



Crime and Covid-19

**How victims and survivors have
been impacted by the pandemic**

Rachel Almeida
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www.victimsupport.org.uk

Acknowledgments

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Introduction

The lockdown and restrictions imposed by the UK and Welsh Governments from 23 March 2020 in response to the Covid-19 pandemic has affected crime and victims' interaction with statutory agencies and Victim Support's (VS) services in different ways. It has also required changes to how support is provided. The gradual easing of the lockdown measures in early summer led to some return to pre-lockdown crime levels but changes to the volume and type of crimes experienced remain and continue to develop.

Since July, there has been an increase in local lockdowns as well as time-limited national lockdowns in both Wales and England with potential increases in restrictions and ongoing challenges to contain Covid-19. These continue to create additional medium-term, and potentially long-term, issues for victims and services.

There have been challenges in identifying and responding to the implications of lockdowns due to continuous changes to restrictions and the time needed to establish trends and issues. It is difficult to predict how these trends will further develop and what the future demand of services might be. This report will focus on the first 6 months following the first lockdown on 23 March 2020 with the aim of addressing the following questions and providing some insights that may relate to future restrictions and effects on crime, victims and services:

1. How do lockdown measures and restrictions affect levels of crime, different crime types or characteristics and those affected by crime?
2. What changes have statutory services and victim services, with particular focus on Victim Support, made to the provision of services to victims, and how have these effected victims?
3. What might be the longer-term implications for demand on services as a result of the lockdown and subsequent easing?
4. What changes to victim services and statutory services should continue and why?

Methodology

The findings within this report are drawn from two main sources.

1. Survey of 295 frontline Victim Support staff (282) and volunteers (13) on their experiences in supporting victims since lockdown began. A mixture of open and closed questions were included. The survey was open between 11 August and 14 September 2020.
2. Analysis of VS case management data. This data was extracted on 11 November and covers the period from 23 March to 1 November 2020. To facilitate comparison to pre-lockdown trends a baseline has been calculated based on averages from January and February 2020 data. All cases included in this data have been validated as eligible for VS services.

About Victim Support

Victim Support is an independent charity. We are dedicated to supporting people affected by crime and traumatic incidents in England and Wales, and we put them at the heart of our organisation. Our support and campaigns are informed and shaped by them and their experiences.

We provide specialist services to help people cope and recover and to empower them to ensure their voices are heard individually and collectively at a local and national level.

Our services help people affected by all types of crime and we provide free confidential support 24 hours a day, 365 days a year for people affected by crime and traumatic events – regardless of whether they have reported the crime to the police or when it occurred and for as long as it is needed.

Impact on crime experienced

Crime types

The Covid-19 pandemic and lockdown has affected how crime has been experienced. Some types of crime have been enabled by the lockdown, whilst others have reduced. Crime has exacerbated existing feelings of stress and isolation caused by the pandemic, as well as affecting how people have coped.

Following an initial reduction in the number of victims accessing VS services when lockdown was imposed in March, week by week the number of people affected by crime who self-referred or were referred into VS services steadily increased. The volume of victims accessing VS services have increased with each stage of easing, as shown in table 1.

Table 1: Average weekly referrals by stages of lockdown and easing

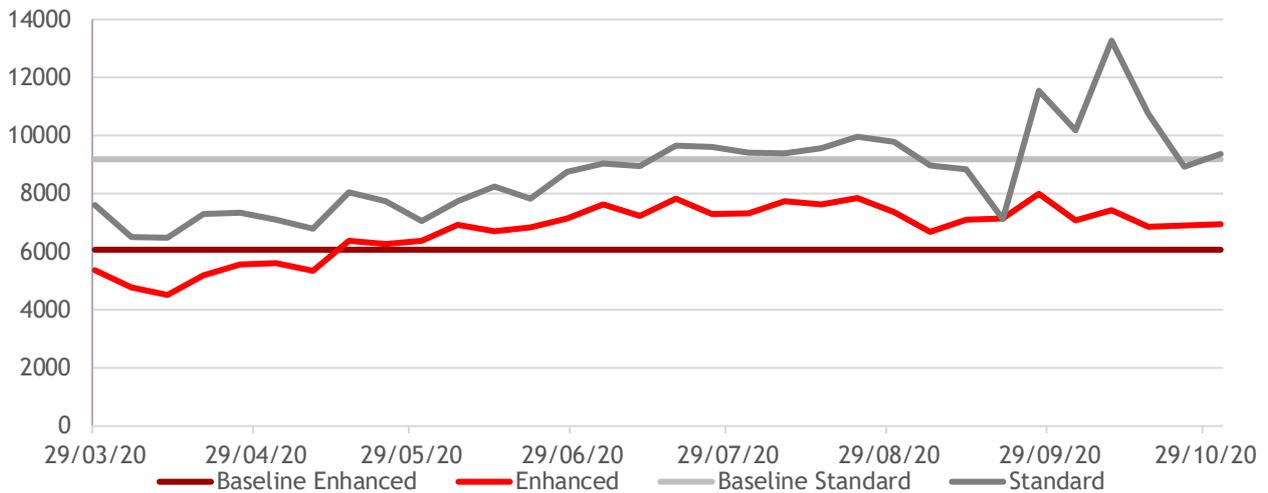
Period	Lockdown measures in England and Wales	Average weekly referral rate (nearest 100)
Baseline (06/01/20–01/03/20)	None	15,300
23/03/20–31/05/20	<p>On 23 March, a UK lockdown was introduced where people were only allowed to leave their homes once per day for exercise and grocery shopping. All non-essential shops and leisure facilities closed. Trials are suspended.</p> <p>On 8 May, in Wales people were allowed to exercise outside more than once a day.</p> <p>On 13 May, in England people who were not able to work from home were able to return to work, unlimited exercise was allowed, able to meet one person at two metre distance.</p> <p>From 18 May, Jury trials resume in a few courts in England and Wales.</p>	12,700
01/06/20–05/07/20	<p>On 1 June, in England schools were able to open for early years, Reception, Year 1 and Year 6, six people could meet outside.</p> <p>In Wales members of two households can meet outdoors but must maintain social distancing.</p> <p>On 13 June, in England people were able to have a social bubble with people outside the home</p> <p>On 15 June, non-essential shops re-opened. Years 10 and 12 return to school in England.</p>	15,400

Cont.	<p>On 22 June, retailers reopen and outdoor sports and wedding and civil partnership restrictions were eased in Wales.</p> <p>On 29 June, Schools in Wales re-open for all pupils but only one third are to be in school at any one time.</p>	
06/07/20— 30/08/20	<p>On 4 July in England and 13 July in Wales, pubs, restaurants, leisure facilities and places of worship opened. Two households were allowed to meet.</p> <p>On 20 July, playgrounds and outdoor gyms open in Wales.</p> <p>On 25 July, gyms, swimming pools and sports facilities opened In England.</p> <p>On 27 July museums, spas and beauty salons open and in Wales.</p> <p>On 1 August, shielding vulnerable people paused in England.</p> <p>On 3 August pubs, restaurants and hairdressers reopen in England</p> <p>On 10 August, swimming pools, gyms and other leisure centres open in Wales.</p> <p>On 15 August, In England other entertainment venues opened and weddings of up to 30 people were allowed.</p> <p>On 16 August, shielding ends in Wales.</p> <p>On 22 August, four households can form an extended bubble and meet indoors.</p>	17,100
31/08/20— 01/11/20	<p>Schools returned around 1–2 September</p> <p>On 14 September, social gatherings of more than six people are restricted.</p> <p>On 24 September pubs and restaurants and bars must close at 10pm.</p> <p>On 14 October, following many local lockdowns in previous months, tier regulations came into force.</p> <p>Between 23 October and 9 November, Wales went into a second lockdown.</p>	17,000

Alongside these dates, there have also been local lockdowns in numerous places such as Leicester, Blackburn, Darwin, Rochdale, Birmingham, Greater Manchester, Merthyr Tydfil, Bridgend, Blaenau Gwent, Newport, Cardiff, Swansea, Yorkshire and Lancashire as the speed at which the virus was spreading increased. In October, Wales entered a two-week national lockdown, while England entered a four-week national lockdown in early November.

