs as an opportunity "to prove your worth", ensuring that you "prove your value" so that there is no reason for there to be any changes when a new PCC is appointed, utilising what they have available to them to promote the service, to show the benefits of the service and share what it is that they do. BSASL4 again had a differing viewpoint noting "it's very worrying [laughed] because we don't know who we're gonna get in the future". This supports Simmonds' (2019) findings about continuing uncertainty for victim services under a politically elected role. BSASL4 explained that in previous elections they had spent time "speaking to the candidates, helping them understand the issues, so that if we do get to a position where it is a new person then at least they have some understanding". BSASL4 pointed out that each candidate and elected PCC has their own priorities and explained that with the first PCC support for victims of sexual violence and abuse were just "tagged" onto the domestic abuse page. However, since then with the increasing profile around sexual violence and sexual abuse as a result of the murder of Sarah Everard and the work of the 'Me Too' campaign they have found that "everyone's invited, we now have our own section, finally" (BSASL4).

Being a commissioned provider of a victim support service is not an easy feat, whether this is fully funded, partially funded, or grant funded. BDASL3 really hammered home the point that they need to constantly apply for funding in order to survive, that they cannot rely on government funding or pots of money and are always looking for the next pot of money to use for something within their agency pointing out "we really have to sort of grab every funding opportunity that comes our way that's suitable for our service to be able to keep going". This is despite having secured a five-year contract to deliver domestic abuse services in Area B, the money found still was not enough and only covered outreach services and some refuge services. This highlights a problem not only with a lack of funding available, but also just how much need there is for support in a variety of different areas for victims of domestic abuse – they did not just need an individual to support them through the process, they often had more extensive needs requiring specialist support, including a refuge to escape to from the abuse they had encountered. The lack of money also meant they could only advertise fixed term contracts for the length of that funding.

The additional efforts being undertaken by the Home Protection Agency to recruit funding for their service, on top of the smaller funding provided by the PCC, shows all the additional hoops which need to be jumped through by third sector agencies trying to support victims of crime and it is clear that the funding available from the PCC is not sufficient for the commissioned support services. This is despite the fact that even the PCC's Office was writing bids to secure further funding. This is not something that you would ordinarily expect to be taking place within a commissioner's office, especially one where there is devolved funding for victim support services, but this highlights the fact that the money made available by the MOJ for Police and Crime Commissioner's to fund victim support services is just not enough and more funding is needed.

Summary

Participating services for this research had a mixture of funding, some were fully funded (Restorative Justice Service in Area A, Restorative Justice Service in Area B), some partially funded (Victim Support Service in Area A, Domestic Abuse Agency and Sexual Abuse Agency in Area B) and one was grant funded (Home Protection Agency in Area A). This meant that participating agencies were able to provide a wide overview of experiences of commissioning and applying for funding from multiple potential providers.

This research revealed that despite the agencies participating being in receipt of funding from the PCC, significant time was spent by these agencies sourcing funding and preparing bids, because the funding available to support victims of crime from the central government via PCCs was simply not enough. Whilst internal services such as the Victim Support Service and Restorative Justice Service in Area A and the Restorative Justice Service in Area B appeared to be fully funded by the PCC, the remaining agencies were not, with some (Home Protection Agency) receiving grant funding towards the services they provided, and the others (Sexual Violence Agency) receiving just 48% of the funding they needed to support victims. This seems unfair to those agencies that are not internal services, that they have to continue to search for funding elsewhere whilst restorative justice and generic victim support services are funded as long as there is funding and do not have to reapply at the end of a set term. The funding position leaves those services directly funded open to complacency as they may become stagnant as the funding is guaranteed so they do not need to change anything or do anything extra if the service they are providing simply works. The remaining agencies, however, are constantly having to explore innovative ways to support victims of crime to ensure that they remain current and attractive to potential funders, all whilst continuing to provide a good service to the victims they are supporting. It is unclear what justification there is for having some services as internal services and others as external ones and avoiding the competitive tendering process. It is also unclear whether, for Area A, having a hub had any impact on this or if it was purely because the Victim Support Service was an internal service. Would victim support services running through a hub format ensure that there was always funding for victim support services?

The staff and volunteers working directly with victims of crime were not particularly knowledgeable about the funding situation for their agency, however many of them felt that this was not necessary for them to be able to do their jobs, but rather a role for management. For some it could even prove to be a distraction from what they were doing if they found themselves overwhelmed and overloaded with information that they did not need to do their day-to-day job.

The purpose of contracting and commissioning victim services was to allow for a competitive bidding process to ensure that victims were being provided with the best possible service to support them and their needs following a crime being committed against them. The lack of change within Area B does make one question whether this was a truly competitive bidding process as the only changes were for consortiums to be created by existing providers, and for Victim Support to move from working regionally to locally (BPCC).

BPCC shared that if there were specialist services for all crime types then victims would be likely to receive a better service, however this has to be balanced with the funding that is available. By choosing to focus on specialist services for domestic abuse and sexual abuse victims PCCs in both Area A and Area B were saying that they think they need specialist support. Interestingly both have highlighted a need for mental health support and Area A has addressed this by having mental health professionals sitting within the Hub, but nothing specific has been commissioned by Area B. Does this mean that they do not consider mental health support to fall within their remit but that of the NHS, or do they not consider it to be as important as a specialised service for a specific crime type, because individuals requiring mental health support are unlikely to have all been the victim of the same crime but a variety of crimes?

Simmonds (2019) highlighted the need "to unpick the finer workings of local commissioning via the PCC" which this research has started to do, but not on a large enough scale, so further research is still needed. Both PCCs have shared that they believe in local people working to support local people, however it is unclear how a national agency, such as Victim Support who previously provided a regionally based service, would be able to effectively provide a local support service to victims of crime.

Significant funding was put into victim support services, particularly domestic abuse services, during the Covid-19 pandemic and it will be interesting to see whether this leaves a positive legacy of increased support for victims of domestic abuse, or if the removal of that funding will have a lasting negative impact on support services and victims alike, especially given the delays caused by the Covid-19 pandemic and the increased time it now takes for a case to pass through the criminal justice process.

As explained in Chapter 4, England and Wales saw a shift from outsourcing and contracting services, to focusing on the process needed to achieve outcomes by identifying what the needs are, and then developing policy and the service in order to achieve those outcomes (Damm 2012, CIPS 2019, LGA 2018, Sturgess 2018). However if PCCs are just going to recommission the same services, are they actually going to

develop their services to meet need, or simply continue to deliver the same service that has been working for them?

Understanding Agency Views of the Victim

To help understand the victim experience, it is important to understand the ideas and views of the individuals who support victims of crime directly (by working with them personally) and indirectly (those responsible for developing and commissioning services). To do this, agency participants were broadly asked:

a) When talking about the people you support, how would you refer to them? Clients? Victims? Survivors? Something else?
b) Thinking about the word victim, what would you say are the characteristics of someone who has been the victim of crime?
c) Do you feel individuals you have supported 'embrace' the victim label? Do they prefer a different label?

PCC participants were not asked question (a) because PCCs did not provide support themselves as they were responsible for commissioning victim support services. This section will explore the responses to these questions.

Agency Participant Terminology

It was important to understand how the agencies commissioned to support victims of crime, saw their victims and their preferred terminology when describing victims. Table 28 below shows the agency the individual worked/volunteered for, the chosen word, and the number of individuals from that agency who used that word for Area A. Table 29 below shows the same breakdown for Area B.

Table 28 – Agency Participant Terminology Breakdown Area A

Agency	Word	Number of Agency Participants
Victim Support Service	Victim	3
	Client	1
Restorative Justice Service	Victim	2
	Harmed	1
Home Protection Agency	Victim	3
	Client	1

Table 29 – Agency Participant Terminology Breakdown Area B

Agency	Word	Number of Agency Participants
Domestic Abuse Agency	Survivor	1
	Victim	1
	Service User	1

Restorative Justice Service	Victim	7
	Participants	3
Sexual Abuse Agency	Client/survivor	3
	Victim/Survivor	2
	Cases	1

Tables 28 and 29 show that there are a variety of different terms being used to describe individuals who have been the victim of crime. In some instances, participants used more than one word to describe them, with representatives from the Sexual Abuse Agency, Domestic Abuse Agency and Area A Restorative Justice Service pointing out that their chosen word was dependent upon who their audience was (BSVFG10, BSVFG12, BRJSL1 and BDASL3). BRJSL1 explained "we kind of change between the language really, it depends on what's most appropriate and who our audience is", going on to explain that they will use "language that they're used to", with BSVFG10 explaining they therefore adapt, for example, "when you speak to the police …" [because] "they use the word victim". Oftentimes the term "client" was used internally, when talking with colleagues (BDAFG5, BSVFG10, BSVFG11). BSVFG11 explained they used the word client "because it's that relationship of receiving services from us", although they would use the word survivor when talking with professionals. AHPFG2 explained that they used the word victim, but that was just because that was the term that came through on the paperwork from the police, so it would make sense for them to be using a term used by the police. For AVSSSL2 the explanation of the term they used was simple:

> We follow the government's lead to a degree, they've got a Victims' Code of Practice, they're doing a Victim's Charter … the police … will do a crime report and all the, all the details on that are around the victim so as a generic term of someone who's suffered a crime against them … that's what it is … and I know some people who have had a crime committed against them who say they're not victims and I understand that but for the purpose of recording and, and in terms of the common language the use of the word victim is just that … a form of label that … ensures that we understand the, the person's rights, entitlements and the service (AVSSSL2).

Table 30 below shows the total for each term identified by the agency participants, without breaking these down by agency or area.

Table 30 – Agency Participant Terminology Breakdown

Word	**Number of Participants**
Victim	16
Client/ Survivor	3
Participants	3
Client	2
Victim/ Survivor	2
Case	1

Harmed	1
Service User	1
Survivor	1

As Table 30 shows, 16 agency participants said that they would use the term victim. This was despite a number of them raising concerns with the use of that word, with BRJFG7, when discussing terminology with colleagues in their focus group, pointing out:

> The word victim these days is a loaded word (BRJFG7).

Additional comments included:

> I think that they used to be called victims but that's not the correct way to, to word to use anymore … I wouldn't wanna be termed as a victim (BDAFG5, agreed by BDAFG3);

> … the media have made victims to, to sound as though they're not strong people … It makes it sound as though that thing that had such control over them that, you know, happened to them at a sometimes singular incident, that they're then labelled as that victim for the rest of their life. The term survivor was much more preferable because they've survived that event, they've moved on (BSVFG11);

> … sometimes we have to use the word victim but you know victims is not a … you know, it's a negative, it's a negative sounding word … (BDAOL3).

BSVSL4 explained that they had actually undertaken research around this with victims of sexual offences and found that there was a 50/50 split:

> After we did a consultation probably 50% may have classed themselves as a victim and 50% may have classed themselves as a survivor and they said they could be one and then the other (BSVSL4).

This is important because BSVSL4 has highlighted that the way victims feel following a crime taking place is not static, rather the feelings and views of an individual may change at any time (King 2023). This was also raised by some victim participants and will be considered further in the discussion. It also highlights how BSVFG11's explanation is problematic as it makes the assumption that the individual has moved on and survived, when they may in fact be struggling still with what happened to them. BDAOL3's way around it was to use the term 'client' which was "quite non-judgemental in terms of where, where they're at because, you know, let's face it some of them are not survivors because they're still in it. So that doesn't seem like an appropriate word". BSVFG12 summed it up by pointing out:

> I think victim/survivor is interchangeable in most sort of documents and policies and things that you read, so I think just the language we've adopted,

and depending on the audience would be, sort of, best fitting … it depends on who we're, who our audience is really, it's the language they use with us.

AHPSL1, from the Home Protection Agency, explained that they struggled when it came to the best terminology to use to describe the individuals they worked with because they were not keen on using the term victim, but this was the most appropriate term because at the point they were referred they had just been the victim of a crime. AHPSL1 explained:

I know the DVs they tend to like to go on a little bit more now trying to use the word survivor but it's difficult if you know you've just got that, you've just had that referral in and you're referring to the person as a survivor … I can understand why they use it and I think it's a good word but I think it's, you, become a survivor, but at our stage you're still a victim.

When asked how they would refer to the individuals they support, ARJOL2 provided a rather detailed response:

That's a really good question I think 'cause actually the narrative … you can cause harm by using victim/offender words and you can also stop things happening by using the wrong words as well. So if they get offended by you. So, mainly, first thing I do is I ring up and I first say can you, I believe, I've just received your referral, I've got you down as, say for example James, are you happy to be called James or how do you like me to refer to you and they will tell me. It might be "oh I like to be called Jim", well okay I'll call you that, okay we'll go forwards. So a name is crucial in the first few minutes of communicating. After that once I've started talking to them I do say "we use the terminology of victim/offender, are you happy for me to say that or would you like to, you know, 'cause I understand that that can cause some harm" … I've had a couple of people go "I'm not a victim, I'm a survivor", okay well we'll call, we'll do that. So it's about, really, the first initial contact is the first point where you get your boundaries and understand to respect how they feel. So I, I'm always open to say well what, how do you want me to talk to you, how do you want to be er how do you want me to speak about going forward, are you happy if I say offender about him or do you even want me to say his name. 'Cause even just saying oh Mr, I've got a chap called Mr Polite who's killed somebody. Now Mr Polite, if you take that as a word, do you want me to refer to him as Mr Polite no 'cause he's not polite, he's killed you know my brother. Okay I won't say that, how do you want me to say it, well call him David, I don't mind you saying that but don't say he's polite. I mean I hadn't even thought about that. So you're constantly having to navigate your narrative to fit around something you don't think about that can cause offence. Erm, and and that's ongoing, you'll always have that with whoever you speak to.

ARJOL2's response highlights the importance of being flexible to the needs of victims, and the importance of adapting terminology to the individual they are communicating

with. Not only is this about flexibility, but also giving agency to the victims and empowering them to make the decision for themselves as to what terminology they want to use. This view is supported by SAKI, the Sexual Assault Kit Initiative (nd) which points out the need to be respectful of victims of crime by asking which term they prefer, as well as empowering them through the process by sharing where and why different terms may be used.

An unanticipated barrier to understanding the terminology used by agencies to describe the individuals they worked with was that participants misunderstood the question. Some understood the question to be asking how they actually addressed the individuals they were supporting with agency participants pointing out that they just called them by their names.

ARJFG6 explained "formally it's victim and offender. But then it comes kind of party, you know, one party and the other party and as soon as you've got their names they're people, so you call them by their names". ARJFG6 also talked about how they have in the past used 'harmed' to describe victims. ARJFG6 and AVSSFG5 continued that they would not go through the RJ intervention "still calling the victim 'victim' and the offender 'offender'" because it "is kind of, almost cold" (AVSSFG5). So they felt the need to clarify how they spoke to the individuals they supported through an RJ intervention. Participants from Area B also misunderstood the question but were able to answer it once further probing questions had been asked.

Whilst victim remains the most frequently used word to describe a victim of crime, it is interesting to note that not only is it used interchangeably by many participants, adjusting its use to the audience being addressed, but none of the participants exclusively used the word victim to describe the individuals that they supported. It was also used alongside another word, and often to fit in with the police, the agency most well known for using the word victim.

Victim Characteristics

When asked "Thinking about the word victim, what would you say are the characteristics of someone who has been victimised?", the responses from the staff and volunteer participants varied, and it appeared describing and identifying victim characteristics was more difficult for those supporting victims than for the victims themselves (see Tables 13 and 14).

Both staff members from the Home Protection Agency (AHPFG1 and AHPFG2) described how differently people they supported had behaved, but were unable to verbalise actual characteristics, despite prompting. The volunteers from the Restorative Justice Service in Area A described victims as "someone who's suffered as a result of someone else's actions" (AVSSFG5), but this is a description of the term victim, not a characteristic of a victim. When prompted further they were able to identify some characteristics such as sadness, but this did take further probing from the interviewer. AVSSFG3, who predominantly worked with victims of human trafficking, also provided a definition of a

victim, rather than identifying victim characteristics, describing the things that they would look out for to identify someone as a victim, for example, a lack of PPE at a car wash or not taking the money from customers and this always having to be done by one person. In Area B some participants also described what a victim is, rather than their characteristics, with BRJSL1 responding "someone who's obviously had an injustice or someone who feels that they haven't got closure, that they can't move on". BSASL4 on the other hand provided a demographic breakdown of the victims their agency supports. This highlights an area of improvement for future research exploring victim characteristics, perhaps to include an explanation of exactly what is meant by the term 'characteristic'. Here a decision was made not to do this so as not to potentially influence participant responses.

Figure 4 below shows the characteristics which were identified by the focus group participants, operative leads and strategic leads.

Figure 4 – Agency Participant Identified Victim Characteristics

To generate Figure 4, there were 29 unique responses. The most common response was "Anger" with four participants identifying this characteristic, a common reaction to victimisation (Hill nd), whilst "Afraid/Fear" and "Sad" had three responses each. "Confused", "Frustrated", "Guilt", "Lacking in confidence", "Need to talk", "Self-blame", "To be listened to", "Upset" and "Vulnerable" all had two responses each. A number of identified characteristics bought into the idea of victims being weak, with more negative characteristics such as shame and unworthy being identified by agency participants. BRJOL2 went on to say, however:

I definitely do not feel that you can generalise. Some people are angry, some people are frightened, some people are indifferent, some people just want to open their mouths and tell you everything and then that's it, that's all they needed, they don't need you to do anything for them, so I definitely would not generalise.

This supports the literature that victims of crime may have different needs "in the aftermath of crime" (Goodey 2005:121) and therefore experience different effects following victimisation which will fall within the practical, emotional, social and emotional (Shapland and Hall 2007). This will be explored further alongside those identified by victim participants in the discussion.

Whilst a number of characteristics were identified, neither APCC or BPCC identified any characteristics, with APCC saying "there isn't one size fits all ... everybody responds to ... being a victim of crime differently. So everybody's different ... there isn't a cliché victim of crime", whilst BPCC pointed out "... there isn't a particular characteristic of anybody, they're all individual, and I would hope that, I would also hope that my services would be doing the same". Whilst it is important that both OPCCs recognised that there is no one size fits all approach or characteristic to victims of crime, these characteristics and effects do in fact help to identify victim needs and therefore the services and requirements of those victims (Mawby and Gill 1987).

This view was supported by other participants, with AHPFG2 pointing out "it affects different people in different ways", whilst BDAFG3 felt that "it depends where they're at in their journey", as the domestic abuse victims they supported displayed different characteristics if they were still in the abusive relationship to those who were no longer in that relationship, showing the changing spectrum of characteristics and needs over the victim journey.

BRJSL2 explained that they did not feel that characteristics could be broadly applied to a victim of crime:

I don't think there are any that you can apply to as broadly as that, even my experience and the number of victims of crime that I've worked with, they are all so different and behave differently and are affected differently so I just, don't think there are characteristics that define victims.

BDAFG6 explained that they felt the characteristics being exhibited by a victim depended on the crime which had taken place, a point highlighted by AVSSSL2 as well, and BDAFG6 shared examples of two victims they had supported who had behaved quite differently:

I would say it depends on the crime. We, you know, if you're talking about domestic abuse, again it will depend what abuse they suffered.

I had a client who was emotionally abused and sexually abused so she presented really really down and you know I can't do anything, she always felt ugly and had no self, had no self confidence at all but then I worked with a

client who was coercively controlled about for 11 years and she presented as really defensive because she felt she had to explain everything and was really defensive about everything. So it all depends on what they have experienced.

These views support Greenberg and Ruback (1992) who pointed out that feelings of anger are often linked with property crime, whilst fear is linked with violent crime.

BRJFG9 pointed out that the characteristics depended upon how an individual copes and their personal behaviours, using the example that one person may cope through anger, whilst another may cope through depression and that it really could vary from person to person.

ARJOL2 explained that they felt that individuals would often react differently, but explained that there was a generational difference in the reactions of victims and their behaviours following an incidence of victimisation:

> ... I've really noticed that young people will feel much more easy to say I'm really sad or I'm really upset or this has changed my life or I now can't eat or drink or they will be much more reactive to their emotions where an, and the older generation will say well it's not that, yeah I am a victim but it's not that bad, you know, I've been through worse, I've been through the war, you know this doesn't feel that bad ...

This is an interesting difference to have noticed between victims of crime, that the younger generation are more easily able to acknowledge and accept the impact and go with it, whilst the older generation consider the victimisation and its impact in terms of other things which have happened to them. Whilst outside the scope of this research, it is a topic which would benefit from further exploration.

Whilst many of the agency participants (13) said that there were no generalisable victim characteristics, they were still able to identify a greater number of individual characteristics between them (41), compared to the victims (33). Much like with the victim participants, this highlights the fact that there are no real common characteristics for a victim of crime, supporting the idea that there is no one size fits all approach to victim support services, because every victim is different and exhibits their victimisation through a variety of different characteristics, requiring the agencies supporting them to adapt and personalise their service for each individual victim. This is important because it individualises an individual, it personalises an individual and means that they, hopefully, do not feel that they are simply receiving the same generic service as everyone else, rather they are receiving a personable service, just for them.

Labelling Victims of Crime

As explained in Chapter 2, the word victim is an all-encompassing word, assigned to a person following an individual having a crime committed against them (Hope 2018). In the eyes of some that word becomes their identity, with the individual being considered

to have been weak to have allowed a crime to be committed against them (Rock 2002, Walklate 2017). The effects of victimisation are wide-ranging, with victims often needing support from others to help them through this time. These needs will often vary from person to person (Goodey 2005), but this does not stop them being viewed through the same lens. Victims will often receive sympathy and support from those around them following an incident of victimisation, and many will view the victims as being vulnerable and helpless, which is why they need that support (van Dijk 2009). Agency participants were therefore asked whether the victims they supported embraced this victim label, or if there was a different label they preferred.

Once more there was confusion around the question being asked, with some participants again thinking they were being asked if they would address a victim by calling them victim, or what terms they would use when discussing the case with the individual or others involved, rather than actually answering the question of whether the victims they supported embraced the victim label (AHPOL1, AVSSOL3, BRJOL2, BRJSL2, BSVSL4, APCC, BPCC).

Some agency participants from Area A were able to quickly advise that they did not feel that the victims they supported embraced the victim label. For the most part "they all want to try and forget" (AHPFG1), with AVSSFG3, who worked with migrant victims of trafficking and exploitation, explaining that "they will rarely identify themselves as victims" because they do not want to acknowledge that what has happened to them is a crime and that therefore makes them victims, a sentiment shared by the Home Protection Agency and Victim Support Service. Others, such as AHPOL1 and AHPSL1 said that they did not know if victims they supported embraced the victim label, with AHPSL1 explaining that this was not a conversation they had had and, as the strategic lead for the Home Protection Agency, it is likely they would not have had as much interaction with the victims seeking support to be able to see if this was the case. AVSSFG5 explained that the victims they worked with knew that they were a victim because they were there, working with them, because of that victimisation and that whilst they needed to work to move out of that, they did not embrace that label, rather they are accepting of it, but it was not something that they dwelled on:

> They know that they've come to us because they are a, a victim, so to be unlabelled as a victim they need to go through this process to get their power back so in order to get their power back they need to put what's gone ... their experience, they need to put that away, you know, they need to have dealt with it as best they can in order for them to regain their normal life (AVSSFG5).