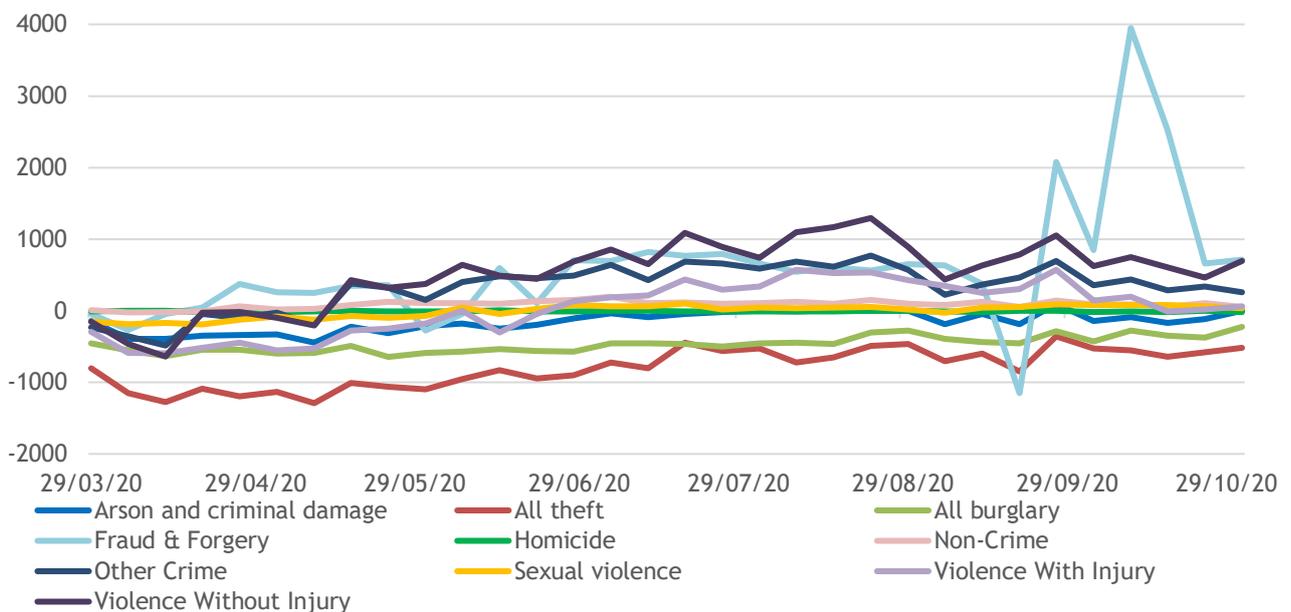
As well as a steady increase in volume, the proportion of new service users who were categorised as enhanced (victims of the most serious crimes, persistently targeted and vulnerable or intimidated victims) has been higher (44% of cases for period of data compared to 40% average). As shown in Graph 1, the number of enhanced cases referred or self-referred to Victim Support has trended above average levels since May. Between 23 March and 1 November there were 20,780 more enhanced referrals than if levels remained at the baseline.

Graph 1: Cases per week by standard and enhanced split¹



The type of crime experienced by victims during the lockdown differed from average levels. Eighty-nine per cent of staff and volunteers surveyed reported that they noticed a change in the crime experienced, with 36 per cent noticing a lot or great deal of change. Graph 2 shows the number of cases that vary from baseline levels (baseline is represented as 0). It shows the high volume of additional victims affected by violence with² and without³ injury since lockdown compared to average. There have been 936 more violence with injury cases and 16,504 more violence without injury cases between 23 March and 1 November than if levels had remained at baseline. Other crime types with notable higher volumes are sexual violence since June, other crime since May and fraud. Crime types that have trended below baseline since lockdown are theft, burglary, arson and criminal damage.

Graph 2: Variation of number referrals from baseline level each week by crime type



¹ 'Standard' cases refer to all cases that do not fall under the 'enhanced' category

² Violence with injury includes the following offences: poisoning, assault with injury, attempted murder, breach of care and neglect, causing death by driving offences, endangering life, failure to protect from female genital mutilation, inflicting grievous bodily harm, and wounding

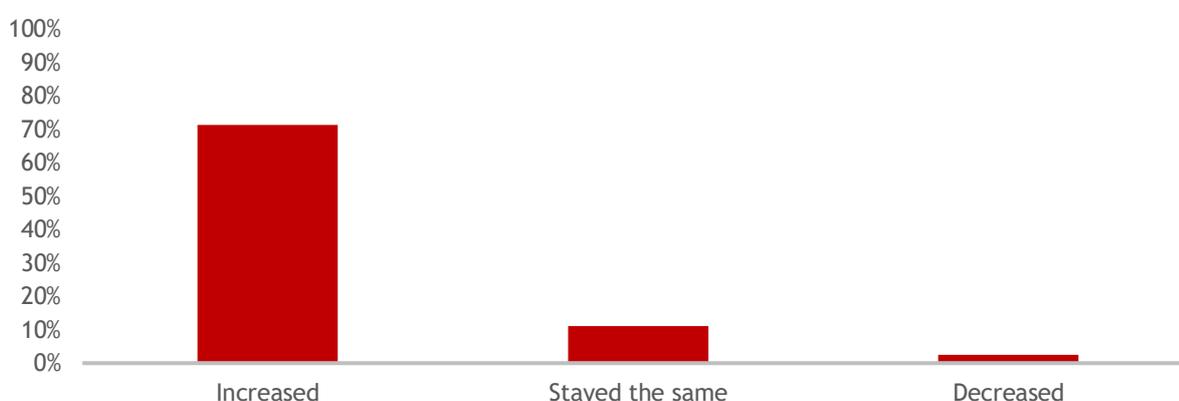
³ Violence without injury includes the following offences: assault without injury, child abduction and kidnapping, child cruelty, conspiracy to commit murder, modern slavery, and threats to kill. VS data also currently includes stalking and harassment in this category.

The majority (71 per cent) of survey participants reported that the negative impact or severity of the crime experienced by victims and survivors increased during lockdown. Specialist domestic abuse services and children and young people specific services were more likely to report an increase in the impact of lockdown. Reasons for an increase in the severity include 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.

‘People did not have access to their support networks and normal coping strategies and it brought up old trauma’ Support worker

‘Victims had even more to cope with along with the crime they were victim of. There was extra worry about the pandemic, stresses of not being able to get out and about, isolated from family and friends, not feeling safe but not able to move anywhere else.’ Support worker

Graph 3: Staff and volunteer survey responses on whether the negative impact or severity of the crime experienced by victims/survivors during a lockdown changed



There have also been particular challenges for victims where the crime occurred in their own home. The negative affect of being restricted to being at the scene of the crime was significant for some. This related primarily to victims of domestic abuse, sexual violence, harassment and anti-social behaviour.

Some victims who have accessed services during this time were also living with the perpetrator. This primarily affected victims of domestic abuse. We anticipate that some children and young people were also in lockdown with their perpetrator but due to ongoing barriers in accessing support and schools only recently re-opening, we still do not fully understand the numbers of those affected.

However, for victims of crimes outside the home such as violent robbery, being at home and quieter streets made them feel safer. A number of victims found that the lockdown protected them from others, for example, some survivors of domestic abuse felt safer as their ex-partners could not harass them.

Our services also experienced an increase in people accessing support for crimes that occurred prior to lockdown. Feelings on isolation and a reduction in distractions led some victims to start rethinking about crimes previously experienced.

Domestic abuse

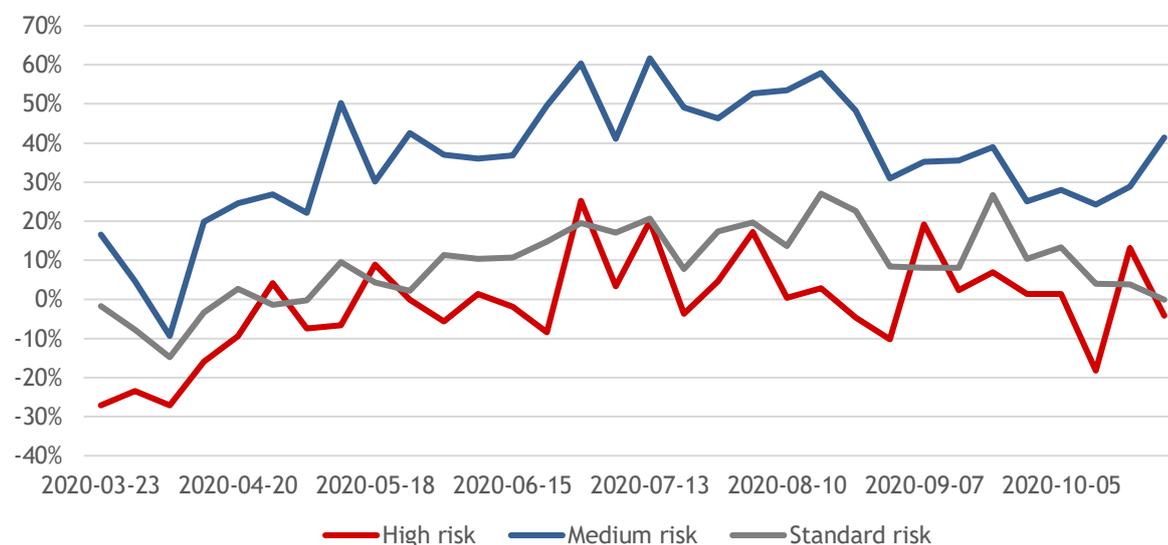
Since mid-April, the number of people affected by domestic abuse referred to VS services has increased significantly, and by the summer, we were seeing an additional 640 victims and survivors come into services per week compared to average levels. Between further lockdown easing in July and the start of September, levels of referrals remained around one quarter higher than average. Over 11,500 more survivors of domestic abuse have been referred to VS services between 23 March and 1 November than if levels had remained at baseline.

Table 2: Weekly average of domestic abuse referrals compared to baseline level by number of cases and percentage change

Date period	Average number of cases per week above baseline (0)	Percentage increase on average week during period
23/03/20–31/05/20	77	3%
01/06/20–05/07/20	501	18%
06/07/20–30/08/20	640	24%
31/08/20–01/11/20	352	13%

Since July the volume of new referrals that are domestic abuse related have been above average levels across all risk levels.⁴ However, there has been a particular increase in medium risk cases since May, as show in graph 4. Ninety-three per cent of domestic abuse survivors and victims who have accessed VS services since lockdown were categorised as being at medium or standard risk.

Graph 4: Percentage change in domestic abuse referrals from baseline (0%) by risk level



The proportion of people referred to VS since lockdown who are female has remained relatively constant at 75 per cent. This is in line with pre-lockdown levels.

⁴ Level of risk is assessed using DASH (Domestic Abuse, Stalking and Honour-based Violence) Assessment. The difference between high, medium and standard is determined by a score (Standard: 0–9, Medium:10–13)

There has, however, been variation in levels of increases across age groups. In line with wider data, relating to children and young people there was an overall 19 per cent drop in children 12 and under accessing VS services relating to domestic abuse between 23 March and 1 November. However, all other age categories had an increase in the number of referrals compared to average levels since June, with notable increases in survivors over the age of 55 years.

Table 3: Weekly average of domestic abuse referrals compared to baseline level by percentage change broken down by age group

Date period	12 and under	13 to 17	18 to 24	25 to 34	35 to 44	45 to 54	55 to 64	65 to 74	75 and over
23/03/20–31/05/20	-25%	-5%	-2%	4%	3%	2%	9%	2%	5%
01/06/20–05/07/20	-25%	15%	20%	19%	17%	11%	25%	18%	35%
30/08/20–06/07/20	-16%	10%	30%	24%	18%	20%	31%	24%	18%
31/08/20–01/11/20	-13%	15%	11%	15%	12%	10%	17%	12%	12%

Staff have reported an increase in child-parent violence as well as interpersonal abuse.

The amount of control and violence in the home experienced by victims of domestic abuse overall increased. The crime types within domestic abuse cases have been more severe during this period. Since June, domestic abuse cases with the crime type of violence without injury, violence with injury and other sexual offences have been consistently above baseline levels. The biggest percentage increase for domestic abuse cases has been violence without injury, which trended 25 per cent above average levels between mid-May and November.

Many of those who accessed services since lockdown were living with the alleged perpetrator. Staff supporting people affected by domestic abuse found perpetrators used the fact that people could be penalised by breaching Covid-19 restrictions as a way of controlling victims' choice to leave the home. Victims have spent more time with the abuser. Staff reported that perpetrators would lie about being in self-isolation and having Covid-19 so they would not leave the house. Incidents of violence were 'more intensive, increasing in frequency and severity over the lockdown period'. Abuse was able to continue unseen. There has been an increased chance that the alleged perpetrator of abuse is in the home when the victim has accessed services increasing their risk and reducing their ability to utilise the support available.

'People were stuck in homes with their abusers. There was no reason to be out of the house – e.g. pick up children, go to doctor. It was harder to get through to the clients. Counselling sessions were also put on hold.' Support worker

'Victims were a lot more monitored due to being at home with their abusers.' Support worker

Many survivors of domestic abuse accessing services since 23 March reported they felt lonely, overwhelmed, isolated and unsafe.

However, other service users have reported that circumstances improved with pub and bar closures during the lockdown period.

Staff supporting people affected by domestic abuse have also cited the effect of child contact arrangements. Some staff reported an increase in abuse involving child contact issues. Service users who were experiencing child contact disputes expressed feeling more vulnerable and worried about the safety of their children if the perpetrator obtained access. For other survivors, where the children were previously used against the survivor following separation, ongoing abuse through child contact stopped as the perpetrator had no contact. Where contact stopped some service users have reported that the child's behaviour settled and there were 'no mind games and manipulation'.

Sexual violence

There was a reduction in the number of people affected by sexual violence referred to or accessing VS services in the initial period of lockdown, as shown in table 4. However, since the beginning of May, this changed and there has been steady increase. Sexual violence referrals peaked in July where there was a 47 per cent increase compared to average levels.

'The slowed pace of life afforded time for victims to give thought to old crimes and concerns – it seemed a challenging (and sometimes eye-opening) time for victims of historical offences to explore what had happened.' Support worker

Around one third of rape referrals and around 16 per cent of other sexual offence referrals between 23 March and 1 November related to domestic abuse, which is in line with pre-Covid-19 data.

Table 4: Weekly average of sexual violence referrals compared to baseline level by number of cases and percentage change

Date period	Average number of other sexual offence cases per week compared to baseline (0)	Percentage change of other sexual offence cases on average week during period	Average number of rape cases per week compared to baseline (0)	Percentage change of rape cases on average week during period
23/03/20–31/05/20	-89	-33%	-39	-28%
01/06/20–05/07/20	22	8%	11	8%
06/07/20–30/08/20	38	14%	59	42%
31/08/20–01/11/20	42	15%	13	10%

The demographics of sexual violence victims and survivors accessing VS services changed during the different stages of lockdown. During full lockdown sexual violence referrals that were female dropped by one third, however male referrals only reduced by nine per cent. Trans and non-binary survivors continued to access our services at baseline levels.

Since restrictions have eased, both female and male referrals are above baseline levels. There have been higher numbers of average weekly female referrals compared to male, which have increased each period to an average of 42 additional referrals per week between 31 August and 1 November. However the percentage increase of male referrals was higher during the summer (19 per cent above baseline compared to 9% increase in female referrals between 6 July and 30 August).

The proportion of sexual violence referrals across the age levels has not changed significantly compared to the baseline, with 42 per cent of survivors aged between 18 and 34 years (-2%). However, there has been some variation in the extent restrictions and easing has effected access and demand for support. The number of survivors aged between 13 to 17 years and between 65 and 74 years referred to VS noticeably reduced in full lockdown (-39 per cent and -45 per cent respectively), with only 13 to 17 years returning to average levels since schools returned in September. All other age groups had a drop in referrals in full lockdown and higher than average level of referrals in the summer. Overall there have been fewer survivors of sexual violence aged 13–24 years and 45–54 years accessing VS services than average, and more survivors aged 25–44 years.