AVSSFG5 and ARJFG4 felt that the word victim was a harsh word and one that they felt needed to be quantified i.e. you are not a victim, you are a victim of crime, you are a victim in just this one event, not in everything. AVSSFG5 went on to further explain (with ARJFG4's agreement) that there was no shame in admitting what happened, but that there was a process they needed to go through to no longer be a victim:

> They also need to acknowledge that what's happened to them ... they've been a victim ... there's no shame in saying you've been a victim of crime because

it happens, it can happen to anybody and so for you to be a victim and then to go through the process then you won't be a victim anymore because that, you've dealt with that, but whilst you were the victim you were getting what you needed as support and to get you through to the end of the process.

BDAOL3 explained that they did not think that anyone would like to be called a victim, and whilst they may not refer to themselves outwardly as being a victim, they may feel like one on the inside:

> I don't think anybody likes to be called a victim, no. I think everybody recognises that that's not where they want to be, whether they're conscious of it initially or not is a different story ... [sighed] I don't think they would refer to themselves as a, as a victim, outwardly, but maybe inwardly (BDAOL3).

This is an interesting perspective, that they may view themselves as being a victim privately and admit it to themselves, but not to others, perhaps feeling an element of shame that a crime had been committed against them and fearing the reaction from others, potentially of pity or even blaming (Fohring 2018b). An alternative view, posited by the Domestic Abuse Strategic Lead (BDASL3) was that oftentimes the individuals they supported did not actually view themselves as victims, or that what had been done to them was a crime, and therefore they needed them to embrace that idea before they could move forward:

> I think the victims are quite happy to be labelled if you like as a victim because actually quite often the, the issue we have is that they don't actually see themselves as a victim at the beginning and I think it's quite empowering for them to accept that they are a victim, that what's happened to them has been done to them and that quite often they didn't have a choice and it's not their fault. I think that's key ... (BDASL3).

BRJOL1 shared their experience of working with both victims who were pursuing restorative justice and individuals involved in a neighbourhood dispute undergoing mediation, explaining that those going through mediation would "feel more victimised than actual victims of crime". Whilst outside the scope of this research, it is interesting to learn that individuals who were not victims considered themselves to be victims, whilst victims of crime did not, which would be an interesting area for further research.

For BSVOL4 if the individual saw themselves as a victim and having been victimised then that is also how they would see them, adjusting to their needs and views of the situation at hand.

Of all the agency participants within this research, BDASL3 was the only one to actually answer the question about individuals embracing the victim label sharing that this is why they were there to help victims and empower them and support them into an alternative viewpoint:

... yes I think sometimes yes, we often talk about victim mentality and, and some of our clients are almost destined to be victims, through whatever's happened to them in their childhood or their, their previous experiences and once they've become a victim they're, it's then very difficult to, to come out of that and that's what we do, that is very much what we do. That's why we talk about that empowerment and walking alongside them to allow them to lift their heads up and to actually see there is another option, that they don't, they do not have to be that victim, they can be strong and brave and that there is an alternative (BDASL3).

Despite some confusion about the question being asked, and not actually being able to address that question, the labelling of an individual as a victim remains a contentious topic, with many varying views, as seen above, between not only the different agencies providing support to victims of crime, but also individuals within those agencies holding different views to their colleagues. It is clear, however, that the negative connotations of the victim label remain (BDASL4, AVSSFG5) and agencies are working with the victim to move them away from that label and that mentality into what they believe is a better one where they are empowered and a survivor.

Summary

Agencies involved in this research were aware of the increasingly contested nature of terminology and were reactive to this in their work with victims of crime. All of the participants who provided support to victims in this research sought to avoid causing further harm or upset to victims of crime by talking about or referring to them as victims. It is also interesting to note that the more specialised agencies such as the Domestic Abuse Agency and the Sexual Violence Agency do not push their agenda of referring to every individual who has experienced such a crime as a survivor, rather they adjust their language to their audience, speaking to those individuals in terms that they understand, rather than the terms they prefer to use to help empower the victims that they work with. Furthermore they acknowledge that not only is victim/survivor interchangeable in the language being used in policies and legislation etc., but it is also changeable for the individual themselves and one day they may feel like a victim, and another day they may feel like a survivor, and they allow themselves to be guided by those individuals, rather than other agencies in those circumstances. The term victim, however, was the most frequently chosen term, predominantly because it was the term used by the police, but for some (AVSSSL2) because this was the word the government and legislation use, so it made sense to use the same word, especially in reporting. The discussion chapter which follows will consider further the terms used by agency participants, alongside the views of the victim participants.

The decision not to provide an explanation of characteristics has highlighted that participants may be unclear on what the word means, especially given some participants simply provided a definition of the term victim. It is clear from the responses from the agency participants that they did not easily see any discernible traits which stand out as being something experienced/demonstrated by every victim of crime, supporting the

notion that there is no one size fits all approach to supporting victims because they all have different needs. The discussion which follows will allow for the characteristics to be considered in conjunction with the characteristics identified by victim participants and whether there are any similarities in how the victims viewed themselves (as many talked about their own characteristics and feelings during that time) and how agency participants view victims of crime.

Understanding whether victims embrace the victim label was, unfortunately, not answered by agency participants, but the victim label will be given further consideration in the upcoming discussion.

Despite eight categories of need being established by the MOJ (MOJ 2013b), there was no direct identification or discussion about supporting these needs by any of the agency or PCC participants, although participants seemed keen to make reference to the Victims' Code. The eight categories of need were:

1) Mental and physical health
2) Shelter and accommodation
3) Family, friends and children
4) Education, skills and employment
5) Drugs and alcohol
6) Finance and benefits
7) Outlook and attitudes
8) Social Interaction (MOJ 2013b).

Although none were directly identified, there was reference to working to change outlook and attitudes (Domestic Abuse Agency), support victims with their finances and benefits (Domestic Abuse Agency), referral onto and engagement with counselling services to support with mental health (Domestic Abuse Agency and Sexual Abuse Agency), as well as supporting with shelter and accommodation (Domestic Abuse Agency and Home Protection Agency). Support offered otherwise focused on giving victims someone to talk to and someone to support with any practical issues they may be encountering as a result of the victimisation.

Chapter 7

The Covid-19 Pandemic

At the time of embarking upon this research journey in the latter half of 2018, Covid-19 did not exist. In March 2020, as the project moved towards a point where fieldwork would start, the Covid-19 pandemic was beginning to take a grip on world events. For this research specifically, just as agencies had agreed to participate, the whole country went into lockdown (Institute for Government 2022). As will be illustrated below, agencies reacted differently to the challenge of working during lockdown or restricted movement, with some shutting down entirely, whilst others sought alternative ways to engage with their clients. Thus, the Covid-19 pandemic and the subsequent responses of agencies and individuals led to an understandable delay in making a start on the fieldwork, as everyone adjusted to the 'new normal' and looked at the best ways to work and continue to deliver services across all walks of life. Victim support agencies and their response are discussed in this section.

Given the significance of the pandemic globally, but also to the working practices of many key services, this chapter outlines the different responses to working practices of the six victim support services and two OPCCs involved in this research, and examines the impact of these changes to victims of crime. This chapter will first provide context for how each of the victim support services responded to the pandemic. The chapter then goes on to consider the impact of the pandemic on support and victim needs, before going on to explore the pandemic's impact on referrals, staff and volunteers delivering the service during the pandemic. Further consideration is given to the impact of the pandemic on service delivery, before going on to consider the impact of the pandemic on the courts and funding. In doing so, this chapter combines both results and discussion around the Covid-19 pandemic due to its significant nature and the need to recognise the impact this had separately on victims of crime and those offering support services to victims of crime. At the time of writing this chapter (June 2024) research is continuing to emerge in relation to working during the Covid-19 pandemic and the pandemic's impact on support services and finances (Almeida 2020, Desroches 2020, Marder 2020, MOJ 2020f, MOJ 2020g, Carrington et al. 2021, Godfrey et al. 2021, Engleton et al. 2022, Kanemura 2022, Pfitzner et al. 2022, Berg and Soares 2023,).

Responding to the Covid-19 Pandemic

Area A consisted of three organisations providing support to victims of crime: the Restorative Justice Service, the Victim Support Service, and the Home Protection Agency.

The Home Protection Agency completely shut down at the start of the pandemic, furloughing their support staff. The Restorative Justice Service also suspended their service at the start of the Covid-19 pandemic. Staff and volunteers were directed that

they could not undertake restorative justice interventions, but that they did need to stay in touch with all their existing victims of crime, keeping them updated as to what was happening (ARJOL2). The Victim Support Service already provided an office-based service with contact being made via telephone, with the option to be referred to a volunteer for face-to-face support. When restrictions were introduced, the Victim Support Service was able to continue delivering the telephone support to victims of crime, but all face-to-face support was stopped. A rota was put in place to manage the telephone line and comply with social distancing requirements for staff in the office.

Area B consisted of three organisations providing support to victims of crime: the Restorative Justice Service, the Domestic Abuse Agency, and the Sexual Abuse Agency.

After a short period where they worked remotely, the Sexual Abuse Agency in Area B returned to offering face-to-face in person support in accordance with social distancing guidelines. Support offered by the Domestic Abuse Agency moved online, with support being offered to victims of crime over the telephone or via online platforms, whilst the Restorative Justice Service also moved online, with letters of apology and shuttle mediation able to be completed via telephone or online. Preparation for face-to-face conferences also continued, but face-to-face conferences were not possible due to the pandemic.

Impact on the support and needs of victims of crime

The Covid-19 pandemic was a challenging period for everyone, with unprecedented actions being taken to attempt to stop the spread of the virus and protect the most vulnerable. Mind (2021) found that a third of adults and young people surveyed reported that their mental health had become worse since March 2020, the start of restrictions, and that those more likely to struggle before the pandemic hit were the ones most affected by Covid-19.

Whilst everyone around the world was impacted by the Covid-19 pandemic, a somewhat positive finding from this research was that very few of the victim participants in this study reported that the pandemic impacted how they experienced services or needs as a result. In Area A both victim participants from the Restorative Justice Service were victims of crime and had engaged in restorative justice before the pandemic and could therefore not comment on any impact. The five victim participants from the Home Protection Agency were victimised during a period when lockdown restrictions had been eased and therefore did not experience any delays, noting the only impact was that the staff were social distancing when at their home and wore a face mask (AHPP1, AHPP2, AHPP4, AHPP5). In Area B one victim participant from the Restorative Justice Service noted that most of their interaction was done online but did not feel that the pandemic had impacted their experience, which is interesting as pre-Covid this would all have been face-to-face. Unlike victim participants from the other services, some of the victim participants from the Domestic Abuse Agency shared that they felt that they had been impacted, particularly BDAP4 who felt that the abuse they experienced was worse because their friend could no longer visit and stay with them as they had before the

pandemic so they were stuck at home with no support. BDAP6 also experienced a change in their needs. BDAP6 moved into a refuge during the pandemic before going into 'move on accommodation' (safe accommodation sourced for an individual after they have spent time in a refuge where they can continue to receive a higher level of support if required, also referred to as second stage accommodation, DLUHC 2021), and found that it was very isolating being in a new place with just their children and restricted movement because of the pandemic. With a minimal number of victim participants feeling that the pandemic had an impact on their experiences, the majority of the feedback around the impact of the pandemic on support and victim needs is based on feedback from the agency participants who were able to share their experience both pre-pandemic and during the pandemic.

Agency participants (staff and volunteers) from the agencies who did continue offering a service through the pandemic reported an increase in the amount of time spent supporting victims of crime (on an individual basis), as well as an increase in the time spent with the service (AVSSOL3, PCCB). Prior to the pandemic, support offered by the Domestic Abuse Agency would last around 8 to 12 weeks, "depending on the nature of the situation and the level of harm and threats and safety" (BDASL3). As a result of the pandemic this period was extended, with one participant reporting having had a case open for 13 months with things taking longer as a result of the pandemic (BDAFG6). Agency participants suggested this extended length of support was for a number of reasons. Firstly, it was more difficult for them to have regular contact with the victims of crime they supported as they struggled to find time to contact the agency as frequently as they did before the pandemic as they were unable to easily leave the house. Secondly, it was difficult to get time alone to make calls at home. Finally, those involved in the criminal justice process had to wait for the courts process to move (BDASL4). In addition, BDASL4 commented that during the pandemic they were finding that with "the high risk victims of crime, the level of abuse is much greater so that the highs are much higher and that takes longer to deal with". This was supported by research exploring the impact of lockdowns on domestic abuse (UKRI 2022).

An emerging theme across all the agencies participating was that there was an increase in victim need, with PCCA, PCCB and AVSSSL2 explaining that there had been an increase in the anxiety felt by victims of crime, as well as a need for "in depth support" (PCCA). BSAFG11 reported an increase in emotional support needs as they saw an increase in the anxiety of the victims of crime they supported, starting with the pandemic and then leading "to further anxiety about their police case or their abuse, it's triggered a lot of people around their own trauma". AVSSSL2 said "it was felt that the needs of the victims were greater, and that manifested itself in coordinators spending more time on the phone with victims, felt they had more needs, they had more need to talk through the impact of the crime so they were spending more time on the phone with victims when they got hold of them", with more people accepting support during the pandemic than used to prior to the pandemic. This is in line with the findings of Carrington et al. (2021) who indicated that 86% of the agency participants in their research reported an increase in the complexity of the needs of the victims of domestic abuse they supported during the pandemic.

BPCC explained that services were picking up more needs from victims of crime than they had before the pandemic, supported by Almeida (2020) who reported a variety of factors increasing the severity of the impact of a crime for victims during the pandemic, including "an increase in anxiety and mental health issues, feelings of isolation and more time alone, a lack of respite and meaningful social support, reduction of control and independence, financial pressures, and a lack of distractions and limitations on positive activities" (p9). Other research has also found that demands from victims/survivors were greater. Engleton et al. (2022) focused on the engagement of sexual assault survivors with advocacy services during the pandemic. They found that there was a "new set of survivor needs" which were for information, support and resources specifically around the Covid-19 pandemic, on top of the needs associated with their victimisation (Engleton et al. 2022:2649). This is unsurprising given the impact of the Covid-19 pandemic on mental health, with financial stress and reduced social interaction contributing to an increase in poor mental health (British Medical Association 2022).

Prior to the Covid-19 pandemic most support for victims of crime was offered face-to-face. The move to online/remote support therefore impacted those victims of crime, typically older victims of crime, who were already isolated from support networks and living alone (AVSSOL3, Almeida 2020). Interestingly BPCC said that victims of sexual abuse "needed the face-to-face quicker than anybody else under that crime type". This may have been viewed this way because the Sexual Abuse Agency moved very quickly following the first lockdown to get their staff back out to deliver support face-to-face. So it therefore may not be that they needed the support more quickly, but that the agency were able to provide it more quickly because of how fast they moved to support their staff to deliver the service face-to-face. It is not possible to compare pre-pandemic working to pandemic working as support was always provided face-to-face. Whilst it may be possible to compare the differences, it is not possible to do a direct comparison with all parties.

Not all of the victim participants in this research received support during the Covid-19 pandemic, although some did. For BDAP6 the experience of being in a refuge during the Covid-19 pandemic was not a pleasant one as they felt isolated in both the refuge and move on accommodation they were placed in. BDAP6 explained that they had family nearby but could not see them because of the pandemic, further increasing their isolation. Had the agency they had been working with been offering face-to-face support they may have remained in safe accommodation. BDAP6, however, left the accommodation and returned to the home that they had shared with the perpetrator, who was not there at the time. Upon BDAP6's return, however, the perpetrator returned, therefore putting them at risk of harm once more. This is something which could have potentially been avoided, had in person support been offered.

BRJP7 engaged in restorative justice and was one of those who did their preparation work online prior to the meeting taking place, because they were waiting for a time for the meeting to be able to take place in person. BRJP7 explained:

> It felt a lot more real … it's a lot easier to hide behind a computer screen nowadays than it is to actually have a proper conversation in real life. But I

feel like in that aspect it was a lot better to do it face-to-face. It felt a lot more real like emotions were a bit more like there as opposed to yep, just saying it to a computer.

It is unsurprising that those seeking support during the pandemic had higher needs and required support for longer, as the services were essentially supporting them through the pandemic on top of supporting them through their victimisation. With this being their first time being supported as a victim of crime, the victim participants in this research are unlikely to have known if they had higher needs than victims of crime pre-pandemic, or if they were supported for a longer length of time.

Impact on referrals

The Covid-19 pandemic had a significant impact on referrals, changing the previous patterns, themes and trends that had been observed (APCC). The Victim Support Service, Domestic Abuse Agency and Sexual Abuse Agency all reported an increase in the number of referrals received during the Covid-19 pandemic. BDAOL3 and BPCC referred to "peaks and troughs" in the levels of referrals being received during this period, with surges in demand each time restrictions were eased (Almeida 2020, Carrington et al. 2021). To better manage the referrals, and the way people were now able to refer, services had to "increase our ways of people being able to get in touch with us" (BDAOL3). Acknowledging the risks to victims of crime who may have been at home with the perpetrator, the Domestic Abuse Agency introduced a web chat function for people who were still living with the perpetrator. This was designed to enable support to be offered to those "who could potentially just go on a laptop for 10 minutes and not raise suspicion but who couldn't necessarily pick up the phone and have a conversation which could be overheard" (BDAOL3). Increases in referrals for victims of domestic abuse increased significantly during the pandemic (Carrington et al. 2021), whilst the Sexual Abuse Agency also saw an increase in referrals as people had time to reflect, particularly on historic abuse (BSAFG10, BSAFG11).

AVSSSL2 acknowledged that due to staff shortages and backlogs, victims of crime referred in may have waited slightly longer to be contacted than prior to the pandemic, but they did their best to ensure that they were contacted as soon as possible. This is in line with findings elsewhere where provision, alongside engagement, was disrupted by the pandemic (Engleton et al. 2022). This, along with staff shortages due to the spread of Covid-19 could account for potential delays in making contact with victims of crime (BPCC, AVSSSL2).

Experience of delays in service were shared by BDAP5 who sought support from the national domestic abuse agency during the Covid-19 pandemic. BDAP5 explained that when seeking support they had to telephone the national helpline on three different occasions before someone finally returned their call, and BDAP5 was disappointed that when they did finally respond they simply answered the questions they had and advised BDAP5 to call back if they needed anything again in the future; there was no offer of onwards referral to other services that may be able to support them or offers for

continuing support. BDAP5 therefore pointed out that they preferred the personal touch of the Domestic Abuse Agency to the national agency as they would make weekly contact with them, building rapport and getting to know them.

The agency participants from the Domestic Abuse Agency indicated that when it came to the processing of new referrals through to their service, not much had changed from before the pandemic. Whereas it had been that they would have an initial call and then arrange an in person meeting, they would still have that initial call, but then all subsequent work would be completed remotely as well (BDAFG3).

For AVSSOL3, the support worker for victims of human trafficking, the pandemic had a significant impact on them as well as their outreach work, as their work supporting identified victims of human trafficking was suspended throughout the pandemic. Prior to the pandemic AVSSOL3 or their colleague would accompany the police on raids to engage with any victims of human trafficking they found. At the time of interview the only way for AVSSOL3 to help was if the police telephoned the agency when they were at the location and had identified victims of human trafficking. AVSSOL3 stayed in touch with the exploitation team throughout and made themselves as available as they could, but they were limited in the support that they could offer. This is an example of an essential service that suffered as a result of the Covid-19 pandemic and interpretations of key workers. If, for example, the police had a raid planned for a location where they anticipated there to be victims of human trafficking, AVSSOL3 or their colleague should have been involved, as they were prior to the pandemic, working within Covid-19 restrictions, as the police were. Other routes to referral remained available, but as AVSSOL3, said, these victims of crime were often untrusting and suspicious of authority, particularly the police, so the most vulnerable victims of crime potentially suffered here as a result. This is supported by the Polaris Project (2021) who point out that victims of human trafficking target people at their most vulnerable, manipulating and grooming them, and Stockl et al. (2021) who reported threats towards victims of crime or their family members as a potential reason for a lack of reporting by this cohort.

Participant experiences of referrals during the Covid-19 pandemic reflect those of other agencies and research in the same period (Almeida 2020, Carrington et al. 2021, Engleton et al. 2022). It is disappointing that the support for human trafficking victims was not available at a time when they would have been particularly vulnerable as they would not have been working and would have been unable to seek support from elsewhere, but again this stemmed from the interpretation of key workers during the pandemic.

Impact on staff and volunteers

The volunteers from both restorative justice services and the Victim Support Service who participated in this research spoke about the difficulties of volunteering during the Covid-19 pandemic. AVSSFG5 said that they could not take their laptop in if they had IT issues and would just have to wait until they were allowed to again, but did not know when that would be. This volunteer, and one other, also noted that because they were unable to go

in and see other volunteers and staff, they found that they were losing touch with people (AVSSFG4 and AVSSFG5). The volunteers found that they often had less motivation because they were not staff members sat working on their laptops daily and they had to make an effort to log on and engage but those interviewed did not find that it put them off continuing to volunteer for the services (AVSSFG4 and AVSSFG5). BRJFG2 commented that due to lockdown they had the advantage of working from home and a reduction in travel expenses, but for BRJFG7 there was frustration around how easy it was for people to not attend scheduled meetings and BRJFG7 questioned whether participants were missing the lack of value and investment in the restorative justice process because they were not getting the personal touch they would get when meeting face-to-face. This was not raised by any other participants but is a pertinent point as if victims of crime or other participants did not feel the investment because it was just a video call, why would they make the effort to turn up to meetings?

With the restrictions putting their face-to-face services on hold, the Victim Support Service lost a lot of their volunteers (AVSSOL3, AVSSSL2). Whilst their service moved online and they were able to offer support remotely, this did depend on the ability of volunteers to use the technology that they were being provided with, a common issue identified during the pandemic (Almeida 2020), and AVSSSL2 explained that some of the volunteers were unable to use basic IT equipment, whilst others refused. This was an area AVSSSL2 highlighted would be a requirement moving forward when recruiting volunteers to the service: "They have to have an understanding and a willingness to embrace light technology … it's not gonna be too complicated but being able to turn on a laptop and just work their way round a laptop and be open to being taught how to use Teams and things is important".