Anti-social behaviour and harassment

With people staying in their homes more, there has been an increase in people accessing VS services due to antisocial behaviour (ASB) and harassment. The proportion of calls received by VS’s Supportline related to antisocial behaviour has slightly increased. Although the number is lower than other crime sub-categories, VS’s community based services have also seen an increase in referrals for ASB since 23 March. There was a reduction in referrals immediately following the lockdown, in line with other crimes. However, since May referrals have been consistently above average, as shown in table 5.

Table 5: Weekly average of antisocial behaviour referrals compared to baseline level by number of cases and percentage change

Date period	Average no. cases per week compared to baseline (0)	Percentage change on average week during period
23/03/20–31/05/20	36	41%
01/06/20–05/07/20	67	77%
06/07/20–30/08/20	54	62%
31/08/20–01/11/20	42	48%

Staff and volunteers have highlighted an increase in cases involving neighbours as suspects. However, in some cases of ASB the fact that people were confined to their homes resulted in a decrease in likelihood of face-to-face confrontation or incident.

As well as an increase in the number of people affected by ASB and harassment, staff and volunteers report an increase in intensity. Victims have experienced relentless ASB and harassment from neighbours. They have expressed to staff that they have found it harder as they have struggled to get away from their home to escape abuse and persecution. Service users have also struggled to find support or access help from the council.

‘Councils could not move cases forward as County Courts were shut. Cases were left hanging with victims waiting or injunction orders or evictions. Victims found it very hard to live next door to people when they had come so close to obtaining an order to protect them, having to cope with waiting while the perpetrators continue to harass or worse, while everything is at a standstill.’ Support worker

‘We saw a number of instances of suicidal ideation and attempts during the lockdown period where we had vulnerable people with mental health issues locked in to a place they felt unsafe in with no way out and a limited grasp of an already difficult to understand set of rules. The other issue during lockdown was the rise of online harassment.’ Support worker

Hate crime

Since the first easing of lockdown in May the number of people affected by hate crime accessing VS services has remained significantly above pre-lockdown levels as shown in table 6. There have been nearly 3,500 more cases of hate crime referred to VS than if numbers remained at average levels. Crime types that have increased in relation to hate crime are other crime⁵ (37 per cent⁶), violence without injury (26 per cent⁷), and criminal damage (41 per cent⁸).

Table 6: Weekly average of hate crime referrals compared to baseline level by number of cases and percentage change

Date period	Average no. cases per week compared to baseline (0)	Percentage change on average week during period
23/03/20–31/05/20	-23	-6%
01/06/20–05/07/20	204	51%
06/07/20–30/08/20	257	65%
31/08/20–01/11/20	114	29%

There has been some variation in the sub-categories of hate crime. The highest increase has been race and nationality related hate crime, which has increased by one third. Between 23 March and 1 November there were 28 per cent more referrals for disability hate crime and 29 per cent more referrals for homophobic and sexual orientation hate crime than the baseline.

The crime experienced and impact has been more acute where hate crime victims live in close proximity to perpetrators and restrictions limit their ability to escape the abuse. Staff have raised that the lockdown has also been used to intimidate BAME communities with accusations of flouting rules and filming non-compliance with restrictions.

⁵ Other crime includes the following offences: Homophobic incident, other firearms offences, public fear or distress, threat or possession with intent to commit criminal damage, children affected by parental domestic abuse, undisclosed crimes when there is a self-referral.

⁶ Percentage increase in cases between 23 March and 1 November compared to average level (baseline)

⁷ *ibid*

⁸ *ibid*

‘BAME communities already feel scared at being disproportionately impacted by the virus and then to add an extra layer of blame for causing the spread of it impacts deeply.’

Support worker

‘We also anecdotally saw a rise in hate crime, with an increase in incidents perpetrated against ‘Asian’ people. Not necessarily Chinese, but people from a range of backgrounds including Vietnamese, Thai and Japanese but with connotations indicating the perpetrator saw the victim as ‘Chinese’.’ **Support worker**

Homicide

The number of homicides since lockdown has remained within average levels. Staff from the National Homicide Service report additional challenges experienced by families bereaved from homicide. Families have struggled with not being able to see each other or grieve with friends and family in the normal way, having more time alone and not having access to face-to-face counselling or therapy. Service users with underlying factors have found the increase in pressure on their ability to cope the most difficult.

Restrictions and reductions in services have caused more emotional strain. Less family members have been able to view bodies at the mortuary. Funerals being delayed or a reduction in the number of people that can attend them, as well as issues where relatives live abroad, have caused anguish for families and friends trying to remember their loved one. Changes to court dates and trials being put on hold have caused stress. In addition, during lockdown families were not able to register deaths due to local registry offices being closed and have had difficulties in contacting the Department for Work and Pensions. In addition, anniversary routines such as family gatherings and grave visits have had to be cancelled causing more upset. These impacts will have a lasting effect on the bereaved following a homicide and it is likely that this will lead to service users requiring support for a longer duration than has previously been experienced.

Fraud

Between 23 March and 1 November, there was a 43 per cent increase in fraud referrals compared to baseline levels. The sustained increase in fraud referrals amounts to over 19,000 more cases in this period than if levels had remained at the baseline.

Table 7: Weekly average of fraud referrals compared to baseline level by number of cases and percentage change

Date period	Average number cases per week compared to baseline (0)	Percentage change on average week during period
23/03/20–31/05/20	100	7%
01/06/20–05/07/20	411	30%
06/07/20–30/08/20	676	49%
31/08/20–01/11/20	1180	86%

The majority of victims of fraud have been aged between 25–44 years, in line with pre-lockdown trends (41%).

The rise in fraud cases has been driven by a few key fraud categories: 56% of the rise in VS fraud cases can be accounted for by victims of online shopping fraud. Other categories of fraud that have increased since March have been social media and email hacking, cheque, plastic card and online bank accounts, and dating fraud. At the same time, we have seen decreases in a number of categories of fraud, including ticket fraud, lender loan fraud and door-to-door sales fraud. The average cost of fraud per case has slightly decreased.

Our services have seen an increase in fraud victims feeling isolated or alone, having financial difficulty and feeling unsafe online.

Victim profile

Although everyone has been affected by the pandemic, our staff and volunteer survey has found that the crime experienced during a lockdown and the impact of being in lockdown negatively affected particular groups of victims more severely.

'People who were already vulnerable groups seemed to be the hardest hit.' **Support worker**

Those most affected have been victims with existing mental health issues, with 68 per cent of staff highlighting this group as particularly affected. Staff have noticed an increase in people who had mental health needs accessing our services. Those with existing mental health issues found it harder to deal with the impact of the crime with the level of support available during lockdown and the added anxiety of the pandemic. Isolation and antisocial behaviour were cited as negatively affecting people with mental health issues in particular.

'People who were managing their mental health deteriorated.' **Support worker**

'Those that were making good progress declined in their resilience and mental health. Those being supported wanted to talk for longer and many were tearful and upset during the call. Some used lockdown as a reason not to go out of their home – they knew that they could go to the shops etc, but because they were scared anyway, they used this as another reason not to.' **Support worker**

Other groups of victims staff reported as being particularly negatively affected by the lockdown have been victims who are isolated (reported by 55 per cent of participants), those who are financially insecure (41 per cent), people with a pre-existing physical condition or disability (40 per cent) and older people (37 per cent).

Many staff have highlighted the impact of isolation on victims' ability to cope with the impact of the crime. This has led to an increase in mental health problems and made it harder for people to manage with the emotional effects.

'People had nowhere else to go to talk about how they were feeling, they were isolated from family and friends and were only able to talk to them via calls or video chats, some I spoke to said they did not wish to further burden friends and family at this time' **Support worker**

Financial worries and pressures have increased due to uncertainty or lack of employment and loss of earnings. The burden on people who were financially insecure has grown, pushing them into acute poverty and debt. There has been an increase in the number of foodbank or food assistance requests to support workers since March.