BRJSL2 was not working during the start or peak of the pandemic (2020), however they said that on their return they had mixed feedback from volunteers about the move to remote working. BRJSL2 explained that many expressed an interest in going back to face-to-face as soon as possible, whilst others shared that there were some ways of virtual working which were beneficial that they would want to keep when returning to 'normal'. This reflects the views of the staff from the Domestic Abuse Agency who participated in the focus group. The DA focus group participants agreed that as a result of the pandemic they were now more efficient as they could write more accurate notes on victim records as they were able to do it immediately after a conversation and could focus more on the individual (BDAFG3, BDAFG5, BDAFG6). The DA focus group participants explained that prior to the pandemic their way of working "wasn't very productive", with "a lot of wasted time" (BDAFG3) due to them having to travel, sometimes some distance, to meet victims of crime. Whilst note taking may not appear to be something directly affecting victims of crime, it helps staff to better make sense of and understand the conversation they have had, reflect and refer back to at a later date, showing they have provided what victims of crime wanted – to be listened to (Roessingh 2020). However the staff participant views do not align with those of BDAP6 who was left feeling isolated as a result of support only being available remotely. Interestingly this view is very different to that of the Sexual Abuse Agency where "our ISVAs didn't want to stay at home" and whose staff were quickly back out offering face-to-face support because they were considered to be essential workers (BSASL4). Although not possible within this piece of work, it would be

interesting to explore the responses by similar agencies to the pandemic, given the different reactions and approaches highlighted within this chapter.

Prior to the pandemic, staff and volunteers had colleagues to offer support in the office, however with the work from home order staff were often working from home without that support, often supporting individuals involved in complex cases. Pfitzner et al. (2022) have highlighted the risk of burnout and "derailing longstanding practices put in place to safeguard practitioner well-being and ensure self-care" (p38) with practitioners having to provide this support from home. This is something AVSSSL2 acknowledged, but pointed out that as they were working from home this meant that staff needed to identify for themselves if they were struggling and needed support and ask for it, rather than relying on having people around them to turn to or a manager/supervisor available to notice if they were struggling. This is a concern as it places additional pressure on staff to identify and alert senior staff during a difficult time when they may feel speaking up may be a detriment to their employment.

On reflection it is somewhat understandable that some agencies provided support remotely rather than face-to-face as research conducted in America and the UK shows that during the Covid-19 pandemic there was a higher mortality rate amongst those considered to be key workers than those who were not (Matz et al. 2022, Berg and Soares 2023). This was due to the increased risk of exposure to working face-to-face daily during the pandemic. In an attempt to mitigate this funding was made available (see below), and utilised by the Sexual Abuse Agency who ensured that their offices and refuges were appropriately equipped with safety screens, hand sanitiser, masks etc. as well as providing kits to staff to help them to remain safe during this period (BSASL4).

The feedback from the staff and volunteer participants in this research about the impact of the Covid-19 pandemic has primarily focused on staff sharing how much easier or more difficult the changes implemented made their job. AVSSSL2 was the only participant who highlighted the need for staff to identify for themselves if they needed support, whilst others simply found it easier for them to work remotely as they could get more done during the day, whilst working from the comfort of their own home. Remote working has become a topic of debate in many fields since the ending of lockdown restrictions and a return to work, with many flagging this as helping people to have a better work-life balance, something which is crucial for the mental wellbeing of people working in such a complex area (Brace 2022). Whilst this may have identified a number of benefits to the staff, in this context the needs of the victims of crime who the staff are there to support need to be considered and the potentially competing demands of victims of crime and staff.

Impact on service delivery

BDASL4 summed it up when they commented that as a result of the pandemic "everything's gone a bit out of the window". Each of the agencies participating in this research took a different approach to the delivery, or non-delivery of services. In Area A the Home Protection Agency shut down entirely and furloughed their staff, whilst the

Victim Support Service and Restorative Justice Service went entirely remote. In Area B the Restorative Justice Service and Domestic Abuse Agency went remote, whilst the Sexual Abuse Agency went remote for a few weeks at the start and then were straight back out offering face-to-face support as soon as they had been confirmed as key workers and were able to provide protective equipment for their staff.

As mentioned above, the Home Protection Agency stopped all work at the start of the pandemic. Considering the support that this agency offered – visiting individuals aged over 60 at home, checking their security and advising on security measures – they would have been classed as an essential service, making the staff keyworkers and therefore able to continue to work during the national lockdowns (UK Health Security Agency 2021). The Home Protection Agency, however, considered the support they provided to be on par with that of a tradesperson (AHPOL1), as opposed to a key worker providing an essential service. As a result of their decision to shut down completely a number of victims of crime would have gone without support, having to find ways to manage their needs for themselves and no longer requiring support by the time they reopened. Engleton et al. (2022:2650) pointed out in their research that participants wondered whether services shutting down for a period "may have disrupted the delicate process of seeking support". This was likely the case here as victims of crime are not going to want to wait around until support is available to them again, instead seeking out alternative measures to help them feel safe again in their homes. This is supported by Almeida (2020) who found that a third of Victim Support staff and volunteers believed not providing face-to-face support during the pandemic "negatively affected their ability to cope and recover" (p30). This is an interesting view to take as this does not reflect the views of many of the participants in this research, with the Domestic Abuse Agency in particular highlighting (above) that they were able to spend more time dedicated to the individuals they were supporting. Nevertheless, by shutting down a service to a group who have already been identified as being more vulnerable, hence targeting support towards that group, this was a missed opportunity for victims of burglary within Area A during the pandemic lockdowns, as well as having the potential to put multiple victims of crime at risk of revictimisation as they did not have individuals with the expertise to advise on areas of them home they could shore up. This is another example of an essential service that suffered as a result of the Covid-19 pandemic and interpretations of key workers.

Area A's Restorative Justice service continued to receive and accept referrals during this time, but were not processing these, waiting until restrictions lifted, whilst they kept in touch with existing cases, updating if anything was going on. When they returned to the office in June/July 2020, there were still some restrictions in place (Institute for Government 2022). They therefore decided on using a virtual platform, with ARJOL2 updating the victims of crime they were working with that they would be training all their facilitators to use that platform to allow them to be able to offer RJ moving forward. Whilst ARJOL2 commented that this was positive for them as facilitators for training and communicating with their staff, leading to an increase in confidence in using virtual platforms, it did not really take account of the fact that if a perpetrator was in prison, they did not have any access to them. ARJOL2 explained that this offered restorative justice an opportunity "to be more open and flexible to the way that people wanna

communicate", allowing "confidence and flexibility in their communication" as the virtual platform was used to help facilitate shuttle mediation and letter facilitation. Whilst there have been some examples of conferences taking place remotely (Ian Marder, European Forum for Restorative Justice 2020) these examples have been few and far between and more research/write up is needed to better understand these. ARJFG6 explained that whilst they did the training and were moving towards virtual conferences, they were not aware of any taking place as lockdown had eased, but they did stop everything for around six or seven months. They did have significant concerns about virtual conferences given they would be unable to see the body language being displayed by others in the meeting, as well as whether to have a facilitator present with the individual harmed and another present with the perpetrator, how they would know if someone had simply left the meeting or if they were having technical difficulties and the importance of having additional guidelines and ground rules to make this easier and clearer for all participants and reduce the risks. Body language is important when it comes to restorative justice as there is no screen to hide behind so it is possible to see when someone may be uncomfortable, lying or disingenuous (Martin et al. 2013).

At the time of interview, progress was being made in Area A Restorative Justice Service towards a return to in person restorative justice conferences, however these were not without the added risks from the pandemic. ARJOL2 shared that alongside the usual preparation and risk assessing for a conference they now also needed to keep the room ventilated, all participants were required to wear face masks (which had the potential to hinder communication), as well as all participants being required to complete a lateral flow test before attending. This therefore meant that the conference could be called off last minute if someone tested positive, potentially causing harm to participants. There was also the added risk that they could go through with the conference, taking all the necessary precautions, but a participant could actually get Covid-19 from that meeting, causing harm to the participant as a direct result. What does not appear to have been considered is the potential risks of not holding a conference because of the pandemic, with a focus on the direct physical health risks of Covid-19, rather than the mental and emotional risks of continued delays.

Whilst some services suspended 'normal service' initially (Area A Restorative Justice Service), they used the opportunity to explore new opportunities for service models and delivery (Pfitzner et al. 2022). APCC explained that their therapeutic emotional support services offered 'walk and talks' where the support and engagement could be offered whilst out walking with someone, in line with government restrictions (Siddique 2020) and that the changes to delivery had been engaged well with by victims of crime.

For Area B, services moved online as well, however "if someone absolutely needed to see someone then the offer was available" (BPCC, BDAFG6). The Sexual Abuse Agency continued to deliver support face to face (BSAFG11) and shared that in addition to continuing to attend interviews with victims of crime, they would also offer to meet victims of crime in parks or to go for walks with them (BSAFG10, BSAFG11), with the same being offered by the Restorative Justice Service (BRJFG6).

Prior to the pandemic the Domestic Abuse Agency would offer both face-to-face and telephone support, however the need to move to telephone only support meant that they would need to agree a weekly or fortnightly call with the victim of crime they were supporting at a time that was safe for them to talk. Prior to the pandemic this was often mitigated by the Domestic Abuse Agency who had a number of partners they worked with whose offices they could use to meet with victims of crime "so that it's not obvious that the client is coming to meet us about domestic abuse" (BDASL4). For the Sexual Abuse Agency, however, it was business as usual as they continued to deliver their services during the pandemic as they "were deemed essential workers by the Minister of Justice" (BSASL4). The ISVA service therefore "continued to deliver face-to-face services throughout the pandemic" (BSASL4).

Research has shown that there were issues with engagement as a result of the Covid-19 pandemic, with Almeida (2020) indicating that lockdown had affected not only the engagement of victims of crime, but also their experience of the criminal justice system as a whole. For BDASL4 this was not the case: "less people have dropped out the service and they're less … flaky so it's being able to always be there for their appointments because they haven't gotta travel anywhere, they haven't got to get anywhere … and that surprised us, you know, we always thought that face-to-face was always better and it isn't necessarily so I think the fact now that we can offer a variety of ways so either a telephone, video calling or face-to-face works really well". This is the opposite of Engleton et al. (2022) who found that victims of crime were less responsive to attempts by victim services to engage with them during the pandemic due to the measures that needed to be put in place, and even after when they were operating at half capacity to meet with people in person and were unable to offer consistency. For those who had been engaging prior to the pandemic, Engleton et al. (2022) found that keeping victims of crime engaged had become harder with some of those they interviewed suggesting that this may be due to lack of privacy with so many people at home all the time.

Feedback from victim participants in this research varied. BDAP3 said that whilst the support they were receiving had been impacted by the Covid-19 pandemic, they considered it to be positive. This was because, as a result of their perpetrator being female, they struggled to communicate with women and found it easier to talk on the telephone to support services in their own safe space, rather than face-to-face. This reflects Almeida's (2020) findings that this was preferable for some victims of crime. In contrast, BDAP4 felt that as a result of the Covid-19 pandemic they had a "less tangible experience", as they would have preferred the face-to-face meetings and to be able to see the body language of the individual working with them. This highlights the importance of support services adapting their delivery to the needs of victims of crime. Before the Covid-19 pandemic everyone thought services had to be delivered in person. Not only has the pandemic highlighted that the technologies we have available today have made it possible for us to work remotely and communicate at the touch of a button, it has also highlighted other ways to communicate with victims of crime which may be preferable to them. Now victims of crime can have a choice in how they receive support.

BRJFG9 commented that the pandemic had a significant impact on their ability to progress cases when the perpetrator was in prison as there was a backlog of

appointments for the prisons during this time, all of which were taking place online, so whereas before the pandemic they could arrange a prison visit within a few weeks, during the pandemic they were waiting a number of months before they could book a video call. BRJSL1 explained that they had to quickly adapt to the changes of the pandemic and working in an online world, something which they were not prepared for at the time and they had to wait a number of months to have a platform set up for them to use. In addition, a number of their volunteers were retired and were shielding (BRJSL1) per government guidance and therefore unable to take on cases for them. There were concerns at the time of interview about the risk of disengagement as prisons continued to prevent access. At the time of interview they were starting to meet in parks and cafes, and then meeting venues as these started to open up again. However this meant additional expense as they would now need to book meeting venues to meet with individuals for preparation meetings as they could not visit them at home. At the time of interview they were offering victims of crime a choice as whether they wanted to meet in person or online/telephone.

The differences between the approaches taken by the Domestic Abuse Agency and Sexual Abuse Agency are significant, with one immediately acknowledging their role as an essential service and acting accordingly, whilst the other did not (despite being listed as an essential service). At no point during the interviews did any of the Domestic Abuse Agency staff say that they were keyworkers or express that they ought to be working face-to-face during this time. Rather they shared the benefits to them of this change in service delivery, rather than any benefits to victims of crime. The literature shows that for domestic abuse victims there were not really any benefits to being trapped at home with the perpetrator, unable to make telephone calls to receive the support they needed.

Impact on the courts

It was well known during the Covid-19 pandemic that there were significant delays in the courts. The Victims' Commissioner (2022) first addressed this in her 2021/2022 Annual Report, pointing out that there were already delays prior to the pandemic with over 38,000 cases outstanding. Over the course of 2020 (the start of the pandemic) this backlog increased with around 59,000 cases outstanding in the Crown Courts alone (Victims' Commissioner 2022).

Whilst none of the victim participants in this research felt that there had been any delays for them in reaching court (if their case did in fact reach court), this backlog was flagged by the agency participants as having a significant impact on them. This was felt widely by both Areas A and B as victims of crime therefore received support from services for longer as they were supporting them right through the court process as well in some cases. This therefore had an impact on capacity, with services providing support to an individual victim of crime for longer periods of time, meaning staff and volunteers either had a higher caseload and/or held waiting lists for victims of crime needing support (AVSSSL2, BDAOL3). BSAFG13 explained that where there was a long delay they would discuss this with the victim of crime and whether they wanted ongoing support or to stay in touch and touch base at regular intervals, before picking support back up for court.

Almeida (2020) reported the same issues, with the court delays also having a significant impact on victims of crime, with victims of crime reported to be waiting in "limbo", waiting for a trial to come to its conclusion before they felt able to "move on" (p21). BDAOL3 said that these were particularly prominent for domestic abuse cases. This meant that it was "much harder for people to break free because … they've still got that hanging over them or they're still stuck in that cycle" (BDAOL3). For victims of domestic abuse it is important to have an "end game in sight" otherwise the support services risk "doing them an injustice … if we foster that dependence on us" (BDAOL3). If domestic abuse victims became too reliant on their support workers then they would be unable to take on any new cases and offer support to others.

It is interesting again that the Domestic Abuse Agency and Sexual Abuse Agency took different approaches to this, with one closing or 'pending' a case until court with agreed timeframes for keeping in touch, whilst the other continued to hold the case until they had been through the court process. Given the fact that it managed not only staff workload but victim expectations, as well as avoiding victims of crime having an overreliance on staff to provide them with support, the Sexual Abuse Agency's approach of closing or 'pending' a case until court seems to be the most effective.

Impact on funding

Whilst commissioning was discussed in Chapter 4 and will be focused on in the discussion, the Covid-19 pandemic had a significant impact on services, leading to increased financial support being made available to victim support services to enable them to continue to provide support during this time, particularly domestic abuse and sexual abuse services (MOJ 2020g).

For APCC this meant an increase to their workload as "the MOJ have just dropped things on us with absolutely no notice and expected us to create processes". This is an unhelpful way of working which could have caused additional risks to victims of crime and the spending on funds designated for victim support services. In Area B this meant an increase in staff to support victims of crime for both the Sexual Abuse Agency and the Domestic Abuse Agency (BDASL4, BSASL4). Whilst a useful addition to aid with the additional workload at that time, it did not take into account the fact that cases were held for longer as they waited longer for a court date, or the additional support needs identified as a result of the pandemic, including support about the pandemic (Engleton et al. 2022).

Alongside funding to increase the number of staff available to support victims of crime coming forward, additional funding was made available to help protect staff and volunteers during the pandemic. This included packs which included screens and hand sanitiser for offices and refuges, as well as "individual PPE packs for us to take out … gloves, masks, all the liquids" to help reduce the spread of Covid-19, as well as being amongst the first to receive their vaccinations (BSASL4).

Whilst it is positive that central government increased the funding available during the pandemic to help with support services, the bulk of this was for victims of domestic abuse and sexual abuse, and did not consider the needs of victims of other crimes (MOJ 2020g). This could perhaps explain why agencies such as the Home Protection Agency stopped for a period during the pandemic, because they were not able to access the additional resources available because they supported burglary victims. They also did not consider what would happen to those services when the funding came to an end, with time and money having been spent recruiting and training staff to be equipped to handle such complex cases, only for this to be come to an end and not offered more permanently. At the time of writing, PCCs are expecting an update on their allocations from the MOJ in December 2024 (Cleveland PCC 2024).

Summary

The Covid-19 pandemic was an unanticipated time for the entire world, with most countries introducing mandatory lockdowns and work from home practices. For this research it meant delays to the start of fieldwork as well as the methods to be used to collect data as it was not possible to meet with participants face-to-face as originally planned, but also gave an unprecedented insight into how agencies adapted at a point of global panic.

For some (the Sexual Abuse Agency) it was seen to be 'business as usual', albeit with additional precautions in place to protect staff and the victims of crime they supported. For others, it meant the complete shutting down of a service with no support being offered (the Home Protection Agency), potentially increasing the risk of revictimisation for victims of burglary aged over 60 years as no practical support was available to them, or only accepting referrals and keeping all other cases on hold (Restorative Justice Service Area A). Most of the agencies who participated in this study found a way to work during the pandemic by making all their working remote (Domestic Abuse Agency, Victim Support Agency, Restorative Justice Service Area B) and continuing to engage with victims of crime online/via the telephone.

Although outside the scope of this research, it would be interesting to see the impact having a face-to-face service had on victims of crime during the pandemic, compared to those who worked remotely, or who were supported remotely, or who had to wait for the country to open up again before they could receive support. Here we have a Domestic Abuse Agency who did not consider themselves essential workers, embracing the administrative benefits for themselves of remote working, a Sexual Abuse Agency who went back to face-to-face working as soon as possible because they were essential workers, and a Home Protection Agency who shut down completely until more places started to open back up.

It would not have been easy for the Sexual Abuse Agency to return to face-to-face working at the peak of the pandemic, with significant shortages in personal protective equipment across the country and being prioritised for those in hospitals and care homes (British

Medical Association 2024) but there is no reason these other organisations could not have been doing the same thing as key workers.

Some victim participants were impacted by the pandemic, particularly those who had experienced domestic abuse, whilst others had not been using services during the pandemic and most of the impact on victims of crime was identified by the staff and volunteers working with them who were able to identify the differences between those they worked with pre-pandemic and those they worked with during the pandemic, highlighting the longer periods of time a case may be open to them due to difficulties in the victims of crime finding privacy to speak with them at home or delays in the criminal justice process.

Whilst additional funding was made available during the pandemic to help agencies to protect their staff and volunteers, some of this funding also funded additional staff to help with the increased workload as more people came forward to share that they had been victims of crime. This additional funding was time limited so it remains to be seen what the government will do when the funding comes to an end to manage the loss of these roles in 2025.

Chapter 8

Discussion

In 2012 the then Conservative-Liberal Democrat Coalition Government announced plans to reform support for victims of crime across England and Wales (MOJ 2012a, Simmonds 2016). Under these new plans victim support services would target those "most seriously harmed by crime" (Lord Chancellor and Secretary of State for Justice, MOJ 2012a:3; p10). Under these new proposals support services would be decentralised, with the commissioning of these victim support services moving from a national to a localised approach, in line with the then Coalition government's wider agenda "of allowing greater local discretion and empowerment" (Brain 2014:47). Since 2014 the commissioning of support services for victims of crime in England and Wales has fallen under the remit of Police and Crime Commissioners (MOJ 2012a, Madoc-Jones et al. 2015).

Fundamental to this discussion are the two main research questions:

1) What is the experience of victims of services commissioned by their local Police and Crime Commissioner?
2) What is the victim label and who adopts it (in this research)?

This chapter will look to address Question 1 by breaking it down to the topics covered in the interviews: the needs of victims of crime, the pathways to support for victims of crime, feedback from victims of crime on the agencies they were supported by, the commissioning of victim support services and the future of victim support services. Question 2 will then be addressed by considering the characteristics and terminology used to describe victims of crime by all the participants – victims, staff and volunteers, operative leads, strategic leads and OPCCs – in this research. This discussion relies on the views of the individuals participating in this research, not external data or reporting.

Question 1 – what is the experience of victims of services commissioned by their local Police and Crime Commissioner?

Victim Needs, as seen by providers and as recognised by victims themselves

Two Police and Crime Commissioner areas participated in this research – Area A and Area B. For each area, needs assessments were undertaken by the OPCC to identify victim needs within the area. Needs assessments are used to help identify areas for improvement and development as well as gaps in provision to help inform areas of focus (Royse et al. 2009). Goodey (2005) highlighted that "in the aftermath of crime different victims have very different needs" (p121), but the understanding of what one needs is based on what the society believes a victim of crime should need (Shapland 1984, Shapland et al. 1985).

In Area A the needs assessment identified a lack of local understanding of victims in that area, because the individuals providing support at the time were not from the area, as well as a need to provide support to victims of human trafficking, specialist support for young people and the importance of mental health support for victims of crime (APCC). Area A therefore ensured that they commissioned specialist support for these areas, through the inclusion of mental health nurses within the Victim Support Service, specialist support workers for victims of human trafficking who spoke the identified languages, and specialised support for young victims of crime (APCC). None of the victim participants in this research had need of these specialist services and most of the specialisms did not participate, therefore it is difficult to compare the outcome of the needs assessments to the needs identified by victim participants in this research, especially with such a small sample size. These identified needs were highly specialised and are unlikely to be relevant to the entire victim population of Area A and could not be provided through informal support networks (Brickman 2003). The Area A needs assessment also identified the need for a local service, run by local people, who understood the make-up of the area, which is why they developed an in-house Victim Support Service (APCC). This service provided support for less specialised crime victims, as well as co-locating with others including the support for victims of human trafficking. None of the victim participants in this research identified the need for a local service, perhaps because they already had that and did not know what it was like to not have access to a local provider, although BDAP5 had utilised the national service and noted that their experience was not as personal as with the local provider.

In Area B the needs assessment identified some support services in place across the PCC area offering support to victims of crime, but with geographical gaps in that provision (BPCC). There remain gaps in provision across England and Wales (Victim Support 2024a) but BPCC made attempts to address their own gaps. Using support for victims of sexual abuse as an example, the Area B OPCC developed a specification that required support to cover the whole PCC area. Where there were already multiple agencies spread across the area, they came together to form a partnership to share the PCC area (BPCC). Additional needs assessments were undertaken by both OPCCs during the pandemic, with BPCC sharing that this was used for the grant funding issued during that period.

Victim participants in this research shared a variety of needs, regardless of the type of crime which had been committed. The most prevalent victim participant identified need was 'having someone to talk to', closely followed by 'reassurance', 'the police', 'to be understood' and 'education' (see Figure 1 in Chapter 6). The police have a specific role to fulfil when it comes to crime, but they work with victims of all crimes.

The first four victim participant identified needs are non-specific to the type of crime that had been committed and could be the needs of any victim of any crime, highlighting the fact that there are a number of generic needs for victims and that victims of different crimes may not necessarily have different needs (Goodey 2005). Some of these prevalent needs have also been recognised in the various iterations of the Victims Code through "reassurance and counselling" to provide that 'someone to talk to' and 'reassurance' (Goodey 2005:121). The final victim participant identified need,

'education', was identified by victims of domestic abuse who highlighted a lack of knowledge and understanding of coercive and controlling behaviour, something which became an offence under the Serious Crime Act 2015. CPS guidance in relation to this offence, published in April 2023, acknowledged that "the victim may not be aware of, or be ready to acknowledge, abusive behaviour" (CPS 2023), supporting victim participant assertions that they did not know that what was happening to them was a crime and that this was something that they needed to learn about (education).

Taking into account the fact that the top four prevalent needs identified by victim participants in this research are non-specific to the crime type, one has to question the need for specialist services if victims of crime all have the same needs or, where there are specialist services in place, why they are not working together to support an individual, instead keeping that victim to just one agency. It should also be considered that where victim participants in this research have identified a need for 'someone to talk to', 'reassurance' and 'to be understood', whether needs assessments have interpreted these requirements as needing to be specialists in that area to address those needs, as opposed to perhaps a generic victim support service as, from this research, it is unclear.

The most predominant victim participant-identified needs fell into the categories of being practical and emotional and were focused around safety and emotional support (Shapland and Hall 2007, Zweig and Yahner 2013). It is interesting to note, however, that whilst some victim participants, such as AHPP1, stated that they needed practical support immediately following the crime, a frequently identified need for victims of burglaries (Brickman 2003), none of the participants came out and said that they needed emotional support during this time, even if they acknowledged that they were going through a difficult time and needed some support:

> ... I needed somebody to understand how I was feeling which at that time was in a very dark place ... (BDAP4);

> ... really helps to talk to somebody who can actually like understand ... (BDAP6);

> ... when you're in the dark about these situations you don't know how it's gonna improve, if it's gonna improve and why (BRJP2).

This is where the role of support workers is crucial as a victim of crime may not come out and say 'I need counselling', 'I need security for my home' or 'I need help understanding what domestic abuse is'. Instead they may talk about the effects the crime has had on them such as a loss of confidence, feeling unsafe in their own home, and they may assert that what happened to them was not abuse rather than talking about what it is that they need (Maguire and Corbett 1987). Here their support worker could make suggestions based on this information, a recommendation for referral for counselling, to the Home Protection Agency or on for a space on the Freedom Programme (Freedom Programme 2018).

Finding out the reason why they had been the victim of a crime was identified as a need by some victim participants in this research (see Figure 1 in Results, n=5). It was the predominant response for those who had been the victim of a burglary, as they found themselves wondering whether they were to blame because they had done something that invited someone to break into their home or they did not do enough to deter offenders or if they had been watched and targeted (Canadian Resource Centre for Victims of Crime 2005).

It is important that victim participant identified needs are used to inform the support offered to victims of crime. Whilst PCCs undertook quarterly contract monitoring with their commissioned providers, from these interviews it did not sound as though there was much about what the victims of crime who used the services shared they needed, and there was no independent evaluation. None of the participants in this research were aware of any evaluation taking place at the time of interview, although AVSSSL2 said that they had had someone in from the PCC previously to check service delivery and their MOJ funding, the domestic abuse focus group participants advised that there was an evaluation lead within the organisation but they did not know what they did or looked at and BSASL4 said that they had a university undertake evaluation of the first two years of their project but whether this was specifically the PCC commissioned work was unclear. There was not, however, any substantial evaluation taking place exploring the impact of their services. This is an area which needs thorough consideration and to ensure thorough evaluation of commissioned services otherwise how do they know if it is working? The cycle of commissioning includes a review stage for this purpose and PCCs should be following this to ensure commissioned services meet victim need and are not wasted (Commissioning Support Programme 2010). This continues to be an area for improvement, with minimal research about the work being undertaken by PCCs (McDaniel 2018), alongside, it seems, minimal research about the impact of their commissioned services. These go hand in hand but is perhaps unsurprising given how many agencies would not even have a conversation with the researcher about this piece of research without PCC permission.

As already highlighted above, support workers are crucial in being able to identify the support that may be available for a victim of crime. It is therefore important for commissioners, when commissioning victim support services, to consider how clear the needs of victims of crime may be. It is essential that the views of victims of crime inform the work of those supporting victims of crime. However, victims of crime may not be aware of the support that may be available to them in this situation, which is unsurprising if this is their first experience of crime (Victims' Commissioner 2024). As this researcher discovered, it was difficult to identify support services in some areas, something which requires improvement to aid victims of crime who may be looking for support with their needs and be looking to self-refer, especially if they have not reported to the police. If it is difficult for someone with knowledge in the field to find what they are looking for, how difficult must it be for a victim of crime who may not know what they are looking for. ARJP6, for example, was the victim of a burglary and noted that they had not been offered any additional support following this burglary, despite the fact that they were over the age of 60 and therefore met the criteria to be supported by the Home Protection Agency. This highlights several flaws in the process which should be picked up when reviewing

commissioned services. Firstly, it is possible for someone who met all the criteria for the Home Protection Agency to not be referred to the Home Protection Agency. This means there are victims of crime not being offered the support available to them. Secondly, victim services are not referring to other victim services within their own area to support with the needs they themselves are unable to support. This is especially concerning for Area A as they were following a hub model, so when ARJP6 shared their needs with the RJ Hub they should have identified the most appropriate service to meet that need as an RJ service cannot do RJ and advise on securing a property but there was a service specifically designed for this purpose. Despite the procedures in place – the police making referrals for burglary victims and the Home Protection Agency having access to and mining the police database (see Chapter 6) – ARJP6 was missed and therefore missed out on receiving support. This highlights an issue in Area A not only that individuals can slip through gaps, but also that there does not appear to be any cross-agency referral, despite the establishment of a victim support hub model to aid partner working.

When interviewed ARJP6 was adamant that they did not need anything after the burglary because they lived with their partner and therefore had informal support (Brickman 2003, Walklate 2017). ARJP6 explained that they only had altruistic reasons for engaging in restorative justice because they felt they needed to try to help the perpetrator, in spite of the fact it was "quite a scary option" for them. Their responses during this research would, however, say otherwise as ARJP6 shared that they wanted to know why this had happened and what the background was to the offence being committed, and whilst they may have said they did not need anything because they lived with their partner, they did go on to share that they would have liked some practical support. If they disclosed this to the researcher during this research when asked what their needs were following the offence, one has to assume that this was shared with the RJ Service who were not in a position to help with the practical support but could have made a referral to the Home Protection Agency who could have helped with practical support but could help them to better understand why this had happened through their RJ intervention. It is also important when engaging in restorative justice that this is thoroughly explored with the participants as, whilst ARJP6 was clear that they engaged in RJ for the perpetrator, they did actually want to know why, indicating a need for themselves. This is just one example of a victim of crime who would have benefited from support from two commissioned victim support services but was contacted by one.

ARJP6, when asked, said that they were not offered an opportunity to be referred to the Home Protection Agency. As they met the Home Protection Agency's criteria of being the victim of a burglary and they were over 60 years old, ARJP6 should have been offered this referral by both the police, and the RJ service. As someone unfamiliar with this area they were unable to specifically request a referral or refer themselves because they did not know such a service existed. As this was missed by the police and the Home Protection Agency's mining of police data, ARJP6 should have been referred by the RJ service when they expressed they would have liked some practical support. It is of concern, however, that there is an age criteria for referral to the Home Protection Agency and that practical support is not available to victims of burglary aged under 60 years. It is unlikely that other burglary victims will receive the same level of practical support securing their property

that the Home Protection Agency offers to those over 60, discriminating against victims of crime for being too young. A generic do all support agency may be able to do this, however from the interviews with the Victim Support Service it did not appear that this was a service that was offered, especially as they were all working remotely due to the pandemic at the time of interview. By only offering the service to those aged over 60 the Home Protection Agency is not doing anything wrong – in fact the EU Directive 2012 points out that Member States may decide who receives support, however the fact that the Victims' Code (MOJ 2020d) states the rights of all victims to be referred to support does leave this as a potential grey area as they may be referred for support, it just may not be the same support.

In considering the 2019 Victims' Code Consultation (see Chapter3, MOJ2019a) around enhanced need, it was proposed that amalgamation of the three categories – victims of the most serious crime, vulnerable or intimidated victims, and persistently targeted victims (MOJ 2019a) – may make it clearer that it should be at the discretion of agencies to identify victims with the greatest need, however as this research has shown, victims do not always present with clear needs and on reflection may actually be more difficult for agencies to do this.

Victims of crime need to be given the opportunity to feel comfortable voicing what it is they feel that they need or even talking through where they have concerns, so that support services can, in turn, make them aware of the support that may be able to help with addressing that need (Victim Support 2024b). BRJP2, for example, thought that they had received all the support that they could until they were talking to their support worker about how they were feeling one day and the support worker suggested RJ as an option to meet the needs they were describing. This provided them with an opportunity to address a need they had not previously been aware of and were not aware was even an option and this occurred many years after the crime took place, and a number of years after having reported to the police. This is the only example within this research of one service referring to another but is something that should be more frequent.

Victim participant-identified needs need to be the starting point for support being offered to victims of crime. With each area undertaking needs assessments, PCCs are attempting to ascertain and understand victim needs in their local area. However, simply contract managing is not enough and PCCs need to undertake independent evaluation to ensure that the services they are commissioning are meeting the needs of their victims. Without this it is impossible to determine whether having an emphasis on specialised support services to only meet the needs of victims of specific crime types is justified. Whilst the majority of the participants in this research have been satisfied with the support they have received and have felt their needs have been met, some have not. This means further work needs to be undertaken to ascertain where the gaps are and ensure that no victims of crime are missing out on having their needs met.

Referral Pathways

Historically, Victim Support and the police had an agreement that all victims would automatically be referred to them for support, and victims would have to 'opt out'

(Mawby 2016, Simmonds 2016, Shapland 2018). As Rock (1990) explained, this led to a lot of people being referred, but not a lot of people taking up support (MOJ 2012a).

Under the Code of Practice for Victims of Crime, a victim of crime has the right to be referred to support services, for those services to contact them to offer support, and/or for the victim to contact the support services themselves (MOJ 2023). One of the reasons for changing to localised commissioning was to overcome the previous waste from all victims of crime being referred to victim support services when not all wanted this support (MOJ 2012a). The victim participants in this research were referred from a variety of sources including the police (5), partner agencies (2) and self-referrals (4). The majority of the victim participants had reported the offences to the police and had police involvement, although not all of those who experienced domestic abuse had. All four self referrals were undertaken by those who had experienced domestic abuse. Some were referred by the police following the reporting of the offence, in line with the Victims' Code guidance (3). Three of the restorative justice referrals were slightly different because they were restorative justice and the intervention was either offender initiated (2) or used as an alternative to court (1). The final referral method was through identifying victims through police database searches (2), and this will be discussed further below.

The referral sources indicated by victim participants are in line with the sources of referrals identified by the agency participants in this research, with some agencies identifying the police as their main source of referrals (Home Protection Agency, Domestic Abuse Agency). Police being the main source of referral is positive to see as it shows that when a crime is being reported and there is an identified victim, the police are completing their duty under the Victims' Code (Right 4) to ensure that the victim is suitably informed of victim support services and a referral undertaken to those services (MOJ 2021d). Although a very small sample, this is in contrast to the DA victim participants in this research as they all self-referred. For some, such as the Victim Support Service in Area A, this is something that requires minimal action from the police as the Victim Support Service is sent details of all victims and crimes entered onto the police database. As explained in the results chapter, in Area A the Victim Support Service were sent the details for all victims as they were part of the police organisation, meaning they continued in a similar vein to how Victim Support worked previously, receiving all police referrals (Mawby 2016, Simmonds 2016, Shapland 2018). There were therefore no concerns or worries around data protection (AVSSSL2).

It does, however, make one wonder about those who are not reporting these crimes to the police and whether they are aware of the support services available to them as a victim of crime and how to access them. When first embarking on this research the author took the time to explore online what support was available for victims of crime in different locations (see Chapter 5 – Methodology). When doing this there were some localities where this researcher struggled to understand the websites and directories of support services, even knowing as someone with an interest in this field, the things to look for. If a researcher in this field struggles to identify who to contact and how to contact victim support services because the websites are unclear, how can someone who has been the victim of a crime be expected to identify and understand what is available online? Victims of crime who are not reporting the crime to the police need to

be able to easily find and access support services, and support services need to be able to easily refer to other victim support services if victims have needs which they are unable to meet themselves. The non-reporting of an offence is particularly prevalent for sexual offences with 5 in 6 women and 4 in 5 men not reporting to the police if they have been raped (Rape Crisis 2023). Research shows that individuals who have been the victim of a sexual offence often experience high levels of harm and have a high number of needs (Asadi et al. 2023, NPCC 2024, RAINN 2024). Access to support, irrespective of reporting, is written into the Victims' Code (Right 4) (MOJ 2021d) but if this is not easily found there is an increased risk to harm of victims of sexual offences who may already be dealing with a multitude of harm and needs but are now missing out. This could also be the case for those who do report as they are not automatically referred to victim support services which, rather than overcoming a high number of unneeded referrals is actually just excluding those in need.

In Area A victims have the Victim Support Service, which is a hub for victims. A number of agencies were co-located within the hub, with the idea being that it will be easier to refer and seek support from partner agencies to support victims (APCC). However, none of the victim participants in Area A received support from more than one agency. The only victims who received support from more than one agency were from Area B, where there was no hub model. These were one domestic abuse victim participant who went to a Refuge, and one RJ victim participant who first used a victim service (not included in this research as they were in another area) who subsequently referred them to the RJ agency. Although it is impossible to generalise this research given the small number of victim participants, the findings here do not appear to support a hub model. None of the agency participants in Area A talked about working with their colleagues or the benefits of being co-located (the Home Protection Agency was not co-located), so the idea seems null and void as it does not appear to be being utilised to its full potential. Colocation i.e. a hub model, could be beneficial, with Bonciani et al. (2018), in their work exploring colocation in primary care settings, highlighting that fragmentation of working may be minimised, duplication reduced (here it would reduce the need for victims of crime to repeat their story) and ensuring that services are more responsive. Kahn and McDonough (1997) found that colocation in some situations led to increased achievement of goals, sharing resources and working together. These benefits could be applied to victims of crime as well and would potentially benefit both victims of crime and the victim support agencies.

In Area B referrals into both the Domestic Abuse Agency and the Sexual Abuse Agency went through a triage/umbrella system within their respective consortiums before they were allocated to the appropriate locality/agency within the consortium set up. For domestic abuse victims this potentially meant that a victim would speak to at least two different people from two different teams/agencies before being allocated to an appropriate support worker, potentially having to repeat themselves and tell their story to each person they spoke to. The Sexual Abuse Agency attempted to mitigate this with their First Contact Team attempting to gain as much information from the referrer as they could before making contact with the victim, but if the referrer did not have that information or the victim had self-referred then they could be potentially telling their story to multiple people on multiple occasions as well. This has the potential to further victimise the victim of crime and delay their access to the support that they need as it

can be overwhelming and cause further harm to victims of crime as they have to repeat their story to multiple people on multiple occasions (HM Government 2018, Essential Services Commission 2019, Mohdin 2019).

Referrals which do pass through a triage/umbrella system need to be managed and addressed promptly, as BDAP4 highlighted that they actually had to follow up with the agency themselves because they had not heard from anyone a number of days after they first made contact, outside of the 48 hour timeframe (BDAOL3). BDAP4 felt that it took too long for them to be offered support by an allocated caseworker. After reaching out to the referral centre they did not hear back from anyone about an allocated caseworker for a number of days, leading to them making contact with the referral agency again. For BDAP4 this was important because they were attempting to make contact with the Domestic Abuse Agency at a time when they felt they really needed that support; until then they felt they had been managing fine but at that moment BDAP4 was really struggling and the delay in being offered the support they needed stayed with them after they finished working with the caseworker. This highlights an issue with the referral process for domestic abuse victims in Area B, a process which has a triage agency where referrals go before being allocated to the relevant local domestic abuse service where it is then further triaged and contact made before being referred to the correct team and caseworker. This seemed to be negatively impacting the victim who needs support as there are so many different stages they must 'pass' to then be allocated a worker for support and highlights the importance of a fast-paced system where victims are contacted within a short period of making a self referral. This highlights a need for prompt responses to referrals, as well as managing expectations and ensuring victims have a timeframe within which to expect a response. This is all the more disappointing when you consider agencies have a timeframe within which they need to turnaround referrals, with BDAOL3 explaining that for the DA Agency this was within 48 hours of receipt from their triage team. This highlights the fact that there needs to be a quick reaction to supporting victims of crime when needed. The Victims' Code (MOJ 2020d) includes reference to the fact that if a crime is reported to the police, that the police will refer a victim of crime to a victim support service within 2 working days. However, there is no timeframe placed on victim support services because the Victims' Code is not legally binding on them. Whilst this was not mentioned by participants in this research, it has to be assumed that PCCs have placed a requirement on commissioned services to respond to referrals within an agreed timeframe, such as that set out by BDAOL3 for domestic abuse services. A speedy response to referrals needs to form part of commissioning contracts to ensure that victims of crime are supported from the earliest opportunity, with research showing that victims of crime are being failed by other aspects of the criminal justice system not keeping them updated on progress (Victim Support nd), and victim support services should not be adding to this failure. Following the *Understand, Plan, Do, Review* (MOJ 2013b) cycle provides commissioners with an opportunity to continually monitor this element of a contract with a victim support provider.

In addition to referrals being made to services for support, the Home Protection Agency also had access to the police system, Athena, and were able to mine the database to search for victims of crime who met their criteria that they could then contact and offer

support to. This criterion was set by the Home Protection Agency. For a victim to be offered support they needed to have been a victim of a burglary and aged over 60 years. This is different to how the Victim Support Service worked whereby they would receive all the details of all the victims each day through an automated system, similar to the data dumps that Victim Support used to receive when they were responsible for the majority of victim support services in previous years (AVSSSL2, MOJ 2012a). Here the Home Protection Agency could set their parameters and seek out victims for them to contact and offer support to. If this was something that was happening on a regular basis then all victims of burglary over the age of 60, regardless of the outcome or progression of the case, would be receiving support. This would be an excellent outcome. This resource is especially valuable for victims who may not know what support is available to them as a victim of crime, as well as those who may not even know what their needs are or where to start looking.

Whilst this access to Athena is of great benefit to those victims who meet the criteria for the Home Protection Agency, there are many other victims who would benefit from the support which they offered and if this access is going to be available to outside organisations, why is it not available to all the organisations in Area A? It should be available to all agencies but it is unclear, from this research, why this is not the case. One reason could be that this is an area of prioritisation for the PCC, although this was not mentioned in interviews or raised as having been identified through the needs assessments. Another suggestion could be targeting support for this specific crime type/demographic of victim, but again, this was not raised by any participants. It does not appear to be because they are targeting serious offences as this would then have needed to have been extended to other agencies supporting victims of serious crimes i.e. sexual abuse, domestic abuse, serious violence (Victims and Prisoners Act 2024), and it does not appear to be something that is available to the generic victim support service either. One downside to having this sort of access, however, could be that the agency/individual completing the search would be able to set their own parameters for support, meaning that they could be influenced by their own views and stereotypes of who meets the criteria for support and stereotypes of who is likely to need that support, such as Nils Christie's (1986) ideal victim.

The victim participants who received support from the Home Protection Agency were contacted within a short period of time to be offered the support of one of their case workers. This does not, however, appear to have been the case for the two burglary victim participants from the Restorative Justice Service in Area A as they were not offered any support other than being contacted to be offered the opportunity to engage in restorative justice, at the offender's request. For ARJP7 this is perhaps unsurprising as they had explained that, as they were on duty at the time of the offence, the police offer wrap around support to their officers following such an incident so it may have been anticipated that they would not require any further support as it was already being offered to them and therefore not referred to victim support services. Although not a part of this research, future research could explore the wrap around support offered by the police to their officers and whether other emergency and criminal justice services offer this level of support or rely on victim support services and whether these individuals are referred on. There may be victims of crime here missing out on the opportunity to receive support.

The victim participants who utilised the Restorative Justice Service in Area B were referred by the police (2) and a sexual abuse support service (1). Two of these were victim initiated and both victim participants provided positive feedback, whilst the third explained that it was offered to them as an alternative to the criminal justice system so that they could find out why this had happened (BRJP7).

Agency participants identified a variety of agencies who had referred individuals into their agencies, continued to refer and could refer in the future. Whilst it is positive to see such a variety of referring agencies to their services, helping to demonstrate that these support services are known to other agencies, few agencies had direct access to police systems (Area A Home Protection Agency, Area A Victim Support Service, Area A Restorative Justice Service) but only one actively used it to search for victims of crime they could offer support to (Area A Home Protection Agency).

There were seven victim participants from Area A in this research, from the Home Protection Agency and the Restorative Justice Service. Each of these victim participants were contacted directly by the relevant agency which they engaged with, with 3 from the Home Protection Agency made aware by the police that the Home Protection Agency would be in touch with them. These victim participants were only offered support by these individual agencies, not by any other victim support services, nor were they made aware of any other victim support services which might have been available to them, despite the fact the Home Protection Agency only offered a one off visit to the property. None of the victims were contacted by the Victim Support Service hub, and just ARJP7 appeared to be aware of the hub, and that was because they were a police officer at the time of the incident, not because anyone had told them about it.

There were seven victim participants from Area B in this research, from the Domestic Abuse Agency and the Restorative Justice Service. Each of these victim participants was aware of a referral being made to the service or made the referral themselves. One domestic abuse victim participant and one restorative justice participant engaged with other victim support agencies who fell outside the scope of this research. All of the agencies participating in this research, whatever their specialism, also provided a listening ear and emotional support to the victims they supported over a period of time. This meant that one organisation was able to meet all of their needs.

Whilst victims of crime have a right to be referred to support services, to be contacted or to contact those support services and to receive support, this is a very vague right and does not stipulate that it must be a specialist organisation, if one is available, simply that the police should tell a victim "about all the services available in your local area" (MOJ 2021d). This could potentially mean that some victims, for whatever reason, are receiving a better service and more support than other victims, because they meet the criteria to receive further support from other agencies. For example, the Home Protection Agency only offers support to those aged over 60 years and victims of domestic abuse. This leaves a number of victims without access to this practical support to help them to feel safe in their own homes meaning anyone under 60 cannot access such support and may have to hire a private contractor to improve security if they needed this.