People supported by VS with physical conditions who are reliant on carers or support workers helping them at home struggled to get the help they needed. They have also not been able to receive treatment from their GP in the usual way.

Some staff also report an increase in victims with learning difficulties needing support.

'In particular we have seen an increase in victims with learning difficulties trying to access support around ASB and neighbourhood issues.' **Support worker**

Older people isolated from any networks of support or living alone were highlighted as being particularly affected in their recovery. It has also been suggested that older people were subject to ongoing ASB issues in particular. Staff report that the lack of resources for older service users was much more evident during lockdown.

One quarter of staff who participated in the survey highlighted that Black, Asian and Minority Ethnic victims were more negatively affected by crime than others during lockdown. There has been an increase in hate crimes relating to race, religion and nationalism as well as issues with accessing services.

For some BAME service users who experienced domestic abuse and were living in an extended family at home, access to support was more difficult due to not having a safe and confidential space. For survivors of domestic abuse with No Recourse to Public Funds or an insecure immigration status, options were further limited due to changes in government agencies' services. In addition, their access to money, food and basic needs was reliant upon those abusing them.

Challenges with childcare and caring responsibilities during lockdown have affected people's ability to cope. Carers have raised challenges with their support worker of managing with extra responsibilities and not having respite as other people could not provide direct assistance safely. Some safe parents have found that the other parent has used lockdown as an excuse not to see their children, leaving the responsibility solely with them. During the lockdown and self-isolation, there was also an increased role for parents to deliver indirect support if their children who were under 12 years old, while access to face-to-face support from services were paused.

'For those that are assessed as high risk and referred to our IDVA⁹ service if the service user has children the children are assessed as high risk also, the children do not have access to school, nursery or daily routines adding additional anxiety and stress upon the service user or the family.' **Support worker**

LGBT+ victims were less able to connect with their community and, in some circumstances, negatively affected by having to conceal their identity or experience clashes of family opinion on their sexuality and gender whilst being restricted to their family home. This affected their ability to cope with crime related to their sexuality or gender.

Children and Young People

There was a significant decline in the number of children and young people (CYP) accessing VS services when lockdown began with levels remaining notably below average until the beginning of September. Alarming, 6,000 fewer CYP have accessed VS services between 23 March and 1 November than if levels remained at baseline.

⁹ Independent Domestic Violence Advisor

We have seen a rise in all CYP cases since schools have returned, though we expect referrals to continue to increase in the coming months. Early indications from CYP services suggest the recent increase in referrals relate to very recent incidents rather than incidents from earlier periods of lockdown.

Table 7: Weekly average of children and young people referrals compared to baseline level by number of cases and percentage change

Date period	Average number cases 12 years and under per week compared to baseline (0)	Percentage change of cases 12 years and under on average week during period	Average number cases 13–17 years per week compared to baseline (0)	Percentage change of cases 13–17 years on average week during period
23/03/20–31/05/20	-147	-55%	-409	-51%
01/06/20–05/07/20	-72	-27%	-157	-20%
06/07/20–30/08/20	-11	-4%	-82	-10%
31/08/20–01/11/20	120	45%	46	6%

Referrals for children and young people who had experienced sexual violence fell 40 per cent below the baseline between 23 March and 31 May though they have gradually returned to average levels. Since schools returned in September CYP referrals relating to sexual violence have been 14 per cent above average levels. During full lockdown, CYP referrals were 67 per cent below average for violence with injury and 50 per cent below average for violence without injury. The number of children and young people affected by violence with and without injury remained below average levels until the beginning of September where CYP referrals for these crime types significantly increased (violence with injury 26 per cent and violence without injury 24 per cent above average levels). Against the general trend, there has been an increase in CYP affected by fraud and forgery compared to the baseline.

CYP had reduced school connections and fewer opportunities to discuss their concerns with safe adults outside of the home or connect with their trusted adult, leaving them more vulnerable. Some CYP who did access our services were negatively impacted by restrictions on their freedom.

‘Young people started leaving their homes and, as they were not at school, were being bullied or assaulted in their neighbourhoods rather than schools. We have not been getting so many referrals from people who have not reported crimes to the police (particularly DV) – the most common referrals for children are normally from schools, hence these children are not getting support. This is an unknown number.’ Support worker

‘Something needs to be put in place for vulnerable children. only after this pandemic will we get a full picture of the impact on vulnerable children has been, when there is no school no play group and no socializing with friends then children go off the radar, somethings needs to be in place to prevent this in the future.’ Support worker

However, many CYP found the space away (being at home) from the perpetrator or the location of the crime helped them to recover as they were not always faced with daily reminders. In addition, with parents being at home and some not working they were better able to support their children than they usually would. For these CYP the return to school and other usual activities has caused anxiety.

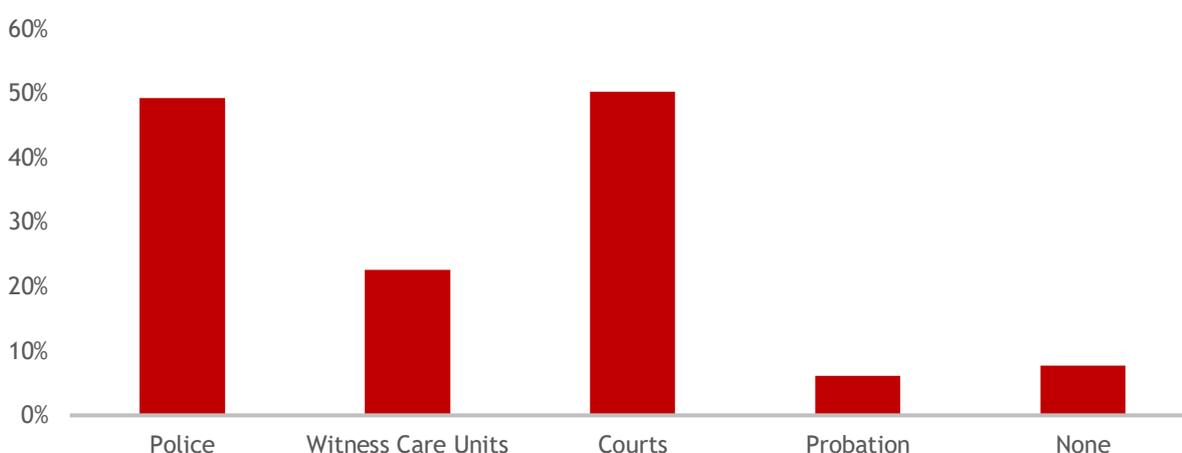
Impact of changes to criminal justice process and operation of wider statutory services

Criminal Justice System

Lockdown has affected victims' engagement and experience of the criminal justice system. Alarming, 66 per cent of VS staff and volunteers believe that lockdown has created additional barriers to victims' engagement with the criminal justice system.

Half of staff and volunteers report that there have been issues victims have experienced with dealing with the police and the courts specifically.

Graph 5: The criminal justice agencies service users have experienced issues with since lockdown according to staff and volunteers



Victims have highlighted to staff and volunteers that there have been delays in reporting crimes and receiving responses from the police. Service users have also shared that police contact has been slower and they have the impression that there has been a decrease in police action and investigation. Some service users shared that they were asked by 101 call handlers to make online reports though they are unable to do this, as they do not have access to the internet. Staff have also found that police have been encouraging service users to go down the civil route, for example applying for a non-molestation order, rather than criminal justice process or prosecution.

'Clients have mentioned reporting a crime challenging as it took a long time for their call to be answered. Clients have also mentioned that they feel that the crime reported is not being investigated and that they feel the police's attention is on other crime types.' **Support worker**

'I don't think we were given clear information from the courts as to whether and how cases would be heard. We weren't sure whether people in custody would remain in custody, we weren't sure whether trials would go ahead, be cancelled or be postponed. I also think the police were not forthcoming in giving clear communications about their services. We had conflicting information from different officers as to whether statements were being taken, whether officers could visit homes, whether forensic evidence could be captured and whether physical evidence could be collected from victims. It was hard to set expectations for victims when we weren't sure what the police were able and not able to do.' **Support worker**

Alarming some staff supporting victims and survivors of domestic abuse have shared that police action has been slow, with 999 domestic violence incidents not being attended for several hours, or non-responsive to incidents such as non-molestation orders allegedly being breached with no action.