Generally, victim participants were positive about their engagement with the victim support agency from which they received support. This was not unexpected and was in fact an anticipated potential consequence of the decision to use purposive sampling to access victims of crime (see Chapter 5: Methodology). As the agencies approached to participate in this research were asked to also help by identifying victim participants, it was anticipated that the victim participants they put forward would have had a positive experience of the agency, as it was not anticipated that the agency, as gatekeeper to victims of crime, would knowingly put forward individuals whose feedback about their experience would be negative (Bryman 2016). That being said, whilst the majority of the feedback was positive (upholding Maguire and Corbett 1987's findings), some victim participants did share less positive experiences about other agencies they had engaged with, and some about the participating agencies.

Commissioning

Commissioning is an overarching term used to describe a process. It is not simply about the funding of a service, but also the additional activities taking place around the funding itself including understanding the landscape and what is needed, planning the work required and the steps to be taken to achieve this, actually proceeding with doing the work required through the awarding of contracts and mobilisation of services and then the reviewing of this work through regular management of the contract in place (Commissioning Support Programme 2010, MOJ 2013b). These four parts of the process – Understand, Plan, Do and Review – are a cycle which forms the commissioning process. This section is going to consider whether commissioning victim support services is enough, and the future of victim support services in England and Wales.

Across England and Wales the approach to commissioning support services for victims of crime varies and could be based on a multi-year basis or grants (Supporting Justice 2021). This varied approach could be seen across both Areas A and B with Area A issuing grants (Home Protection Agency) and moving support services in house (Victim Support Service, Restorative Justice Service) and Area B issuing multi-year contracts (Domestic Abuse Agency, Sexual Abuse Agency) and moving support services in house (Restorative Justice Service).

The commissioning process of Understand, Plan, Do and Review (Commissioning Support Programme 2010) was clearly used to commission the victim support services in Areas A and B, although APCC appeared to be much clearer on the role of commissioning and the processes required than BPCC who said "completing a needs assessment seemed like the right thing", when in fact this forms an integral part of the commissioning process, to help to understand the needs of victims within their area to allow them to plan support that would meet that need (Gash et al. 2013, Hall 2018). When meeting need and providing support to victims the numbers i.e. inputs and outputs were not what was considered to be important, rather the outcomes for victims were to be the focus for the delivery of effective services (Supporting Justice 2021), per the *Victims' Services Commissioning Framework* (MOJ 2013b) report which identified the eight outcomes to be achieved by victims of crime (see Chapter 4). Whilst there was

some reference to elements of review taking place, the detail and frequency was not shared.

Early work undertaken by the OPCC in Area A to better understand both the landscape of victim support services at the time and then victim needs (discussed above) identified an immediate failure of Victim Support to meet the needs of local victims due to their lack of understanding of not only local needs but the local area (APCC). APCC explained that this was due to them working from a regional office covering a number of different localities, as opposed to being based within Area A as they did not know where specific towns were located within Area A and therefore did not know who to refer the victims onto (APCC). The solution in Area A was to bring this role in house, where they could ensure they had local people working/volunteering for local victims who did know and understand the area (APCC). This was important to APCC as they explained their local staff knew if there was an active neighbourhood watch or community group. This does appear to have been in line with the then Coalition Government's localism agenda, with APCC pointing out "it's that ground level grass root support that is where ... a local commissioner can respond to local issues" and supports previous research which highlights how important the knowledge of 'locals' is to informing commissioners about gaps in provision as well as need (Shircore and Ladbury 2009, Gash et al. 2013). It is important to note that a similar conclusion was not made in Area B where Victim Support were in fact recommissioned for their general needs support, despite BPCC repeatedly making reference to the importance of local commissioning and advocating for nationally commissioned support services to be moved to being locally commissioned providing locally based support.

This is particularly important when BPCC explained that victims of crime would receive a better service if there was a specialist support service for all crime types. This is an interesting assertion, but it is important to question whether this assertion was being informed by their own personal views of victim support services or the needs assessments and data provided around the needs of victims of crime.

Is commissioning enough?

The decision to move to localised commissioning of victim support services was to ensure the effective allocation of resources, with PCCs considered to be best placed for making these decisions (Callanan et al. 2012a, MOJ 2012a, Simmonds 2016). APCC shared that at the start of the process they recognised that local factors affecting victims of crime were not recognised by the provider at that time, so they sought to engage with local providers who did understand and were therefore better equipped to support victims of crime (Shircore and Ladbury 2009, Gash et al. 2013).

When selecting the areas to be included in this research, areas with opposing approaches were deliberately chosen to see if there was any difference in victim experience. For example, Area A had a victim support services hub, whilst Area B had a generic victim support service but did not operate under a hub model. It was hoped that in exploring two different areas in this way the benefits and hindrances to the different commissioning models at play would become apparent. However, in practice there does

not appear to be any difference in how the two models work or any clearly defined benefits to choosing one option over the other. The Victim Support Service in Area A provided a physical hub from which partner agencies could work and enhance partnership working (AVSSSL2), whilst providing a generic victim support service as an internal service. An external provider (who did not participate in this research) from Area B was commissioned to deliver a generic victim support service. Whether this offered an opportunity for the physical locality of other services was unclear. Both Restorative Justice Services in Areas A and B were moved in house, however it is unclear why this decision was taken, but it is interesting that both areas opted for this approach.

BRJSL1 highlighted that being an internal service meant "that obviously you have a closer relationship with the PCC themselves, and then you can have more of an influence". This highlights a risk not only of complacency in not commissioning all services to external providers but also that internal providers have more opportunities to 'influence' the work the PCC is doing and their priorities. This puts all commissioned services at a distinct disadvantage if they are not being given the same opportunities and highlights a significant argument against in house victim support services. Even if all agencies, commissioned and internal, are offered the opportunity to contribute to needs assessments undertaken and the content of the Police and Crime Plan, the fact that being an internal service is viewed to give them 'influence' is a concern and potential detriment to the victims of crime who are working with agencies who are not internal services.

The move to localised commissioning of victim support services followed the localism agenda of the then Coalition Government (Brain 2014). For APCC commissioning local services meant the providers would know and understand the nuances of the local area. If the aim is to have local providers, however, one has to consider whether there is any competition if services are locally commissioned as there is unlikely to be more than one successful provider of a service and as an unsuccessful provider will not have the funding of a successful provider it is likely they would be unable to continue to work in the local area, thus taking away the locality of that organisation by the next time the service is being recommissioned. This would place any potential new providers at a distinct disadvantage and take away the neoliberal commitment of competition within the commissioning of victim support services (Mawby 2016). This does leave one questioning why there is a pretence of competition for the commissioning of victim support services when the services could all be in house and have the same benefit of in house providers discussed above such as access to systems and an opportunity to influence the PCC.

For the two areas participating in this research, specialist support services, excluding restorative justice services, were locally commissioned. These specialist support services reported difficulties in accessing funding and having to spend a significant amount of time not only preparing for and bidding for these contracts, but for additional support as well and highlighted the benefits of longer term contracts (BDASL3, BSASL4). The benefits identified were similar to those highlighted by Shircore and Ladbury (2009:286) including allowance for "meaningful public engagement" and time to gather momentum and build capacity, thus increasing the chances of success. These issues

have been highlighted by ACEVO (2024) who report that commissioning has often been found to be "unfair and opaque", focusing "on a race to the bottom line" as opposed to focusing on the individuals in need. This is not the purpose of commissioning, and it is hoped that the introduction of the Procurement Act (2023), which went live in October 2024, will help to improve some of these issues (discussed further below and Chapter 3).

Mintrom and Thomas (2018) explained that rather than being focused on the finance and policy of a service, commissioning is instead focused towards "the challenges of front-line delivery" (p311). We do, however, continue to live in a period of austerity, which has lasted for over a decade across England and Wales, which has impacted the funding of services to support victims of crime (ACEVO 2024). This in turn has increased the perceived need for competitiveness of tenders, with a need to deliver innovative support to meet victim needs in the cheapest way possible. Often the agencies applying for these contracts which are then successful are charities who need to not only provide a public service meeting complex needs as the commissioned provider, but also balance this with acting in the best interests of the individuals they are commissioned to support and advocate for.

From this research it is clear that there is not enough money available to support victim services in supporting victims of crime through the Police and Crime Commissioner. If PCCs are responsible for funding victim support services then they should be given enough money to support victim support services in their entirety, rather than support services having to turn to other sources such as the National Lottery and charitable trusts, or even offering victims who have utilised the service the opportunity to make a gift aid donation (AHPSL1, BDASL3, BSASL4). BSASL4 shared that actually having funding from the OPCC sometimes made things more difficult for them as, when applying for additional funding, they had to explain that the OPCC funded just a proportion of the support the victims required which was not understood by other potential funders who believed if they were funded by the OPCC they were funded by the OPCC and there would be no need for further funds. This highlights a lack of understanding from funders, including the OPCC and central government, about how much it actually costs to run a support service to meet the needs of victims of crime.

Despite the savings which have been required and reduced funding available to provide support, central government were still able to find money to support victim services (with a focus on domestic and sexual abuse) during the Covid-19 pandemic. This shows that when it comes to it the funding can be found and is available and is perhaps something which ought to be explored further.

It was not the purpose of this research to understand how or why decisions were made to fund services and support in specific ways. However, it has led to a number of unanswerable questions around funding decisions such as, in Area A, why is the money provided to the Home Protection Agency only small grant funding as opposed to a commissioned contract? In both areas, why has the restorative justice service been moved in house, as opposed to other specialist support services which are individually commissioned? These would be interesting questions to consider in future research exploring commissioning decisions around victim support services. The decision to

focus on providing specialist support services for victims of domestic abuse and sexual violence was partially influenced by the approaches and guidance given by central government, especially in their decision to provide additional funding during the pandemic for these specific services (MOJ 2020f, MOJ 2020g, MOJ 2021c).

The idea of commissioning within support for victims of crime is to assess the needs of victims, identify and set the priorities, plan the services required before procuring those services, and then monitor the quality of these (The Kings Fund 2023). This does not make it sound like commissioning is local, rather it sounds like the instructions for spending are passed from central government to the PCC to undertake on their behalf, rather than following a local agenda. Furthermore, it encourages successful providers "to be more responsive to the needs and preferences of those who use services" (Dickinson 2014), but in doing so it moves the responsibility for the delivery of victim services from the commissioner to the provider as the provider is required to deliver the outcomes required but must be the one to work out how this is to be done (Migone 2018).

The Future of Victim Support Services

The commissioning of services for victims of crime is a huge responsibility, with 8.7 million offences having been experienced by people aged 16 and over from April 2022 to March 2023 (ONS 2023). PCCs across the country are responsible for ensuring that the individuals affected are supported, if required. These crimes could be homicide, knife offences, domestic abuse, sexual offences, theft, fraud, criminal damage and more (ONS 2023) and the PCCs must ensure that they are commissioning support for all of these. This is quite an ask of a politically elected entity which had this responsibility thrust upon them less than two years after they were established (Hall 2018). It would make sense, therefore, to commission specialist support for all of these crime types (BPCC), but, as highlighted by Callanan et al. (2012a), not all victims need or want support, and not all victims of crime require the same level of support.

By commissioning victim support services PCCs can monitor the services and needs of victims of crime, identify and plan the support required, and procure an agency specific to those needs (NHS England 2024). If these needs change and, for example, victim needs following a burglary are significantly increased, PCCs could look to commission a specialised service for victims of burglary, reducing the support where it is no longer required. Prioritising addressing the needs of victims of crime seems to be the fairest way to be fair to all victims of crime.

The commissioning of victim support services is here to stay, with many service areas looking to explore new approaches to service delivery as financial and delivery pressures grow (Migone 2018). As Dickinson (2014:14) points out, "commissioning represents an attempt to reduce the role of the state in the provision of services and instead promote the idea that public authorities should be an enabler". Whilst PCCs are politically aligned and elected, the apparent lack of public knowledge around these roles (as shown by the continued poor election turnout discussed in Chapter 4), helps to distance them from the state, and their affiliation with the police helps people to see them as being the police

(a point highlighted by BRJOL1 who said that they work for the police) helping them to move away from the state.

The commissioning of support for victims of crime is not based on fairness or equality, but the needs identified within needs assessments which have been completed (Gash et al. 2013, Hall 2018). Every single person is unique and their reactions to victimisation can be different from each other, even different on different days based on other external factors (Goodey 2015). There should be a fairness when it comes to the commissioning of support for victims of crime which extends to the influence afforded to services when communicating with the OPCC. All services should have the same opportunities to share their victims' needs and their understanding, knowledge and expertise.

As shown in the previous chapter, the world has recently lived through an unprecedented period with the Covid-19 pandemic, but what this has highlighted from a commissioning and funding perspective is that if something is needed then the funds can be found to make this happen (MOJ 2020e, MOJ 2020f, MOJ 2020g, MOJ 2021c). The increased funds 'found' as a result of the Covid-19 pandemic and shared with victim support services to ensure support remained available for victims of crime during this time should continue and be maintained, based on rates of victimisation and victim needs and not simply removed because we no longer live in a pandemic.

The introduction of the Procurement Act 2023 came towards the final write up of this research and was due to be actioned fully in October 2024. It is therefore not possible to comment on its impact, but the purpose of this Act can be considered further. The aim of the Procurement Act (2023) is to help create a system that meets the needs of the entire country, with a view to opening up procurement to include more organisations such as social enterprises and smaller businesses, whilst allowing tougher action to be taken when an agency is underperforming and embedding transparency to allow for greater scrutiny of public spending (Gov.uk 2023c).

For victim services this is a positive addition, one which will ensure commissioned agencies are held accountable for their service delivery, but which may also open up the arena of victim services to additional organisations which may bring innovative approaches to victim support (Gov.uk 2023c). Whilst it is important to ensure appropriate scrutiny around the spending of public money, this should not be the focus of *procurement* exercises for victim services, but rather contract *management*, ensuring the appropriate spending of allocated funds, rather than selecting a provider based on the proposed costs. Victims of crime should receive support from the best service, not necessarily the cheapest.

The EU Directive (2012) set out a variety of rights for victims of crime, including support following a crime which, as discussed in Chapter 3, led to the first Code of Practice for Victims of Crime in 2015. Within the EU Directive (2012) it is clear that Member States may restrict who the rights within the Directive may be applied to. In England and Wales, however the current Victims' Code sets out in right 4 the right "to be referred to services that support victims and have services and supported tailored to your needs" (2020d) and is clear that this applies to all victims of crime. This should, therefore, mean that

there are no restrictions on the support being offered to victims of crime and that they should be able to access the services to support their needs. However the Code, as explained earlier, is not binding on victim support organisations but is binding on statutory organisations such as the police. With limited funding made available to PCCs to commission victim support services, and this funding limited more to the services commissioned, should some victims receive nothing when others are supported? Should services be able to refuse support to an individual because of the funding limitations?

Difficulties around commissioning persist, particularly for smaller providers who do not have specialist bid writers to draft their submissions, but instead rely on their staff to write these bids themselves with limited bid writing experience and taking them away from their day-to-day responsibilities (BDASL3) (MOJ 2012b). The National Audit Office (NAO nd), in their eight principles of good commissioning, suggests consulting with provider agencies and ensuring that the processes for contracting "are transparent and fair", with the recommendation that this be done by ensuring a broad range of potential providers are included, and to consider "sub-contracting and consortia building", which was done in Area B by both the Domestic Abuse and Sexual Abuse Agencies. This is not without its risks, however, because whilst BDASL3 and BSASL4 spoke positively about the relationships they had established within their consortia, ACEVO (2024) report that this is not the case for all agencies in this situation, with many reporting a "lack of trust and cooperation between agencies". This is where investment in the provider base could be of benefit (NAO nd) and help to build and develop those relationships. It is, however, positive to note that victim support services do not appear to have been put off by potential costs and responsibilities in delivering these services as a result of the commissioning process (Corcoran 2009).

A further principle of good commissioning can be seen in the provision of longer term contracts for service delivery (NAO, nd). This was highlighted by both BPCC and BDASL3 as something which would be of significant benefit, not only in the embedding of a service, but in the stability that a longer term contract offers not only the PCC but the service provider as well, allowing for long term contracts for staff, future planning for organisations and increases the chances of success with time to gather momentum and build capacity (Shircore and Ladbury 2009). This is, however, often difficult to do as the funds for victim services are not guaranteed and may only be disclosed to PCCs in smaller lots i.e. the next year, next two years, next three years (H M Government 2022). This makes it difficult for providers who are given short term contracts to prove they are capable and able to deliver (Gash et al 2013).

Early concerns that services commissioned would be of special interest to the government (Simmonds 2016, Turgoose 2016, Hall 2018) appear to have been accurate in the light of the additional funding made available during the pandemic for victims of domestic abuse and sexual abuse and the reference to this in the draft Victims and Prisoners Bill (2023) and the requirement for collaboration by would be commissioners for services in these areas (Victims and Prisoners Bill 2023).

It has taken six years to get from the then government sharing plans for a victim's law for one to be introduced, and even then it is not just an Act for victims of crime, but an Act for offenders as well (Victims and Prisoners Act 2024). In the 2018 Victims' Strategy plans were also set out to hold agencies to account for compliance with legislation in relation to victims of crime, as well as the development of "a new delivery model for victim support services, coordinating funding across government" (HM Government 2018:8). With a new party in power for the first time in 14 years it remains to be seen if they will continue this trajectory of work for victims of crime. They have, however, cut funding for victim support services for 2025/26, whilst protecting funding for violence against women and girls (Lawrie 2024, Women's Aid 2024).

If there are still plans for PCCs to monitor compliance of the Victims' Code then consideration must be given to a) whether they can commission in house services and fairly and effectively monitor themselves and b) opening up the list of groups who must adhere to the Victims' Code in the light of services being delivered by third sector organisations to whom it does not currently apply (Gov.uk 2019, MOJ 2019a, MOJ 2020d).

Summary

The decision to move to a localised approach to the commissioning of support services for victims of crime came about as a direct result of investigations by the MOJ (2012a) of complacency in delivery by Victim Support who were given a lump sum every year to deliver services with no accountability. It was hoped that the introduction of a localised commissioning process would avoid this complacency, and through competitive commissioning and robust contract management this has the potential to address this and ensure that the needs of victims of crime are provided for, as long as they are central to the commissioning process itself. With both areas participating in this research making the decision to bring some services in house this negates the decision to move to localised commissioning as it could have simply been localised delivery through PCCs who are required to follow the Victims' Code.

From this research it is unclear how or why decisions were made to follow specific routes to fund victim support services in both Areas A and B as this was not provided during the interviews (and may not have been known by interviewees). The decision to grant fund some services, mid-term commission some services and move other services in house must have had reasons behind these, but have not been shared by participants. Whilst this would be of use to know, it was not the main purpose of this research, although it has provided some insight into understanding the importance placed by both PCC areas on having local people working to support local people. Furthermore, it remains unclear, outside of the ease of information sharing shared by the Victim Support Service, whether there is any difference for victims of crime in having an in house service providing support to them as opposed to a commissioned service and whether the same scrutiny is afforded to in house services as should be through a commissioning and monitoring process for a commissioned provider. The introduction of the Procurement Act 2023 will allow for greater scrutiny of those commissioned services which underperform, as well as how these agencies are spending public money. However, too onerous or continuous a commissioning process is likely to cause staff uncertainty, high wastage rates and lack

of opportunity to train staff in rarer, but more serious, cases. It is not clear that the right balance has yet been struck.

More research is needed to ascertain whether services are meeting the needs of victims of crime or if they are being rushed/rushing to achieve outcomes in what is considered an 'appropriate' timeframe to continue to be commissioned or if 'easier' clients are being supported to meet their targets under the commissioning (Simmonds 2016, Gash et al. 2013). Services must, however, be commissioned to meet the needs of victims of crime and, if this is going to be done on a localised scale, PCCs do seem best placed to lead with this piece of work and, with the introduction of the Victims and Prisoners Act 2024, are being encouraged to collaborate with statutory authorities to meet that victim need.

The most prevailing concern to come out of this research in relation to the commissioning of victim support services is the fact that despite Member States having a duty under the 2012 EU Directive to provide support for victims of crime, not enough money is being made available to the agencies and individuals actually providing the frontline support. This support is being commissioned by Police and Crime Commissioners who, again, have a designated pot of funding to do this, but this too is not enough to fund the services in their entirety and has in fact just been reduced for the upcoming 2025/26 financial year (Lawrie 2024, Women's Aid 2024). This is leading to these, often small, organisations seeking additional funding from alternative sources, where they find themselves hindered by the fact that they are in receipt of funding from PCCs because people are led to believe that if PCCs are responsible for funding these services then they are funding these services in their entirety and do not need additional funding. Furthermore, the majority of victims appear to be able to have all their needs met by just one agency, with no referrals between agencies. This lack of referrals between victim support services because they meet all needs presented to them makes it difficult to identify any potential gaps in provision. This demonstrates a potential lack of knowledge of other service providers but also a potential lack of knowledge about gaps in provision if services are simply picking up additional work to meet the needs of the victims of crime whom they support.

Question 2 - What is the victim label and who adopts it (in this research)?

The second question to be considered as part of this research is what is the victim label, and who adopts it?   Understanding the victim label will be considered through understanding victim and agency participant identified characteristics for victims of crime, as well as the terminology used by participants in this research to describe a victim of crime.

Victim Characteristics

Early origins of the word victim can be traced to the Latin origin, *victima*, the sacrificial animal (van Dijk 2009, 2020, Fohring 2018b, Galona 2018). Over time this definition has slowly morphed from that of a sacrifice, to someone who has been harmed (Galona 2018).

Participants in this research were asked to share the characteristics they thought were exhibited by victims of crime. Participants were asked about this term broadly, in an attempt to better understand the qualities, features and behaviours most identified with victims of crime. Research, and the media, label victims of crime as weak, helpless, vulnerable and passive (van Dijk 2020), with a keenly felt loss whether that is in status, resource or self-esteem (Taylor et al. 1983), which is somewhat supported by the findings of this research. 32 agency participants, both PCC representatives and 14 victim participants answered this question and identified a total of 69 characteristics exhibited by victims. Out of these 69 characteristics just five were identified by both victim and agency participants: anger (n=5), afraid/fear (n=4), vulnerable (n=3) and violated (n=2). This shows it is not possible to identify an individual as a victim simply from the characteristics they exhibit. Rather than describing victim characteristics in terms which portray a victim as weak or vulnerable, the most common agency identified characteristic was anger (n=4). Here, however, this was not the most common victim participant response which was anxious (n=3). The responses from both agency and victim participants support Maguire and Corbett's (1987) findings almost 40 years ago that the most frequent effects of crime were anger, fear and worry. Anger was also identified as a common characteristic following victimisation by Ditton et al. (1999) and in the 2023 Crime Survey for England and Wales (ONS 2024). Unlike previous examples (see van Dijk 2009) support, respect and compassion is offered to victims of crime who are angry about what has happened to them, the agency participants in this research have identified the characteristic of anger but the victim of crime not being passive has not changed anything for the agencies offering support.