'Due to an increase in workloads in safeguarding units there has been difficulty in contacting officers for update or outcomes, there have also been difficulty in getting police to take action where there has been a breach of bail or breach of restraining orders. There have been instances where perpetrators have been given a suspended sentence and then committed further crimes, yet the suspended sentence has not been enacted allowing them to go on abusing clients.' **Support worker**

'A large amount have complained about no attendance by the police after an incident or statements being taken.' **Support worker**

Some staff also are concerned that the police have not referred victims who have reported crimes since lockdown to victim services despite them still running.

One in four staff also have seen victims experience issues with Witness Care Units¹⁰ since lockdown. Service users who are witnesses have not been contacted about changes in a reasonable timeframe. For example, several service users thought they were going to be giving evidence on a particular date only to be told the day before that the case was delayed. We also have a service user who turned up for a trial that had been cancelled without notification. Staff have also found it more difficult to contact Witness Care Units on behalf of service users.

A few issues have been raised about experiences of courts and the court process since lockdown. These include mistakes made by courts such as not allowing for McKenzie friends, Judges not calling at the set time and date and not arranging appropriate interpreters, which delays trials. A number of service users did not get appropriate Special Measures such as screens preventing view of the defendant due to Covid-19 restrictions in courtrooms making the layout unsuitable. Families bereaved by homicide have shared that they feel like trials are rushed and they are not included as they would have been pre-Covid-19. Additionally the number of family members able to attend court reduced, which affects them significantly.

The impact of cancelled court dates and delays to trials has been significant. Court cases were put on hold and many have still not been heard, including cases that should be prioritised such as sexual violence. Some of our service users have been told that their case will not get to trial until 2022. Many victims including bereaved family members feel they cannot move on and are in 'limbo' until the trial has concluded. Victims and survivors have been affected in a number of ways. Eighty-nine per cent of staff say that the increase in delays to trials have had a negative impact on victims and survivor's mental health. The delays have also affected victims' ability to access other services such as pre-trial therapy according to 38 per cent of staff and volunteers. Some of our service users have attempted suicide due to court delays, due to not feeling able to live in limbo for an extended period. Many victims with delayed cases have already waited a long time for the court date, which has been cancelled.

¹⁰ Witness Care Units are staffed by the police and CPS and provide information and support to victims at witnesses whose cases are progressing through the criminal justice system.

'Uncertainty and delay effects the anxiety levels and day to day experience of children and young people, leaving them less likely to report or pursue prosecutions in the future.' **Support worker**

'Bereaved families have found this difficult, this is part of the grieving process and as the [court] dates are pushed back families are in limbo longer.' **Support worker**

'I think trials are taking so long anyhow for victims of sexual violence these delays are prohibiting the recovery process. I have clients who were scheduled for trial June this year and now have been postponed until 2021. This timescale from report to court will be nearing 4 years.' **Support worker**

Victims sense of safety has also been raised as a concern by 64 per cent of respondents and 56 per cent of staff have noticed a negative effect of delays to trials on family life and victims' relationships.

'Clients have expressed concern that due to delay the suspect may harm them again or they feel unsafe in current location.' **Support worker**

The court delays also have had a wider effect on victims' confidence in the criminal justice system according to 77 per cent of staff as well as reducing the likelihood that they will continue to support the prosecution.

In addition to delays in criminal cases, delays in other courts have also affected service users, in particular survivors of domestic abuse. Family Court processes have been delayed. Some hearings have been held remotely, in some instances with parents in the same house, which has received a mixed response. Staff have reported that the family courts have not made it easy for Independent Domestic Violence Advisors (IDVA) to be included in remote hearings via telephone or video calls. Concerns have been raised about the suitability of attending remote hearings from home.

'Many clients have commented that this has helped especially with family court matters. Could also be detrimental in that there could be an increased ability to influence hearing through other family members for example.' **Support worker**

The increase in remote hearings for criminal cases, though gradual, may have some positive effects on victims and survivors. For some the prospect of going to court causes anxiety and intimidation and it is common for victims and witnesses to have to travel long distances to attend, which can be reduced by remote hearings if these are not in the court building. For many the biggest concern about attending court is meeting the perpetrator and their supporters in and around the court building. A remote hearing can therefore increase the likelihood that some victims and witnesses give evidence.

'Having remote hearings has increased the engagement, not having to go to court, not having to experience the atmosphere, less personal and not having to see the perpetrator face-to-face has significantly helped.' **Support worker**

'Navigating court with client's was difficult – although for some clients it was easier as they did not have to face the perpetrator in a court setting and could talk on the phone to the judge.' **Support worker**

However, some witnesses want their day in court and may feel it is important for them to get closure. A few staff have highlighted some logistical issues with remote hearings that need addressing as well as some service users not being very comfortable with technology. Many have emphasised the importance of being able to access support, such as having an IDVA with them, as being important for victims having remote hearings. Overall feedback around remote hearings has been positive especially if they will help address the backlog and delay of cases.

‘Clients have been arriving at court as no clear instructions that hearings are virtual.’

Support worker

‘Where and how evidence is given isn’t the issue, it’s the support available around that giving of evidence.’ **Support worker**

There has also been some communication issues with the National Probation Service, which can have significant consequences for victims.

‘Perpetrators have been released early from prison and victims not informed or given extra safety planning by the criminal justice system has led to a lack of trust.’ **Support worker**

The survey suggests that changes to ways criminal justice agencies have operated has negatively affected particular groups of victims: victims with existing mental health issues (highlighted by 44 per cent of respondents), people who are isolated (33 per cent) and older people (27 per cent). Those with existing mental health issues found it increasingly hard to have court dates changed or postponed with uncertainty affecting their wellbeing.

With criminal justice agencies’ resources being stretched, some individuals that need additional communication or explanation for a decision made on their case have not received it. Some staff have also found that victims with English as an additional language have had issues due to difficulties in securing an interpreter or having translated papers or forms. When restrictions are not in place some of these victims who have relied on friends to translate for them or call authorities on their behalf, were not able to do so easily during the lockdown period.

When asked what the criminal justice system could do to improve the support for victims and survivors and witnesses during a lockdown staff highlighted the following:

- Better communication – keeping the victim aware of the situation and provide contact details of who to ask if they have any questions. Give the victim as much advance notice as possible of any developments in their case, including changes to dates of trial
- Ongoing appreciation of and sensitivity towards victims who have additional anxieties and pressures when experiencing crimes during lockdown
- Ensure that perpetrators are kept away from victims and survivors
- Increase capacity to address backlog of court cases
- Provide clarity to victim services on their working arrangements and ways to contact them during lockdown
- Ensure interpreters are available for trials and review their use for remote hearings
- Address poor arrangements of Special Measures in some courts.

Other statutory services

The lockdown required the majority of statutory services, such as housing, to suspend working from their respective offices and the closure of community hubs. Some services needed to take time to adjust to new ways of working under the restrictions since March, which limited some of the interventions available to help victims deal with and resolve issues during the initial period.

Some agencies' resources are struggling to meet demand. As restrictions have continued to try to contain the pandemic, frustrations over accessing help have increased.