As von Hentig (1948), Mendelsohn (1956) and Sparks (1982) asserted that victims carried some blame for being a victim of crime, it is unsurprising to see that self-blame was one of the five characteristics where there was an overlap between victim participants and agency participants. It should be noted that despite van Dijk (2009) highlighting that victims are perceived as submissive and forgiving these were not characteristics identified by participants as part of this research. However, if one reviews the victim characteristics shared by participants, the majority of these are negative feelings, emotions and actions, starting with a strong emotion in anger. This demonstrates a

burden and negative association that is being placed upon victims of crime, further supporting van Dijk's (2009) assertion that a failure to adhere to this preconceived ideal of being passive, submissive and forgiving would lead to a negative perception of victims of crime or a failure to garner sympathy for what has happened (Christie 1986). Ignatans and Pease (2019) point out that the difference between the findings of victim accounts of anger and academic accounts of more passive characteristics is something which is actually convenient for the government and the police, and therefore likely the reason the media continue to perpetuate the image of weak, vulnerable victims of crime. Ignatans and Pease (2019:1) explain that fear is a more popular characteristic as those who are angry may be more inclined to "take matters into [their] own hands" but are also less likely to receive the sympathy, empathy and support that they would otherwise receive as a victim of crime (van Dijk 2009).

It is important to consider the victim characteristics identified by participants as this could have helped to inform the picture of what a victim of crime 'looks like'. As it is, there were very few common responses, with the consensus that all victims of crime have different characteristics, and that there is no one defining characteristic which makes an individual stand out as a victim of crime. This is supported by Lens et al.'s (2017) assertion that similar crimes may have different consequences for different people and any support offered must take this into account. This is important because if victim characteristics are all different and there are a variety of different victim needs, then how is it possible to have a standard service for victims of crime, surely all victims of crime need their own, tailored, specialised service to meet their needs?

Participant Terminology

According to the literature, the word 'victim' would lead to an individual being 'socially labelled' (van Dijk 2020) with negative connotations beyond simply being used to describe an individual who has been harmed (Walklate 2007), with Fohring (2018b:152) pointing out that "the word is associated with a powerful stigma and may draw blame, derogation, weakness and shame". Van Dijk (2008) also points out that not actually using the word victim to describe a victim of crime would help with this (Pemberton 2012).

Participants in this research were therefore asked which word they would use to describe either themselves (victim participants) or the individuals with whom they worked (agency participants).

As explained in the results, 43% of victim participants (n=6) would use the word 'victim' to describe themselves and what had happened to them. 57% (n=7) of the victim participants, however, posited other options including, four iterations of 'survivor', alternative suggestions made by van Dijk (2008).

Victim participant responses to this question showed a need by victim participants to qualify their response e.g. technically I'm a victim but it's not bad, there are worse crimes and worse off victims. As Taylor et al. (1983) explained, this is not an uncommon reaction to victimisation. Taylor et al. (1983) posited that due to the aversive nature of

victimisation, victims of crime would look to "selectively evaluat[e] themselves and their situations in ways that are self enhancing" (p19). There were five mechanisms to this selective evaluation, many of which were seen in victim participant responses in this research (highlighted in the Results Chapter):

1) Making social comparisons with less fortunate others;
2) Selectively focusing on attributes that make one appear advantaged;
3) Creating hypothetical, worse worlds;
4) Construing benefit from the victimising event;
5) Manufacturing normative standards of adjustment that make one's own adjustment appear exceptional.

Fohring (2022) points out that women are often more easily associated with the term 'victim', likely due to the perception of women as being weak, innocent and in need of protection, encompassing the ideal victim (Christie 1986), yet women were less likely to use the word 'victim', particularly when it came to describing themselves (n=5). On the other hand, male participants who experienced victimisation/harm were pragmatic in their approach to the word 'victim', highlighting that they would use the word victim to describe themselves because technically, and legally, that is what they were recognised as being because that is what the police referred to them as. The word 'survivor' was exclusively used by female participants in this research which was perhaps due to the more positive connotations associated with this word as being one where the individual concerned has control and power in what has happened, as opposed to being weak and helpless (Walklate 2007, Gupta 2014, Kemp 2014, Papendick and Bohner 2017). This is also unsurprising given the feminist and gendered violence movements positive association with the word (Pemberton 2016).

Whilst less than 50% of the victim participants would use the word victim to describe themselves, this number actually increased when it came to the label that may be used by professionals offering support to them, such as the police or victim support agencies. However, victim participants did not want to be considered to be a victim by their friends or family as they were concerned that they may be treated differently as a result by them, for example viewing them with pity.

Agency participants recognised that the victim label has negative connotations; rather than seeking to change these associations they have sought alternatives labels such as client survivor and with 13 of the agency participants working with individuals who have experienced domestic abuse or sexual abuse this is unsurprising given its increasing popularity since its introduction in the 1980s and its increasing popularity to describe those who have experienced domestic abuse or sexual abuse (Walklate 2007, Gupta 2014, Pemberton 2016). Increasingly however, agencies are starting to recognise that there is a need to use the preference of the individual who has been harmed rather than 'label' someone, with the Victims' and Survivors Consultative Panel named as such to reflect the preferences of those involved in the Independent Inquiry into Child Sexual Abuse (NSPCC 2024). This offers a degree of control and empowerment to the individual concerned as they get to make a decision about how they are seen, rather than being seen through the lens which others have given to them. The fact that the Victims' Code

(2020d) acknowledged the different terms which may be used reasserts the fact that regardless of the label used, individuals can still access victim support services.

Victim participants themselves acknowledged the associations of the word 'victim' with weakness but shared that they did not feel this way; many shared different descriptions and explanations of their experience but none said that they felt weak. So if agencies see victims of crime differently to how victims of crime see victims of crime, identifying different characteristics, can and are services being aimed in the right way to support victims of crime? This then begs the question, are services being mis funded if they are not appropriately targeting the needs of victims of crime? Fattah (2010) asserted that victimisation is personal and subjective. In this research everyone shared their own characteristics for what they perceived a victim of crime to be, admittedly they varied significantly, but if the characteristics which make up a victim of crime are varied, and victim needs are varied (as highlighted in the results chapter), then how can a service be designed to meet victim needs if everyone is different therefore making all needs different, is it possible to cater to such variety?

To better understand the victim label, it is important to understand the components that create the victim label and the connotations associated with the word, which has been explored in the literature review (see Walklate 2007, Gupta 2014 and Fohring 2018b). The development of the victim label as a negative connotation has taken time, influenced by a variety of factors including the role the media plays in using the word victim in such a way as to create a negativity around it. Being a victim of crime is not something to be ashamed of and it is not an individual's identity, yet despite this people are made to feel as though it is and that the victim label assumes the master status, taking over any other identities they may have – as mum, dad, son, daughter, friend, colleague etc. (Becker 1997). Unfortunately, the power of the media has led to many viewing the victim label through a negative lens, and this has been picked up by not only agencies working with victims of crime, but researchers as well, who are unintentionally supporting the negativity of this label by encouraging the use of other labels, such as survivor, to help to empower victims of crime. According to Saki (nd) the term survivor helps to empower an individual as it "convey[s] that a person has started the healing process and may have gained a sense of peace in their life" (p1).

The literature in relation to the labels used to describe victims of crime appears to be ideologically inspired and one has to question whether authors are in fact putting their own identity and views into the findings. Even today researchers and agencies are insisting that individuals do not want to be called 'victims' (NSPCC 2024), but this research has shown that this is fundamentally untrue: some victims of crime do want to be called 'victims' and have what has happened to them be acknowledged. Taking the approach of asking a victim of crime what they want term they want to use not only empowers them but ensures that no further harm is caused by using language which is not appropriate to them. There is no disputing that the victim participants in this research had been a victim of crime and by ensuring that 'of crime' is added at the end that removes the negative connotations associated with the word as they are a victim 'as a result of a crime' rather than simply a 'victim'.

According to both Walklate (2017) and Fohring (2018a) an individual must recognise and accept the victim label to access support, but this is not what the Victims' Code says (MOJ 2021d). Not all agency participants in this research use the victim label yet they still offer support to victims of crime and victims of crime do not even have to report the crime to be entitled to access their rights under the Victims' Code (MOJ 2021d). It would therefore appear an individual does not need to accept the label, rather they need to acknowledge harm has been caused and a need for support to repair that harm.

From this research it is argued that agencies and researchers need to help victims of crime to take back the meaning of the word 'victim' and what it is associated with. The characteristics of victims of crime identified in this research were overwhelmingly negative, from both the agency participants and the victim participants themselves but BDAP3 was very astute in their observation that "victims can't be weak, they have to be strong" in order to get through whatever it is that they have experienced. This is the message that should be being shared when it comes to talking about victims of crime.

Summary

Research has shown that the victim label is often associated with connotations and characteristics which make a victim of crime appear to be weak (Taylor et al. 1983, van Dijk 2020). This research has found that there are few common characteristics associated with a victim of crime and that these can vary from person to person but the most common of anger, worry and fear have not changed in almost 40 years (Maguire and Corbett 1987).

The victim participants in this research acknowledged that they were a 'victim' because a crime had been committed against them causing them harm in some way and they appeared to accept this. But any concerns they may have about the use of the word 'victim' often lay not in their own perception or that of the agencies there to offer support, but in how their friends, family and neighbours may perceive them and, potentially, treat them differently as a result.

Limitations

The largest and most unanticipated limitation of this research was the Covid-19 pandemic (addressed in the previous chapter). This was an unprecedented time and not something that could have been predicted when embarking upon this research project in 2018. The Covid-19 pandemic affected everyone in the world. When it came to this research it impacted the agencies participating who had to change their methods of working with some furloughing their staff for peak lockdowns. This led to understandable delays in the fieldwork as they had to prioritise their working practice, and this in turn caused delays in the recruitment of victim participants through those agencies. This also led to the decision by the Sexual Abuse Agency to not support this research with accessing victims of crime whom they were supporting/had supported, although they were willing to engage as an organisation. Due to university requirements, and the restrictions across the country, changes had to be made to how this research would be conducted, with initial plans being to meet with participants face-to-face. Face-to-face interaction, however, increased the risk of infection which meant alternatives needed to be considered such as online video calling software or telephone (Nomali et al. 2023). At the time there were concerns about whether this would act as a barrier to the research (Deakin and Wakefield 2013, Hay-Gibson 2009), however this researcher feels that actually it helped to enhance the research, particularly when it came to interviews with victim participants, as they no longer needed to travel to attend an interview, and they could decide whether they wished to have their camera on or not, offering an additional layer or safety/protection for them, rather than having to meet face-to-face (Simmons et al. 2022).

Some of the participants received support during the Covid-19 pandemic, whilst others participated in the research during the Covid-19 pandemic but had not received support during that period. For example, all of the victim participants who received support from the Home Protection Agency and Domestic Abuse Agency received support during the Covid-19 pandemic (although not peak lockdown periods from the Home Protection Agency), and none of them had received support before the pandemic. In contrast, none of the victim participants who engaged with the Restorative Justice Services (Areas A and B) had received support during the pandemic; it was all done before Covid-19. It was therefore not possible to compare the responses and experiences during the pandemic to before the pandemic to see, from a victim perspective, what had changed.

Purposive sampling was used to recruit participants for this research as it was essential that victims had experienced the services being considered here (Wilson and Miller 2014). This meant relying on victim support agencies to identify potential participants, which increased the risk of bias as there was a chance participating agencies would only include people they knew had had a positive experience, not anyone who may not have done. Utilising the agencies as gatekeepers, however, was vital in accessing the victim participants to ensure that the participants in this research were victims of crime who had utilised a victim support service commissioned by the PCC. Had alternative recruitment methods been used for victims they may not have had any experience of the agencies participating in this research and may have received support from services not commissioned by the PCC such as a national, centrally commissioned service.

Research indicates that the size and make up of a focus group is important and may affect the dynamic and discussions (Crow and Semmens 2007, Bryman 2016). Here the focus groups varied in size with two consisting of two participants, one of three participants and one of four. The size of the group in this research did not make a difference, with good engagement from all participants. However, it was not possible to do focus groups with the Home Protection Agency (Area A) or the Sexual Abuse Agency (Area B), with individual interviews taking place instead. This removed the opportunity for participants to bounce off each other and engage in discussions around the topics being covered.

A further limitation to this research is the fact that it is not possible to generalise the findings. This is due to a number of reasons. Firstly, the approaches taken to the commissioning of victim services has varied across the country, however the fact that there does not appear to be any real difference in the services being offered or the experiences whether an area has a victim hub or not goes some way to showing that it does not matter what the set up is like, as long as victims of crime are at the heart of the work being completed. However, both PCCs were members of the Conservative Party so future research should consider whether other parties take a different approach to the commissioning of victim support services, and should be conducted on a wider scale to gain a better understanding and, hopefully, lead to more generalisable findings.

Secondly, the number of participants was relatively small with a total of 49 participants across two geographical locations. The number of actual victim participants was also very small (14), however this does not mean that what they shared was not valuable. In fact, their observations about not only the support they received but also their views of victimisation were invaluable and helped to better understand victims of crime. The third reason this research cannot be generalised is that not all the agencies in each area participated in the research. Some failed to respond to attempts to engage them (Sexual Abuse Agency in Area A), whilst others declined to participate citing data protection (Victim Support Agency Area B). As a researcher this is frustrating, as it would have been great to have all the agencies commissioned by the OPCC involved, but this was their choice and participation was voluntary. It was also disappointing as by deciding not to participate they also made the decision for victims of crime, removing an opportunity from those victims of crime to be empowered to make the decision about participating for themselves, and not allowing them to have a voice. None of the participants were representative of age or gender for their areas (see Chapter 6 - Results), although they were representative of ethnicity.

Not having all of the PCC commissioned agencies from each area participating meant that it was also not possible to do a true comparison between the two areas. As each of the agencies participating in this research had a different speciality, it stands to reason that the support being offered would probably vary i.e. the Home Protection Agency offering advice around the security of the home in one session whilst the Domestic Abuse Agency offers ongoing support around leaving an abusive relationship. It therefore was not possible to do a comparison of the support provided because there were real differences in what they do and need to do, meaning it is not possible to provide a local or national picture of support. This was complicated further by the fact that in Area A the

Domestic Abuse Agency received funding from the OPCC, but the commissioning itself was completed by the local authority (APCC). Furthermore, some of the agencies receiving funding were not specifically commissioned by the OPCC to deliver a specific service, instead receiving funding towards the support that they already provided.

As alluded to in the methodology, some agencies refused to actually engage in any conversation about this research without the permission/authority of the OPCC. This also meant that OPCCs needed to be introduced to the research earlier than anticipated, but this did mean that some agencies were therefore willing to engage. The OPCCs participating in this research consented to agencies participating, and even pointed out during these early approaches that it was not necessary for them to consent in order for the agencies to do this, but they could not force them to participate and if agencies declined they would not intervene. No firm reasons were given for needing permission from the OPCC to engage, but given the lack of research in this area, perhaps they were nervous of what was a relatively new process for victim services and the outcomes of this. For example, they may have been concerned about any negative comments from victim participants or the researcher about their work being used by the PCC, as the commissioner, rather than as an opportunity to gain insights and feedback for areas of improvement for their services. As already mentioned above, by doing this services were taking away an opportunity for victims of crime, the individuals they are commissioned to support and empower, without their input. It is worth future research giving consideration to how they can encourage all commissioned providers to engage in research so as to allow for a fuller picture of what is happening around victim support services.

Implications

When first embarking on this research the researcher had an idea of what victim support services would look like. From the literature review it was clear that PCCs had options when it came to how they wished to structure their victim support services. The first was where they commissioned specific services to deliver services to victims of crime. This model would rely on individuals – whether they are the public or within agencies – to be aware of what services had been commissioned so that they could refer a victim of crime as needed i.e. the police would need to know exactly what services were commissioned in their area/where the victim lives to ensure that they were able to refer victims on to the correct services. This would obviously be further complicated by victims who did not live in the area in which they were a victim of crime, but as the police were not the focus of this research this was not explored further. It was anticipated, but not expected, that services may refer on to each other, but only if an individual came to them and they were unable to help with that specific crime type i.e. a victim of sexual abuse seeking support from an agency which offered support to individuals who had been the victim of fraud. Another option was for PCCs to set up a hub. For this the researcher envisaged all referrals going through one central point. There they would be allocated to their local provider or a caseworker, depending on the size of the area. For example, Thames Valley PCC covers Buckinghamshire, Berkshire and Oxfordshire: whilst they may commission one service to cover an entire area, it is likely that they would have designated 'offices' for each county. Once allocated to a caseworker that caseworker would be the main point of contact for the victim of crime throughout their journey with the victim support service, and potentially even through the criminal justice service, although that was not a requirement. That caseworker would be responsible for passing victims of crime to specialist support as needed. In this anticipated model, the caseworker would still be available during that time but once the victim of crime had completed the specialist support e.g. counselling, the caseworker would then consider what other support the victim of crime may need. That caseworker would be responsible for that victim of crime for as long as they were involved, responsible for ensuring onwards referral to support services, as well as updating on the individual's situation so that the victim of crime did not have to keep repeating themselves each time they received support from a new person and ensuring that they would always have a constant contact point. The reality, as demonstrated in this research, however, is very different. In the two areas researched, victims of crime appear to have contact with only one agency, even those who are engaging in restorative justice, and are not referred between victim support services. Victims of crime are, however, referred on to relevant support services which are not specific to crime victimisation such as housing support, social care, financial support etc. It is impossible to know from this research whether a model with a single point of contact for a victim of crime could help with not only meeting the requirements of the Victims' Code but also in engaging with the relevant areas of support to meet the needs of the victim of crime, thus potentially utilising a variety of different services to meet their different needs.

The aim of this research was to provide a broad overview of the victim experience of victim services under Police and Crime Commissioners. Whilst undertaking this broader research it has become apparent that there is a need for more focused research on all

types of crime and support available, not only on the services available to support victims of crime, but on the roles played by the police and courts in supporting and/or causing further harm to victims of crime as a result of the attitudes, processes, decisions and delays encountered within the criminal justice system, issues which were all raised across the victim participants and agency participants within this research.

Significant changes have taken place over the length of this piece of work, including consultations, changes to the Victims' Code, and legislation for victims of crime. Despite this, the Victims' Code still does not place a duty on the third sector organisations, who tend to be commissioned to deliver these services, to follow the Victims' Code. This duty is only on statutory organisations, although participants in this research were keen to show their knowledge and compliance with it, only the in-house services – both RJ services and the Victim Support Service – actually needed to ensure compliance with it. Furthermore, the Victims' Code may restrict the victims to whom it applies or expand to include others alongside the victim (Victims and Prisoner Act 2024). Whilst formal restrictions may not have been made to who can and cannot receive support (EU Directive 2012), there does appear to be an element of focus on specific crimes and supporting those "who are considered vulnerable or intimidated, are a victim of the most serious crime … or have been persistently targeted" (MOJ 2020a:37) through a focus on domestic abuse and sexual abuse services.

It is impossible to draw any solid conclusion about the best way to approach victim services across England and Wales, or the most effective, from this research alone. The reasons for this were highlighted in the preceding section exploring the limitations of this research. However, difficulties in engaging victim support services was one of the largest issues. In both Area A and B, some of the commissioned victim support services declined to participate in the research, making it impossible to undertake a direct comparison between an area where the PCC had elected to follow a hub structure, and an area where they had not. With specialist services also declining to participate it was not possible to be able to compare the offers in those areas. It is possible, however, to better understand the journey of victim of crime and the victim experience from those who did participate.

Further consideration also needs to be given to how individuals are referred into victim support services and further consideration is needed as to whether it is more beneficial to have agencies (or an individual) able to access the police systems to identify victims of crime to refer to individual agencies or for individuals to be automatically referred to support services.

This research has highlighted that it is important that the label being used to describe victims of crime is chosen by the victims of crime themselves but, for the most part, the word victim does the job. Perhaps with more time the negative connotations associated with the word victim will fade, but it seems to be enough to recognise harm for a victim of crime to access support which is the most important thing for victims of crime, as well as using their preferred language. A common term is still needed with the criminal justice system and whilst 'victim' does seem to do that job for those working within the criminal

justice system, it is important to consider the audience when talking about a victim of crime.

This research has shown that there are no common characteristics or common needs when it comes to victims of crime. Broadly speaking all victims of crime, whatever the offence type, need emotional, practical, psychological and financial support when they have been a victim of crime (Shapland and Hall 2007). The specifics and level of support needs for victims of crime varies from person to person as every person is unique. By prioritising specialist support for victims of domestic and sexual abuse there is a risk of causing further harm/revictimisation to those who are not victims of these crimes but require a higher level of support than that which is being offered to them. An example would be Area A only offering specialist support to burglary victims aged over 60 years. BPCC pointed out that they would love to be able to provide specialist support for all victims of all crimes, but that this is just not possible with the funding available to PCCs. This means that decisions are having to be made to focus on a select few victims to ensure that they are receiving specialist support, and the decision has been made to focus on victims of serious offences such as domestic and sexual abuse but it remains unclear whether victims' experiences are being taken into account when making these decisions (Cook and Walklate 2019). There has been an increase in the use of coproduction in public services and this is something PCCs ought to consider further when moving through the process of commissioning (Loeffler and Bovaird 2019).

The funding of support services for victims of crime continues to place pressure on the agencies commissioned to deliver the services, and not enough funding is provided as part of the grants or contracts available. Commissioned services are still seeking financial support from elsewhere to enable them to deliver a service to fully meet the needs of victims of crime and/or to meet the needs of the number of victims of crime they are approached by. These third sector agencies rely on funding from external resources. These could be from contracts, donations, grants, investment or trading (NCVO 2022). The appropriateness of the funding must be considered by the agencies, alongside any advantages and disadvantages and benefits to the agency. In some instances, niche services have been consumed into larger organisations, effectively reducing competition in the competitive tendering process. Perhaps a shake up to both statutory and charitable organisations on a regular basis would ensure there was no complacency in service delivery, although it would need to be done in a way to allow agencies to get fully embedded and give the services a chance before offering up the next tender opportunity. Agencies should not be worrying about finding the funding to meet need, the government should. Central government should be providing enough money for all victim support services since the EU Directive is binding on them to ensure victims of crime are receiving "appropriate support to facilitate their recovery" (Paragraph 9 EU Directive 2012:58). Sturgess (2018) pointed out that by delegating and allocating responsibility and accountability to the commissioned services there is more of a buy in and willingness to cooperate to achieve the services aims. The Commissioning Support Programme (2010) made a similar argument that this redistributes power towards service users and improves strategic understanding. However, as Maguire (2012) pointed out, there is a lack of evidence to support this as organisations are taking on

additional pressures to manage with inadequate funding or source funding themselves to meet need.

Supporting Justice (2021) highlighted the main question that needs to be asked when commissioning support for victims of crime: "has this service actually delivered what the victim really needed (or at least gone as far as possible in delivering their needs)?". The only way to know this is to ask victims themselves. It is therefore so important that agencies and PCCs are thoroughly evaluating their processes and services and make these opportunities to engage in independent research available to victims and do not block them under the pretence of the research causing them harm. Victims of crime have a unique perspective and are able to voice quite well their thoughts about their victimisation and further consideration ought to be given to the experiences of victims of crime which remains lacking (Cook and Walklate 2019), whether through Pemberton et al.'s (2019) narrative victimological lens or not. The Domestic Abuse Commissioner has set up a platform for individuals who have experienced domestic abuse "to stay connected to relevant policy, research and practice development" (Domestic Abuse Commissioner 2024), could similar be done to include all victims of crime? Many victim participants in this research thanked the researcher for the opportunity to participate and for asking them about their experience, so this research potentially contributed to their victim journey as they could share their thoughts on what worked and what did not. Rather than others making decisions for them to 'protect' them (Weisstub 1986), victims of crime should be empowered by those working with them.

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Appendices

Appendix A – Victim Participant Interview Schedule

<u>Interview Schedule – Victim</u>

Name	
Age	
Gender	
Ethnicity	

Thank you for taking the time to meet with me today. First, I'd like to run through the consent form and information sheet which you have been provided with and the reason why we are here today.

The aim of this research is to explore the victim experience of victim services since responsibility for the commissioning of victim services moved to Police and Crime Commissioners. You have been invited to participate because you have utilised a victim service commissioned under your local Police and Crime Commissioner. If you feel at the end of the interview there are some things which I have not raised, or there is something you might like to talk about please mention it.

If you need to take a break at any point let me know and we can pause the interview at any time, equally you can ask to stop the interview at any time (but hopefully you won't need to). With your permission, I am recording this interview which will later be transcribed and used as part of my analysis. The recordings will not be shared with anyone.

Do you have any questions before we start?

I have a number of questions which will help to guide our conversation about your experiences with the support services, but if you don't want to answer a question or are unsure how to that's not a problem, we can move onto the next one.

1. How long ago did the incident happen?
2. What kind of needs did you have for any support soon after the offence, say in the first week? And after a month? And more recently?

3. **Were you put in touch with any support agencies? Which and by whom?**
    a) What was your experience with agency x?
    b) How did they contact you?
    c) What support did they offer?
    d) For how long?
    e) Was it helpful? (scale of 1 very unhelpful to 5 very helpful)
    f) Was there anything they were unable to support you with? Did they refer you to an agency that could?
    g) Has Covid 19 impacted your experience of this service? In what ways?

Repeat Question 3 for any additional agencies
4. Which one would you say you had the most contact with?
5. Do you think there is more that could be offered to support you and others who have had similar experiences?
6. Did you encounter any issues/delays in accessing support services?

7. Should you require any support at any time in the future would you contact these services again?

I'd like to move on to your understanding of being a victim
8. Thinking about the word victim, what would you say are the characteristics of someone who has been victimised?
9. You have obviously been affected and harmed by the offence, but would you use the word victim to describe yourself? What about harmed? Survivor?
10. Have you been treated differently as a result of what happened to you? By who? Why do you think that is?
11. Does it matter whether agencies think of you as a victim of crime? What about others?

This has been really interesting and useful and I am grateful to you for taking the time to meet with me today. Before we finish up, is there anything else you would like to tell me about your experience?

Thank you.

Appendix B – Focus Group Interview Schedule

Focus Group

Agency	
No of Participants	
No of Staff	
No of Volunteers	
Did anyone leave?	

Thank you for taking the time to meet with me today. First, I'd like to run through the consent form and information sheet which you have been provided with and the reason why we are here today.

The aim of this research is to explore the victim experience of victim services since responsibility for the commissioning of victim services moved to Police and Crime Commissioners. you have been invited to participate in a focus group/group interview because you work/volunteer directly with victims as part of a victim service under your local Police and Crime Commissioner. If you feel at the end of this session there are some things which I have not raised, or there is something you might like to talk about please mention it.

If you need to take a break at any point let me know and we can pause or you can step out and re-join the group at any time, equally you can ask to stop the interview at any time (but hopefully you won't need to). With your permission I am recording this interview which will later be transcribed and used as part of my analysis. The recordings will not be shared with anyone.

Do you have any questions before we start?

I have a number of topics which I would like for you to discuss. This is an opportunity for you to discuss your thoughts and understanding, I'll just be keeping things on topic and may ask questions if there is something discussed which I'd like to know a bit more about.

1. **If I was to ask you to sum up in a sentence what you do with victims, what would you say?**
2. **So, how do the services you provide work?**
   a) How does the service get referrals?
   b) How do you then get a specific case?
   c) How do you support victims?
   d) How long do you provide support to a victim?
   e) Do any victims return for support down the line?
   f) Reflecting on your agencies aims *[on your website or wherever]*, how well do you think your service achieves its aims?
   g) Do you think it provides any extra things that victims need?
   h) Has Covid 19 impacted your service? In what ways?
3. **Do you have anything to do with the commissioning process? Do you know how it works?**
   a) Does it have any effect, as far as you know, on what kinds of cases you receive and what services you provide?

       b) Are there sufficient services being delivered to meet the needs of individual victims?

       c) Does this work for you as volunteers/staff?

4. **Evaluation**
   a) What do you know about the evaluation of your service?
   b) Are victims asked to evaluate the services i.e. a questionnaire?
   c) Do you reflect and feedback on the service you provide?

5. **Victims**
   a) When talking about the people you support, how would you refer to them? Clients? Victims? Or something else? Why?
   b) Thinking about the word victim, what would you say are the characteristics of someone who has been a victim of crime?
   c) Do you feel individuals you have supported 'embrace' the victim label? Do they prefer a different label?

6. **If you had a magic wand and could change anything free of charge/free from central policy, what changes would you like to see?**

Thank you all so much for your time today. We've had a really good discussion and before you leave I'd just like to know whether anyone has anything else they would like to share today?

If you would prefer to discuss this privately, I will be around when we finish or feel free to drop me an email to discuss further.

Before you leave, please complete the handout which just asks some questions about demographics and return to me. No one's answers will be identifiable in any report – the questions are purely so that I can fill in the 'methods' bits I have to write, you know, I spoke with x number of people.

Thank you for your time.

Area: Start Time:
Date: Finish
Time:

Appendix C – Strategic/Operative Lead Interview Schedule

Interview Schedule – Agency Strategic/Operative Lead

Name	
Age	
Gender	
Ethnicity	
Agency	

Thank you for taking the time to meet with me today. First, I'd like to run through the consent form and information sheet which you have been provided with and the reason why we are here today.

The aim of this research is to explore the victim experience of victim services since responsibility for the commissioning of victim services moved to Police and Crime Commissioners.   You have been invited to participate as you are the Strategic/Operative Lead for _____ and I am keen to hear about your experience of working for a service commissioned by the PCC and what this entails. If you feel at the end of the interview there are some things which I have not raised, or there is something you might like to talk about please mention it.

If you need to take a break at any point let me know and we can pause the interview at any time, equally you can ask to stop the interview at any time (but hopefully you won't need to). With your permission, I am recording this interview which will later be transcribed and used as part of my analysis. The recordings will not be shared with anyone.

Do you have any questions before we start?

I would like to start with a little more detail about you. What was your background prior to taking on this role?

Your current role is _____, could you tell me about that role and how long you've been in the post?

Job Title	
Time in post	
Description of role	
Background	

Moving on to the service, could you...

Talk me through how your services works
1. How do you support victims?
2. How do you receive referrals? (i.e who refers in etc)
3. How soon after an incident/referral do you contact the victim?
4. Do you think you receive enough information in the referrals?
5. On average, how long do you provide support to a victim for?
6. Have any victims returned to your service for more support, down the line?
7. How do you evaluate your service?

8. What would you see as 'success' in supporting victims?

One thing I'd like to better understand is the funding situation, could you tell me...

Funding
9. How is your service funded? How does that work?
    a. Are you only funded by the PCC or do you have other funding streams?
10. What would you say are the benefits of this model?
11. Is the funding time-limited?
12. Are there any difficulties for you in having time-limited funding?
    a. Do you have to retender or reapply? How often? Who is responsible for this *(one person, multiple people involved)?*
    b. Have funding streams constrained the kinds of service you can offer? Or been beneficial in enabling you to develop new services?
13. Do you need to evaluate the service to apply for funding? What do you need to demonstrate? How easy or difficult is that? *(scale of 1 being easy and 5 being hard, as well as description)*
[remind participants, if need to, that their comments are anonymous so they can be frank]
14. Do you think commissioning is a helpful way of appointing services to deal with victims in this country?
15. What is it like being commissioned to deliver a service by a politically elected PCC who may change every four years?

Thinking about all the services you offer to victims
16. What are the most typical needs that clients who use your service have?
17. Do you think these are the greatest 'needs'?
18. Do you think the current ways you provide services are working for victims? Why?
19. Is there anything you would do differently?
    a. What are the barriers to doing this?
20. Do you need to work with other agencies?
    a. How does that go?
    b. Do you refer to other agencies?
    c. Are you working alongside agencies you also compete against for funding?
21. Reflecting on your agencies aims *[on your website or wherever]*, how well do you think your service achieves its aims?
22. Are there sufficient services being delivered to meet the needs of individual victims?
23. Has Covid 19 impacted your service? In what ways?

Thinking about how to refer to your clients
24. What do you call your clients when you're describing the work of your agency? – Victims? Survivors? Service users?
25. Thinking about the word victim, what would you say are the characteristics of someone who has been the victim of crime?
26. Do you feel individuals you have supported 'embrace' the victim label? Do they prefer a different label?

This has been really interesting and useful and I am grateful to you for taking the time to meet with me today. Before we finish up, is there anything else you would like to say about the service?

Thank you.

Appendix D – PCC Interview Schedule

<u>Interview Schedule – PCC Office</u>

Name	
Age	
Gender	
Ethnicity	

Thank you for taking the time to meet with me today. First, I'd like to run through the consent form and information sheet which you have been provided with and the reason why we are here today.

The aim of this research is to explore the victim experience of victim services since responsibility for the commissioning of victim services moved to Police and Crime Commissioners.   You have been invited to participate as you are the _____at the PCC office and I am keen to hear about your experience of commissioning victim services for the PCC and what this entails. If you feel at the end of the interview there are some things which I have not raised, or there is something you might like to talk about please mention it.

If you need to take a break at any point let me know and we can pause the interview at any time, equally you can ask to stop the interview at any time (but hopefully you won't need to). With your permission, I am recording this interview which will later be transcribed and used as part of my analysis. The recordings will not be shared with anyone.

Do you have any questions before we start?

I would like to start with a little more detail about you. What was your background prior to taking on this role?

Your current role is _____, could you tell me about that role and how long you've been in the post?

Job Title	
Time in post	
Description of role	
Background	

1. **Were you involved in the development of victim services in your area?**

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2. <u>Yes</u>
   a) Could you talk me through how you went about this?
   b) What did you do to decide what was needed? i.e. scoping exercises etc.
   c) How long did this take?
   d) What were your priorities for services/victim types?
   e) Did you continue what was already there?
   f) Did you introduce anything new in terms of service or focusing on different kinds of offence or victim?
   g) Did you introduce new ways of agencies applying for funding? How? Tender?

      h) If you were to do this over, is there anything you would do differently?

2. <u>No</u>
      a) Do you know how they went about the development? From scoping to tender etc.
      b) Is there anything you would have done differently?

---

3. **So what were you aiming to attain in terms of the victim services available in the area?**
      a) Are there any groups you think are really well served?
      b) And any less well served?
      c) What do you think are the biggest 'needs' victims have?
      d) Do you rely on out of area services of any particular kind of service (national services or hotlines or whatever)?
      e) Is there enough funding available to you to create the kind of victim services you would like to see?
      f) Are there sufficient services being delivered to meet the needs of individual victims?
      g) Has Covid 19 impacted your services? In what ways?

4. **Thinking about the ways in which services are funded or commissioned**
      a) Which model of funding and applications do you use?
      b) What do you find to be the advantages and disadvantages of that?
      c) Have you changed the way you procure services during your tenure? Why?
      d) How do you monitor your services?
      e) How do you evaluate your services?
      f) How do you define 'success' with your services? How successful have your services been?
      g) Has Covid 19 impacted your funding or commissioning? In what ways?

5. **Have you made any changes since these were first implemented?** i.e. added new services, removed/reduced any services? What influenced those decisions?

6. **Some more general questions**
      a) Are there any restrictions on who you will provide victim services to?
      b) Are there any restrictions on the number of agencies an individual can accept support from?
      c) Do you feel individuals supported by your services are happy with or 'embrace' the victim label? Do they prefer a different label?
      d) Thinking about the victim label, what would you say are the characteristics of someone who has been a victim of crime?
      e) What happens if a new PCC is elected? How does this impact on the services currently available? How does this affect victims?
      f) If you had a magic wand and could change anything free of charge/free from central policy, what changes would you like to see?

This has been really interesting and useful and I am grateful to you for taking the time to meet with me today. Before we finish up, is there anything else you would like to add?

Thank you.

Appendix E – 12 Victims' Rights under the current Victims' Code

Summary of Victims' Rights[8]

1. To be able to understand and to be understood
You have the Right to be given information in a way that is easy to understand and to be provided with help to be understood, including, where necessary, access to interpretation and translation services.

2. To have the details of the crime recorded without unjustified delay
You have the Right to have details of the crime recorded by the police as soon as possible after the incident. If you are required to provide a witness statement or be interviewed, you have the Right to be provided with additional support to assist you through this process.

3. To be provided with information when reporting the crime
You have the Right to receive written confirmation when reporting a crime, to be provided with information about the criminal justice process and to be told about programmes or services for victims. This might include services where you can meet with the suspect or offender, which is known as Restorative Justice.

4. To be referred to services that support victims and have services and support tailored to your needs
You have the Right to be referred to services that support victims, which includes the Right to contact them directly, and to have your needs assessed so services and support can be tailored to meet your needs. If eligible, you have the Right to be offered a referral to specialist support services and to be told about additional support available at court, for example special measures.

5. To be provided with information about compensation
Where eligible, you have the Right to be told about how to claim compensation for any loss, damage or injury caused as a result of crime.

6. To be provided with information about the investigation and prosecution
You have the Right to be provided with updates on your case and to be told when important decisions are taken. You also have the Right, at certain stages of the justice process, to ask for decisions to be looked at again by the relevant service provider.

7. To make a Victim Personal Statement
You have the Right to make a Victim Personal Statement, which tells the court how the crime has affected you and is considered when sentencing the offender. You will be given information about the process.

8. To be given information about the trial, trial process and your role as a witness
If your case goes to court, you have the Right to be told the time, date and location of any hearing and the outcome of those hearings in a timely way. If you are required to give evidence, you have

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[8] Taken from Statutory Guidance: Code of Practice for Victims of Crime in England and Wales (Victims' Code), updated 10 June 2024 https://www.gov.uk/government/publications/the-code-of-practice-for-victims-of-crime/code-of-practice-for-victims-of-crime-in-england-and-wales-victims-code

the Right to be offered appropriate help before the trial and, where possible, if the court allows, to meet with the prosecutor before giving evidence.

9. To be given information about the outcome of the case and any appeals
You have the Right to be told the outcome of the case and, if the defendant is convicted, to be given an explanation of the sentence. If the offender appeals against their conviction or sentence, you have the Right to be told about the appeal and its outcome.

10. To be paid expenses and have property returned
If you are required to attend court and give evidence, you have the Right to claim certain expenses. If any of your property was taken as evidence, you have the Right to get it back as soon as possible.

11. To be given information about the offender following a conviction
Where eligible, you have the Right to be automatically referred to the Victim Contact Scheme, which will provide you with information about the offender and their progress in prison, and if/when they become eligible for consideration of parole or release. Where applicable, you also have the Right to make a new Victim Personal Statement, in which you can say how the crime continues to affect you.

12. To make a complaint about your Rights not being met
If you believe that you have not received your Rights, you have the Right to make a complaint to the relevant service provider. If you remain unhappy, you can contact the Parliamentary and Health Service Ombudsman.

Appendix F – Ethics Approval 03 September 2019

Katrina Edwards
Registration number: 180142925
School of Law
Programme: Standard PhD

Dear Katrina

PROJECT TITLE: Exploration of experience of victim services following the change to local commissioning
APPLICATION: Reference Number 024851

On behalf of the University ethics reviewers who reviewed your project, I am pleased to inform you that on 03/09/2019 the above-named project was **approved** on ethics grounds, on the basis that you will adhere to the following documentation that you submitted for ethics review:

- University research ethics application form 024851 (dated 02/09/2019).
- Participant information sheet 1062207 version 2 (02/09/2019).
- Participant information sheet 1062208 version 2 (02/09/2019).
- Participant information sheet 1062210 version 2 (02/09/2019).
- Participant information sheet 1062209 version 2 (02/09/2019).
- Participant consent form 1062214 version 2 (02/09/2019).
- Participant consent form 1062213 version 2 (02/09/2019).
- Participant consent form 1062212 version 2 (02/09/2019).
- Participant consent form 1062211 version 2 (02/09/2019).

If during the course of the project you need to deviate significantly from the above-approved documentation please inform me since written approval will be required.

Yours sincerely

Penelope Russell
Ethics Administrator
School of Law

Appendix G – Updated Ethics Approval 18 May 2020

Dear Katrina

Thank you for your email.

I have the original ethics application for which you were given approval in September 2019. I understand that you propose to add video conferencing as a method of interviewing.

Your original ethics application stated that the project involved potentially vulnerable participants and highly sensitive topics. The most recent guidance states: "If the research involves vulnerable people, sensitive topics, or other significant risks to the participants or risks to the researcher, then the changes should be classed as a significant amendment and will require consideration by one of the original ethics reviewers, to ensure that the proposed changes are appropriate given the nature of the project".

I was one of the original ethics reviewers. Paragraph 3.1.8 of the Guidance to the university procedure states: the researcher must consider whether the proposed amendment constitutes a significant change that could have a potential impact on the dignity, rights, safety and well-being of the participants" and also states "the reviewer may be happy to approve the changes immediately [if the changes are not considered significant".

I do not consider this change to be significant. Therefore, my understanding is that I can simply approve this change immediately and ask our Ethics Administrator to make a record and upload a copy of the approval to the ethics system. I have copied Luke into this email so that he can do so.

Kind regards

Penny
Â
Penelope Russell
Senior Fellow of the Higher Education Academy
Solicitor (non-practising)

School of Law
University of Sheffield
BartolomÃ© House
Winter Street
Sheffield S3 7ND
Tel 0114 2226873

Please note that I am not usually in the University on Thursdays.

Appendix H – Victim Participant Information Sheet and Consent Form

Exploration of experience of victim services following the change to local commissioning
Participant Information Sheet

You are being invited to take part in a research project. Before you decide whether or not to participate, it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully and discuss it with others if you wish. Ask us if there is anything that is not clear or if you would like more information. Thank you for reading this.

1. What is the project's purpose?
The purpose of this PhD research is to explore the experience victims have of victim services since responsibility for the commissioning of victim services moved to Police and Crime Commissioners.

2. Why have I been chosen?
You have been invited to participate because you have utilised a victim service commissioned under your local Police and Crime Commissioner. It is hoped that 25 individuals who have experienced a victim service will be interviewed as part of this research, alongside agencies delivering victim services and the Office of the Police and Crime Commissioner.

As this research is about the victim experience it is important to speak to individuals who have been victims of crime and experienced at least one of the services available.

3. Do I have to take part?
Participation in this research is entirely voluntary and you are under no obligation to participate if you do not wish to. If you do decide to take part you will be given this information sheet to keep and be asked to sign a consent form. Should you wish to withdraw, you may do so anytime within the first three months following your interview. Should you wish to withdraw please email the researcher keedwards2@sheffield.ac.uk at any time up until the interview or tell them during your interview.

4. What will happen to me if I take part? What do I have to do?
If you agree to take part you will be invited to attend an interview, face-to-face, over the telephone or via video conferencing, whichever is most convenient for you, with the researcher. The interviews should last between 30 and 40 minutes and will consist of mainly open questions, allowing you to answer a question in as much depth as you feel comfortable. At this interview you will be asked about the support needs you required and the support you received from victim services, your experience of these services and whether they benefited you, as well as your views on being a victim of crime. If you agree these interviews will be audio recorded and transcribed by the researcher following interview to help the analysis. Once your interview has been completed it will be transcribed and anonymised so that you personally cannot be identified. No

other use will be made of them without your written permission except in the researcher's thesis and in future conferences, and no one outside the project will be allowed access to the original recordings. If you do not wish for this to be audio recorded please let the interviewer know at the time of interview (and on the consent form) and she will make notes of your interview.

5.   What are the possible disadvantages and risks of taking part?
It is not anticipated that there will be any disadvantages or risks for you in participating in this research as it is about understanding and exploring your experiences. However, there is a chance it could cause you some distress and the research will therefore have details available of services you may wish to contact to seek further support.

6.   What are the possible benefits of taking part?
Whilst there are no immediate benefits for those people participating in this project, it is hoped that this work will provide further understanding of the experience of victims and what victims need from victim services and inform the development and delivery of victim services going forward.

7.   Will my taking part in this project be kept confidential?
All the personal information that we collect about you during the course of the research will be kept safely and will only be accessible to the researcher and her supervisors. You will not be able to be identified in any reports or publications.

8.   What is the legal basis for processing my personal data?
According to data protection legislation, we are required to inform you that the legal basis we are applying in order to process your personal data is that 'processing is necessary for the performance of a task carried out in the public interest' (Article 6(1)(e)). Further information can be found in the University's Privacy Notice https://www.sheffield.ac.uk/govern/data-protection/privacy/general. As we will be collecting some data that is defined in the legislation as more sensitive (information about your age, gender, ethnicity), we also need to let you know that we are applying the following condition in law: that the use of your data is 'necessary for scientific or historical research purposes'.

The University of Sheffield will act as the Data Controller for this study. This means that the University is responsible for looking after your information and using it properly.

Once your interview has been completed it will be transcribed by the researcher and anonymised. Only the researcher and her supervisors will have access to this data. Identifiable personal data will be destroyed as soon as possible following completion of the research. Your interview will be collated alongside others and used, possibly through direct quotes, in the researcher's PhD thesis.

9.   Who is organising and funding the research?
This research is being conducted as the basis of the researcher's PhD and is funded by the University of Sheffield.

10.   Who has ethically reviewed the project?

This project has been ethically approved via the University of Sheffield's Ethics Review Procedure, as administered by the School of Law.

11.   What if something goes wrong and I wish to complain about the research?

Should you have any concerns or wish to raise a complaint, you should contact the supervisors of this research: Professor Joanna Shapland, email: j.m.shapland@sheffield.ac.uk or Dr David Thompson, email: d.m.thompson@sheffield.ac.uk. Should you feel your complaint has not been handed to your satisfaction, you may contact the Head of School, who will then escalate the complaint through the appropriate channels: Professor Graham Gee, email: g.gee@sheffield.ac.uk. Should your complaint relate to how your personal data has been handled, information about how to raise a complaint can be found in the University's Privacy Notice: https://www.sheffield.ac.uk/govern/data-protection/privacy/general.