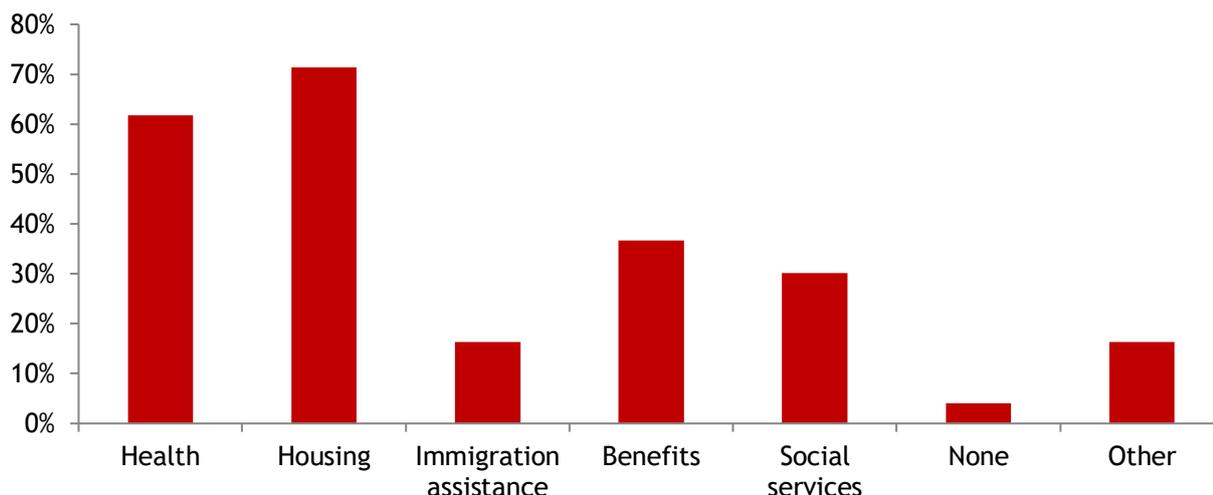
'The housing associations furloughed staff and allowed the housing officers to respond within ten working days instead of two. That is extremely unhelpful.' **Support worker**

'Access to other services has been limited meaning our role has had to adapt and facilitate greater levels of support.' **Support worker**

'Other agencies were not staffing sufficiently, so I was trying to support tenants whose housing officers were on a ten working day lead time. It was (and still is) a huge challenge.'
Support worker

Victims have shared with staff that they have struggled to speak with staff from many agencies or are waiting for call backs and follow ups. This includes some IDVAs not getting responses though they are needed urgently. Some services have needed to reduce the hours they are available to adapt to challenges in providing services when there are restrictions, such as working from home, illness and childcare commitments. Many organisations that VS work with have been overwhelmed.

Graph 6: Whether the lockdown created additional barriers to victims' access to statutory services according to staff and volunteers



Staff and volunteers were consulted on their experience of barriers created due to lockdown on service users' access to statutory services. As shown in the graph, the statutory service highlighted as being least accessible has been housing, highlighted by 72 per cent of staff and volunteers. Staff have shared difficulties in accessing Housing Associations due to decreased staff availability.

'Night shelters have closed, having to approach council's and homelessness teams in a different way for emergency housing has been challenging.' **Support worker**

Victims who would have frequent appointments with Social Services or mental health workers have been particularly affected by changes to statutory services. Staff who would usually do joint visits with social services in order to engage clients have not been able to do so. Health services have been difficult for victims to access according to 62 per cent of survey respondents. For example, some GPs moved to providing remote appointments. Many staff have raised issues with accessing mental health services. Victims have been less able to cope without the support of mental health teams who reportedly stopped providing support unless the victim was in crisis.

This may be due to mental health teams being ‘overwhelmed’. Some service users decided to put off their counselling sessions due to not wanting to do this virtually or have not wanted to contact their GP for mental health support through fear of taking up time. In some instances, there was no identifiable crime but a failing in mental health services lead people to seek help from victim support services. There needs to be improvement in how mental health services are provided during restrictions.

‘Initially those who were suffering from mental distress (pre-existing or otherwise) were not being seen to straight away. This now has changed, however, there still are long wait lists for health services.’ Support worker

‘Some victims found they were unable to access mental health support such as counselling... they have also been unable to chat with their doctor.’ Support worker

‘Delays in people being able to access therapies – most therapies are still being delivered by video or phone which isn’t ideal for many clients.’ Support worker

In addition, lockdown and other restrictive measures has created additional barriers to victims’ access to the benefits system. Social services have had reduced accessibility according to 29 per cent of staff and volunteers.

‘Children’s social services not completing visits to children on Child Protection plans. Social Worker closing cases without updating the advocates.’ Support worker

Service users identified as particularly affected by issues with accessing statutory services include those with low incomes who cannot make multiple phone calls or send emails, as well as those who do not find online services or information accessible. Many staff have also highlighted challenges faced by people with English as an additional language, no recourse to public funds, mental health issues, substance misuse issues and disabilities or learning difficulties has being additional barriers to accessing other statutory services.

‘More language assistance needs to be provided by other services eg health, social services. I have clients who struggle to make contact with these services due to their language barrier – this is particularly harder over the phone than being able to attend face-to-face.’

Support worker

‘Those whose English is not the first language would struggle to contact any services as usually would ask a friend to call with them.’ Support worker

Since the easing of the initial lockdown, staff have seen improvements in their ability to get hold of professionals and an increase the services available by other agencies. However, there has not been a return to normal in how services are running, speed of their response or their capacity levels, and many services continue to provide support primarily via telephone, such as GPs and domestic abuse group support. Particular issues remain with access to counselling. Some charities to which staff and volunteers would have referred or signposted victims have closed or reduced what they can provide due to a lack of funding or resources. This will have a longer-term effect on support available.

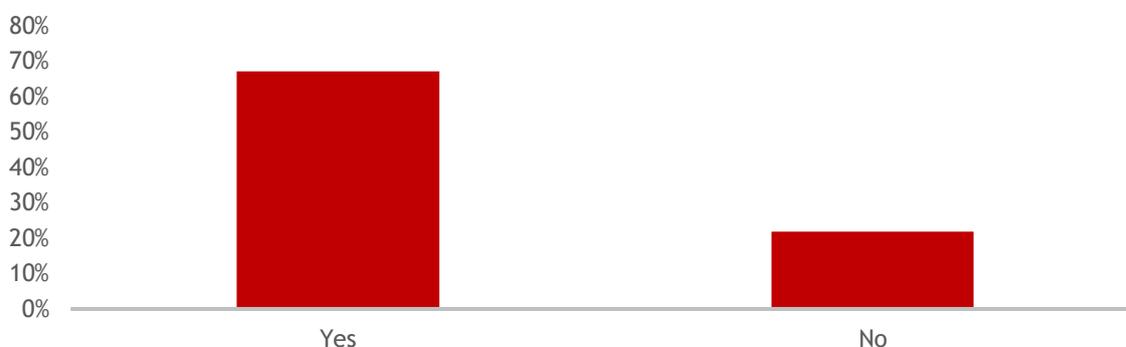
Impact on Victim Support services

Access and referrals

While Covid-19 has had a significant impact on the way that VS delivers services, all of VS's services have continued to operate during the pandemic. Victim Support's free and confidential 24/7 Supportline has remained open and VS has expanded our 24/7 webchat service 'Livechat' and self-access online platform 'My Support Space'.

In the weeks following lockdown on 23 March 2020, there was a significant drop in the number of victims accessing VS services. The majority of staff (66 per cent) who responded to the survey believe victims and survivors faced additional barriers to seeking help from VS and other services as a result of a full lockdown.

Graph 7: Whether victims and survivors faced additional barriers to seeking help from Victim Support and other services as a result of full lockdown



There are existing barriers to accessing victim services, which the restrictions imposed during full lockdown and the subsequent period exacerbated. Barriers related to the lockdown include expectations that services were not available and, in particular, having members of their household in close proximity, including children and young people due to nursery and school closures, which affected their ability to have a personal conversation.

'Some victims have expressed surprise that we were still operating during lockdown, and so there may have been victims who did not call through under the impression we'd be closed.'
Support worker

'Some victims were unable to focus on their own support due to childcare or caring responsibilities.' **Support worker**

'For many service users I have supported during lockdown and since easing of lockdown feedback has been that the telephone support has been extremely positive for those calling for help, knowing that service are available and accessible has helped service users to call helplines for support.' **Support worker**

Staff from VS CYP services highlighted some particular barriers affecting children and young people's ability to access support services. These include uncertainty about how they can access support whilst at home, not having personal space to access support confidentially and the effect of not attending school or clubs on opportunities for disclosure and accessing face-to-face support. Some children and young people have also been in isolation with the perpetrator(s).