12.   Contact for further information

Should you require any further information about the project, please contact:

Researcher:	Supervisors:
Katrina Edwards	Professor Joanna Shapland/ Dr David Thompson
School of Law, University of Sheffield	School of Law, University of Sheffield
Bartolome House	Bartolome House
Winter Street	Winter Street
Sheffield S3 7ND	Sheffield S3 7ND
Keedwards2@sheffield.ac.uk	

You will be provided with a copy of this information sheet and a signed consent form to keep. Thank you for taking the time to read this and for taking part in this research project.

Exploration of experience of victim services following the change to local commissioning

Consent Form

Please tick the appropriate boxes	Yes	No
Taking Part in the Project		
I have read and understood the project information sheet dated August 2019 and/or the project has been fully explained to me. (If you will answer No to this question please do not proceed with this consent form until you are fully aware of what your participation in the project will mean.)	☐	☐
I have been given the opportunity to ask questions about the project.	☐	☐
I agree to take part in the project. I understand that taking part in the project will include being interviewed face-to-face, over the telephone or via video conferencing.	☐	☐
I agree to this interview being audio recorded.	☐	☐
I understand that my taking part is voluntary and that I can withdraw from the study at any time in the first three months following the interview; I do not have to give any reasons for why I no longer want to take part and there will be no adverse consequences if I choose to withdraw.	☐	☐
How my information will be used during and after the project		
I understand my personal details such as name, phone number, address and email address etc. will not be revealed to people outside the project.	☐	☐
I understand and agree that my words may be quoted in publications, reports, web pages, and other research outputs. I understand that I will not be named in these outputs.	☐	☐
So that the information you provide can be used legally by the researchers		
I agree to assign the copyright I hold in any materials generated as part of this project to The University of Sheffield.	☐	☐

Name of participant [printed]   Signature   Date

Name of Researcher [printed]   Signature   Date

Project contact details for further information:
Should you require any further information, in the first instance please contact the doctoral researcher, Katrina Edwards at: keedwards2@sheffield.ac.uk. In the event of a complaint please contact: Professor Joanna Shapland (j.m.shapland@sheffield.ac.uk) or Dr David Thompson (d.m.thompson@sheffield.ac.uk), School of Law, University of Sheffield, Bartolome House, Winter Street, Sheffield, S3 7ND.

Appendix I – Focus Group Information Sheet and Consent Form

Exploration of experience of victim services following the change to local commissioning
Participant Information Sheet

You are being invited to take part in a research project. Before you decide whether or not to participate, it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully and discuss it with others if you wish. Please ask if there is anything that is not clear or if you would like more information. Thank you for reading this.

1.   What is the project's purpose?
The purpose of this PhD research is to explore the experience victims have of victim services since responsibility for the commissioning of victim services moved to Police and Crime Commissioners.

2.   Why have I been chosen?
You have been invited to participate because you work/volunteer directly with victims as part of a victim service under your local Police and Crime Commissioner. It is hoped that up to five agencies in this area will agree to be interviewed, as well as five victims assisted by each agency, staff/volunteers delivering the service and the Office of the Police and Crime Commissioner for this region.

As this research is about the victim experience of victim services it is important to speak to individuals working for the service who are involved at a strategic level, a referral level and also delivering the service directly to victims.

3.   Do I have to take part?
Participation in this research is entirely voluntary and you are under no obligation to participate if you do not wish to. If you do decide to take part you will be given this information sheet to keep and be asked to sign a consent form. Should you wish to withdraw, you may do so anytime within the first three months following your interview. Should you wish to withdraw please email the researcher keedwards2@sheffield.ac.uk at any time up until the interview or tell them during your interview. Once your interview has been completed it will be transcribed and anonymised so that you cannot be identified.

4.   What will happen to me if I take part? What do I have to do?
If you agree to take part you will be invited to attend a group interview/focus group together with up to 4 other staff/volunteers from your agency either face-to-face, over the telephone or via video conferencing. These focus groups should last between 1 to 2 hours and will consist of mainly open questions, allowing you to answer a question and discuss in as much depth as you feel comfortable. At this focus group you will be asked about what your service does, your role and how it works and your view of what it means to be a victim. If you agree these groups will be audio recorded and transcribed by the researcher following the session to allow for it to be

analysed and included in the thesis, as well as for use in conference presentations and lectures. No other use will be made of them without your written permission, and no one outside the project will be allowed access to the original recordings. If you do not wish for this to be audio recorded please let the interviewer know at the time of interview (and on the consent form) and she will make notes of your interview.

5.   What are the possible disadvantages and risks of taking part?
It is not anticipated that there will be any disadvantages or risks for you in participating in this research as it is about understanding and exploring the victim experience of victim services.

6.   What are the possible benefits of taking part?
Whilst there are no immediate benefits for those people participating in this project, it is hoped that this work will provide further understanding of the experience of victims and what victims need from victim services and inform the development and delivery of victim services going forward.

7.   **Will my taking part in this project be kept confidential?**
All the personal information that we collect about you during the course of the research will be kept safely and will only be accessible to the researcher and her supervisors. You will not be able to be identified in any reports or publications. All participants are asked to keep participants and what is discussed during the focus group confidential, however there is no way of monitoring this and therefore no absolute guarantee of confidentiality.

8.   What is the legal basis for processing my personal data?
According to data protection legislation, we are required to inform you that the legal basis we are applying in order to process your personal data is that 'processing is necessary for the performance of a task carried out in the public interest' (Article 6(1)(e)). Further information can be found in the University's Privacy Notice https://www.sheffield.ac.uk/govern/data-protection/privacy/general. As we will be collecting some data that is defined in the legislation as more sensitive (information about your age, gender, ethnicity), we also need to let you know that we are applying the following condition in law: that the use of your data is 'necessary for scientific or historical research purposes'.

The University of Sheffield will act as the Data Controller for this study. This means that the University is responsible for looking after your information and using it properly.

Once your interview has been completed it will be transcribed by the researcher and anonymised. Only the researcher and her supervisors will have access to this data. Identifiable personal data will be destroyed as soon as possible following completion of the research. Your interview will be collated alongside others and used, possibly through direct quotes, in the researcher's PhD thesis.

9.   Who is organising and funding the research?
This research is being conducted as the basis of the researcher's PhD and is funded by the University of Sheffield.

10.   Who has ethically reviewed the project?
This project has been ethically approved via the University of Sheffield's Ethics Review Procedure, as administered by the School of Law.

11.   What if something goes wrong and I wish to complain about the research?
Should you have any concerns or wish to raise a complaint, you should contact the Supervisors of this research: Professor Joanna Shapland, email: j.m.shapland@sheffield.ac.uk or Dr David Thompson, email: d.m.thompson@sheffield.ac.uk. Should you feel your complaint has not been handled to your satisfaction, you may contact the Head of School, who will then escalate the complaint through the appropriate channels: Professor Graham Gee, email:g.gee@sheffield.ac.uk. Should your complaint relate to how your personal data has been handled, information about how to raise a complaint can be found in the University's Privacy Notice: https://www.sheffield.ac.uk/govern/data-protection/privacy/general.

12.   Contact for further information
Should you require any further information about the project, please contact:

Researcher: Katrina Edwards School of Law University of Sheffield Bartolome House Winter Street Sheffield S3 7ND Keedwards2@sheffield.ac.uk	Supervisors: Professor Joanna Shapland/ Dr David Thompson School of Law University of Sheffield Bartolome House Winter Street Sheffield S3 7ND

You will be provided with a copy of this information sheet and a signed consent form to keep. Thank you for taking the time to read this and for taking part in this research project.

Exploration of experience of victim services following the change to local commissioning

Consent Form

Please tick the appropriate boxes	Yes	No
Taking Part in the Project		
I have read and understood the project information sheet dated May 2020 and/or the project has been fully explained to me. (If you will answer No to this question please do not proceed with this consent form until you are fully aware of what your participation in the project will mean.)	☐	☐
I have been given the opportunity to ask questions about the project.	☐	☐
I agree to take part in the project. I understand that taking part in the project will include being interviewed in a group interview format with other volunteers and staff either face-to-face, over the telephone or via video conferencing.	☐	☐
I agree to this interview being audio recorded.	☐	☐
I agree that in taking part in a focus group I will respect the views of other participants and keep this confidential	☐	☐
I understand that my taking part is voluntary and that I can withdraw from the study at any time in the first three months following the interview; I do not have to give any reasons for why I no longer want to take part and there will be no adverse consequences if I choose to withdraw.	☐	☐
How my information will be used during and after the project		
I understand my personal details such as name, phone number, address and email address etc. as well as the agency I work/volunteer for will not be revealed to people outside the project.	☐	☐
I understand and agree that my words may be quoted in publications, reports, web pages, and other research outputs. I understand that I will not be named in these outputs.	☐	☐
So that the information you provide can be used legally by the researchers		
I agree to assign the copyright I hold in any materials generated as part of this project to The University of Sheffield.	☐	☐

Name of participant [printed]   Signature   Date

Name of Researcher [printed]   Signature   Date

Project contact details for further information:
Should you require any further information, in the first instance please contact the doctoral researcher, Katrina Edwards at: keedwards2@sheffield.ac.uk. In the event of a complaint please contact: Professor Joanna Shapland (j.m.shapland@sheffield.ac.uk) or Dr David Thompson (d.m.thompson@sheffield.ac.uk), School of Law, University of Sheffield, Bartolome House, Winter Street, Sheffield, S3 7ND.

Appendix J – Strategic/Operative Lead Information Sheet and Consent Form

Exploration of experience of victim services following the change to local commissioning
Participant Information Sheet

You are being invited to take part in a research project. Before you decide whether or not to participate, it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully and discuss it with others if you wish. Ask us if there is anything that is not clear or if you would like more information. Take time to decide whether or not you wish to take part. Thank you for reading this.

1.   What is the project's purpose?
The purpose of this PhD research is to explore the experience victims have of victim services since responsibility for the commissioning of victim services moved to Police and Crime Commissioners.

2.   Why have I been chosen?
You have been invited to participate because you work for a victim service in a strategic/referral capacity and the service is commissioned by your local Police and Crime Commissioner. It is hoped that up to five agencies in this area will agree to be interviewed, as well as five victims from each agency, staff/volunteers delivering the service and the Office of the Police and Crime Commissioner.
To gain a more detailed understanding of the experience of victim services post commissioning it is important to speak to individuals who work for the service at a strategic/referral allocation level.

3.   Do I have to take part?
Participation in this research is entirely voluntary and you are under no obligation to participate if you do not wish to. If you do decide to take part you will be given this information sheet to keep and be asked to sign a consent form. Should you wish to withdraw, you may do so anytime within the first three months following your interview. Should you wish to withdraw please email the researcher keedwards2@sheffield.ac.uk at any time up until the interview or tell them during your interview.

4.   What will happen to me if I take part? What do I have to do?
If you agree to take part you will be invited to attend an interview, face-to-face, over the telephone or via video conferencing, whichever is most convenient for you, with the researcher. The interviews should last between 30 and 40 minutes and will consist of mainly open questions, allowing you to answer a question in as much depth as you feel comfortable. At this interview you will be asked about the commissioning and referral processes, what your service does and how it works and your view of what it means to be a victim. If you agree these interviews will be audio recorded and transcribed by the researcher following interview to help the analysis. Once

your interview has been completed it will be transcribed and anonymised so that you cannot be identified. No one outside the project will be allowed access to the original recordings. If you do not wish to be audio recorded please let the interviewer know at the time of interview (and on the consent form) and she will make notes of your interview.

5.   What are the possible disadvantages and risks of taking part?
It is not anticipated that there will be any disadvantages or risks for you in participating in this research as it is about understanding and exploring the victim experience of victim services.

6.   What are the possible benefits of taking part?
Whilst there are no immediate benefits for those people participating in this project, it is hoped that this work will provide further understanding of the experience of victims and what victims need from victim services. It is hoped that this research will inform the development and delivery of victim services going forward.

7.   Will my taking part in this project be kept confidential?
All the personal information that we collect about you during the course of the research will be kept safely and will only be accessible to the researcher and her supervisors. You will not be able to be identified in any reports or publications.

8.   What is the legal basis for processing my personal data?
According to data protection legislation, we are required to inform you that the legal basis we are applying in order to process your personal data is that 'processing is necessary for the performance of a task carried out in the public interest' (Article 6(1)(e)). Further information can be found in the University's Privacy Notice https://www.sheffield.ac.uk/govern/data-protection/privacy/general. As we will be collecting some data that is defined in the legislation as more sensitive (information about your age, gender, ethnicity), we also need to let you know that we are applying the following condition in law: that the use of your data is 'necessary for scientific or historical research purposes'.

The University of Sheffield will act as the Data Controller for this study. This means that the University is responsible for looking after your information and using it properly.

Once your interview has been completed it will be transcribed by the researcher and anonymised. Only the researcher and her supervisors will have access to this data. Identifiable personal data will be destroyed as soon as possible following completion of the research. Your interview will be collated alongside others and used, possibly through direct quotes, in the researcher's PhD thesis.

9.   Who is organising and funding the research?
This research is being conducted as the basis of the researcher's PhD and is funded by the University of Sheffield.

10.   Who has ethically reviewed the project?
This project has been ethically approved via the University of Sheffield's Ethics Review Procedure, as administered by the School of Law.

11.   What if something goes wrong and I wish to complain about the research?
Should you have any concerns or wish to raise a complaint, you should contact the supervisors of this research: Professor Joanna Shapland, email: j.m.shapland@sheffield.ac.uk or Dr David Thompson, email: d.m.thompson@sheffield.ac.uk. Should you feel your complaint has not been handed to your satisfaction, you may contact the Head of School, who will then escalate the complaint through the appropriate channels: Professor Graham Gee, email:g.gee@sheffield.ac.uk. Should your complaint relate to how your personal data has been handled, information about how to raise a complaint can be found in the University's Privacy Notice: https://www.sheffield.ac.uk/govern/data-protection/privacy/general.

12.   Contact for further information
Should you require any further information about the project, please contact:

Researcher:	Supervisors:
Katrina Edwards	Professor Joanna Shapland/ Dr David Thompson
School of Law	School of Law
University of Sheffield	University of Sheffield
Bartolome House	Bartolome House
Winter Street	Winter Street
Sheffield S3 7ND	Sheffield S3 7ND
Keedwards2@sheffield.ac.uk	

You will be provided with a copy of this information sheet and a signed consent form to keep. Thank you for taking the time to read this and for taking part in this research project.

Exploration of experience of victim services following the change to

local commissioning

Consent Form

Please tick the appropriate boxes	Yes	No
Taking Part in the Project		
I have read and understood the project information sheet dated May 2020 and/or the project has been fully explained to me. (If you will answer No to this question please do not proceed with this consent form until you are fully aware of what your participation in the project will mean.)	☐	☐
I have been given the opportunity to ask questions about the project.	☐	☐
I agree to take part in the project. I understand that taking part in the project will include being interviewed face-to-face, over the telephone or via video conferencing.	☐	☐
I agree to this interview being audio recorded.	☐	☐
I understand that my taking part is voluntary and that I can withdraw from the study at any time in the first three months following the interview; I do not have to give any reasons for why I no longer want to take part and there will be no adverse consequences if I choose to withdraw.	☐	☐
How my information will be used during and after the project		
I understand my personal details such as name, phone number, address and email address etc. as well as the agency I work for will not be revealed to people outside the project.	☐	☐
I understand and agree that my words may be quoted in publications, reports, web pages, and other research outputs. I understand that I will not be named in these outputs.	☐	☐
So that the information you provide can be used legally by the researchers		
I agree to assign the copyright I hold in any materials generated as part of this project to The University of Sheffield.	☐	☐

Name of participant [printed]   Signature   Date

Name of Researcher [printed]   Signature   Date

Project contact details for further information:
Should you require any further information, in the first instance please contact the doctoral researcher, Katrina Edwards at: keedwards2@sheffield.ac.uk. In the event of a complaint please contact: Professor Joanna Shapland (j.m.shapland@sheffield.ac.uk) or Dr David Thompson (d.m.thompson@sheffield.ac.uk), School of Law, University of Sheffield, Bartolome House, Winter Street, Sheffield, S3 7ND.

Appendix K – PCC Information Sheet and Consent Form

Exploration of experience of victim services following the change to local commissioning
Participant Information Sheet

You are being invited to take part in a research project. Before you decide whether or not to participate, it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully and discuss it with others if you wish. Ask us if there is anything that is not clear or if you would like more information. Thank you for reading this.

1.   What is the project's purpose?
The purpose of this PhD research is to explore the experience victims have of victim services since responsibility for the commissioning of victim services moved to Police and Crime Commissioners.

2.   Why have I been chosen?
You have been invited to participate because you are the Police and Crime Commissioner/you work for the Office of the Police and Crime Commissioner with responsibility for the delivery of victims' services in your area. It is hoped that up to five agencies in this area will agree to be interviewed, as well as five victims from each agency and staff/volunteers delivering the service.

As this research is about the victim experience of victim services it is important to speak to the Office of the Police and Crime Commission to gain insight into the development of the services and commissioning process.

3.   Do I have to take part?
Participation in this research is entirely voluntary and you are under no obligation to participate if you do not wish to. If you do decide to take part you will be given this information sheet to keep and be asked to sign a consent form. Should you wish to withdraw, you may do so anytime within the first three months following your interview. Should you wish to withdraw please email the researcher keedwards2@sheffield.ac.uk at any time up until the interview or tell them during your interview.

4.   What will happen to me if I take part? What do I have to do?
If you agree to take part you will be invited to attend an interview with the researcher, face-to-face, over the telephone or via video conferencing, whichever is most convenient for you. The interview should last between 30 and 40 minutes and will consist of mainly open questions, allowing you to answer a question in as much depth as you feel comfortable. At the interview you will be asked about the commissioning process, the development of victim services in your area and your view of what it means to be a victim. If you agree these interviews will be audio recorded and transcribed by the researcher following interview to help the analysis. Once your interview has been completed it will be transcribed and anonymised so that you personally cannot be

identified. No other use will be made of them without your written permission except in the researcher's thesis and in future conferences, and no one outside the project will be allowed access to the original recordings. If you do not wish for this to be audio recorded please let the interviewer know at the time of interview (and on the consent form) and she will make notes of your interview.

5. What are the possible disadvantages and risks of taking part?
It is not anticipated that there will be any disadvantages or risks for you in participating in this research as it is about understanding and exploring the victim experience of victim services.

6. What are the possible benefits of taking part?
Whilst there are no immediate benefits for those people participating in this project, it is hoped that this work will provide further understanding of the experience of victims and what victims need from victim services. It is hoped that this research will inform the development and delivery of victim services going forward.

7. Will my taking part in this project be kept confidential?
All the personal information that we collect about you during the course of the research will be kept safely and will only be accessible to the researcher and her supervisors. You will not be able to be identified in any reports or publications, however the type of agency you work for will be, for example an RJ service or the Office of the PCC.

8. What is the legal basis for processing my personal data?
According to data protection legislation, we are required to inform you that the legal basis we are applying in order to process your personal data is that 'processing is necessary for the performance of a task carried out in the public interest' (Article 6(1)(e)). Further information can be found in the University's Privacy Notice https://www.sheffield.ac.uk/govern/data-protection/privacy/general. As we will be collecting some data that is defined in the legislation as more sensitive (information about your age, gender, ethnicity), we also need to let you know that we are applying the following condition in law: that the use of your data is 'necessary for scientific or historical research purposes'.

The University of Sheffield will act as the Data Controller for this study. This means that the University is responsible for looking after your information and using it properly.

Once your interview has been completed it will be transcribed by the researcher and anonymised. Only the researcher and her supervisors will have access to this data. Identifiable personal data will be destroyed as soon as possible following completion of the research. Your interview will be collated alongside others and used, possibly through direct quotes, in the researcher's PhD thesis.

9. Who is organising and funding the research?
This research is being conducted as the basis of the researcher's PhD and is funded by the University of Sheffield.

10. Who has ethically reviewed the project?

This project has been ethically approved via the University of Sheffield's Ethics Review Procedure, as administered by the School of Law.

11.   What if something goes wrong and I wish to complain about the research?
Should you have any concerns or wish to raise a complaint, you should contact the Supervisors of this research: Professor Joanna Shapland, email: j.m.shapland@sheffield.ac.uk or Dr David Thompson, email: d.m.thompson@sheffield.ac.uk. Should you feel your complaint has not been handed to your satisfaction, you may contact the Head of School: Professor Graham Gee (g.gee@sheffield.ac.uk). Should your complaint relate to how your personal data has been handled, information about how to raise a complaint can be found in the University's Privacy Notice: https://www.sheffield.ac.uk/govern/data-protection/privacy/general.

12.   Contact for further information
Should you require any further information about the project, please contact:

Researcher:	Supervisors:
Katrina Edwards	Professor Joanna Shapland/ Dr David Thompson
School of Law	School of Law
University of Sheffield	University of Sheffield
Bartolome House	Bartolome House
Winter Street	Winter Street
Sheffield S3 7ND	Sheffield S3 7ND
Keedwards2@sheffield.ac.uk	

You will be provided with a copy of this information sheet and a signed consent form to keep. Thank you for taking the time to read this and for taking part in this research project.

Exploration of experience of victim services following the change to

local commissioning

Consent Form

Please tick the appropriate boxes	Yes	No
Taking Part in the Project		
I have read and understood the project information sheet dated August 2019 and/or the project has been fully explained to me. (If you will answer No to this question please do not proceed with this consent form until you are fully aware of what your participation in the project will mean.)	☐	☐
I have been given the opportunity to ask questions about the project.	☐	☐
I agree to take part in the project. I understand that taking part in the project will include being interviewed face-to-face, over the telephone or via video conferencing.	☐	☐
I agree to this interview being audio recorded.	☐	☐
I understand that my taking part is voluntary and that I can withdraw from the study at any time in the first three months following the interview; I do not have to give any reasons for why I no longer want to take part and there will be no adverse consequences if I choose to withdraw.	☐	☐
How my information will be used during and after the project		
I understand my personal details such as name, phone number, address and email address etc. as well as the agency I work for will not be revealed to people outside the project.	☐	☐
I understand and agree that my words may be quoted in publications, reports, web pages, and other research outputs. I understand that I will not be named in these outputs.	☐	☐
So that the information you provide can be used legally by the researchers		
I agree to assign the copyright I hold in any materials generated as part of this project to The University of Sheffield.	☐	☐

Name of participant [printed]   Signature   Date

Name of Researcher [printed]   Signature   Date

Project contact details for further information:
Should you require any further information, in the first instance please contact the doctoral researcher, Katrina Edwards at: keedwards2@sheffield.ac.uk. In the event of a complaint please contact: Professor Joanna Shapland (j.m.shapland@sheffield.ac.uk) or Dr David Thompson (d.m.thompson@sheffield.ac.uk), School of Law, University of Sheffield, Bartolome House, Winter Street, Sheffield, S3 7ND.