'Previously they were able to access services elsewhere, schools, outreach locations, they were able to shield their support from a parent if they wished to do so.' **Support worker**

Some of the barriers to accessing support raised by domestic abuse specialist services include a perception that these services were closed, community spaces with one stop shops being closed, and feeling that police and NHS services are already under pressure. In addition, some statutory services that may identify victims were not in the community as much as usual, such as housing officers.

Where the victim of domestic abuse lives with the perpetrator, options to access support were restricted due to levels of monitoring, isolation and control, especially where they did not have access to the internet to find information and advice or use remote support options such as webchat and email. Making contact with statutory agencies is particularly difficult for victims where there was a call back system in place.

'Some victims declined support because the perpetrator was with them all the time.'
Support worker

'Lots of potential for escalation but not much potential to be able to get or reach out for help. However I think services put a lot of posts out there with alternative ways of safely contacting domestic abuse specialists online without speaking and remembering to press 55 if ringing police and can't talk.' **Support worker**

The challenge in improving access to services continues, in particular outreach activities and co-locating with other services such as hospitals. Only 26 per cent of staff and volunteers believe that the easing of lockdown measures from 23 June 2020 have reduced additional barriers, with half of staff and volunteers (49 per cent) believing the easing has made no difference. For some victims the easing of restrictions, more people returning to work and schools resuming in September has provided space to access support and an opportunity to see their social networks. However, the economic recession and uncertainty brought on by rolling lockdowns has meant that victims continue to face issues long after the initial full lockdown.

'If a domestic violence victim went to a friend's house they could call services from there whereas when they were locked inside with the alleged perpetrator they could not do this.'
Support worker

'Since the easing of the lockdown measures there has been an increase in referrals and engagement with service users has increased.' **Support worker**

'Although some people are going back to old routines others are not and for some jobs have been lost leaving possible escalating situations in domestic abuse.' **Support worker**

Service delivery changes

Victim Support services have faced unprecedented challenges in demand and delivery to meet the needs of victims during this period. VS has been constantly reviewing the advice from the Government on a weekly basis to determine the approach to take and advice to provide to staff, including the different recommendations that are being advised in different parts of England and Wales.

Following a brief decrease in calls immediately following the initial lockdown, VS's Supportline and Livechat have seen increases in demand for support with a peak in July. These services can be accessed 24/7 by victims and survivors regardless of the crime or where they live, and can be used anonymously. Livechat is used primarily by females and victims and survivors aged 18–34 years. Domestic abuse affects around a quarter of users.

Community-based services vary in each area. Following a referral, initial contact with the victim is often via phone to explore their experience and needs, provide information about support of offer and their rights and discuss options available. Some staff have found that victims have preferred for the first contact not to be with video, though offered. If it has not been possible to speak to the victim after many attempts, the service may send written communication, such as a letter, text or email, to let them know that the service is available and how they can access it, if there is confirmation from the referral that these contact methods are safe. VS has been accessible throughout the lockdown and victims have used our services. Forty-five per cent of staff and volunteers who completed the survey said that they have not changed the way they initially contact victims since initial lockdown begun, and 27 per cent said their approach to initial contact had changed a little. Only 11 per cent said that it had changed a great deal, which were primarily staff and volunteers from the Homicide Service and CYP specific services.

'I change my initial conversation to include the impact of lockdown and check that my offer of support hasn't missed anything – I think this has had a positive impact as it shows we recognise that lockdown means people are facing additional pressures that ultimately affects their ability to recover from crime.' **Support worker**

Staff making contact with people affected by domestic abuse have need to be more vigilant and aware that it may not be safe for the service user to talk.

'We make sure that we have a robust safety plan and contact plan in place with passwords if necessary.' **Support worker**

'Many of our domestic violence victims only contact us when they have a ten minute window while the perpetrator is out and have said no to us calling them back or sending a text message.' **Support worker**

'Often unable to speak to clients as often or for as long as perpetrators present more often.' **Support worker**

Many staff and volunteers do not think that undertaking needs and risk assessment over the phone has prevented their effectiveness. However, there have been concerns that visual communication, body language and insight into their surroundings can be missed and therefore not captured in the same way as face-to-face. Following a needs and risk assessment, staff and volunteers can provide immediate support and develop a support plan with the service user, which is tailored to their experience, needs and what they would like from the support options available.

'Often a home visit will present other visual clues that can aid in providing tailored support to that service user.' **Support worker**

'Some victims have reported that phone support is less helpful because they find it easier to "be strong" over the phone, so they do not admit their vulnerabilities.' **Support worker**

'I chatted more about current issues to get to know them and build up trust. Over the phone, I took more time to let them talk and not fill the gaps as it's hard to judge when to talk when you can't see the body language. Listening skills are emphasised.' Support worker

VS staff and volunteers have worked hard during this period to respond to the increases in demand for support needed by victims in terms of volume, complexity and level of intensity. This has led to an increase in the number of people who have engaged with services and received support. As set out in table 8, VS has supported significantly more people to cope and recover from crime.

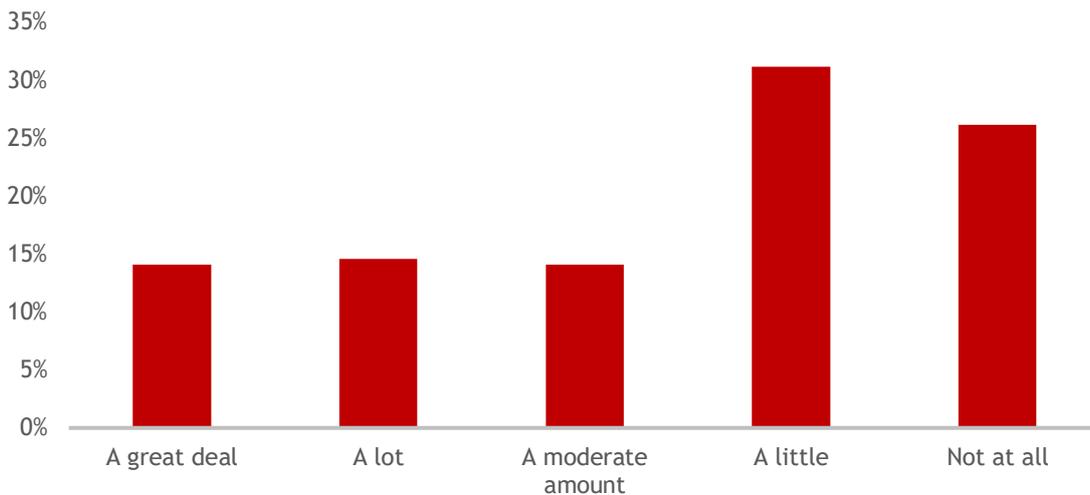
Table 8: Weekly average of cases with victim engagement and support compared to baseline level by number of cases and percentage change

Date period	Average number of cases with engagement per week compared to baseline (0)	Percentage change of cases with engagement on average week during period	Average number of cases supported per week compared to baseline (0)	Percentage change of cases supported on average week during period
23/03/20–31/05/20	-180	-4%	34	1%
01/06/20–05/07/20	830	21%	705	31%
06/07/20–30/08/20	647	16%	610	26%
31/08/20–01/11/20	293	7%	475	21%

'We saw a spike in engagement from client's during lockdown. Possibly due to the attention and time given to them. Thinking more about the person and ensuring all their needs have been considered or met.' Support worker

VS services offer and use a range of contact methods to provide ongoing support to victims and survivors. This includes phone calls, letters, texts, peer support groups, video calls, face-to-face appointments, webchat platform 'Livechat', email and VS's digital platform 'My Support Space'. Other than face-to-face appointments and peer support groups most contact methods were not affected by the lockdown. However, as ongoing support following initial contact would often include face-to-face appointments, as well as ongoing phone conversations and texts in between, the majority of staff and volunteers report that lockdown and easing changed the way they provided support, as shown in graph 8.

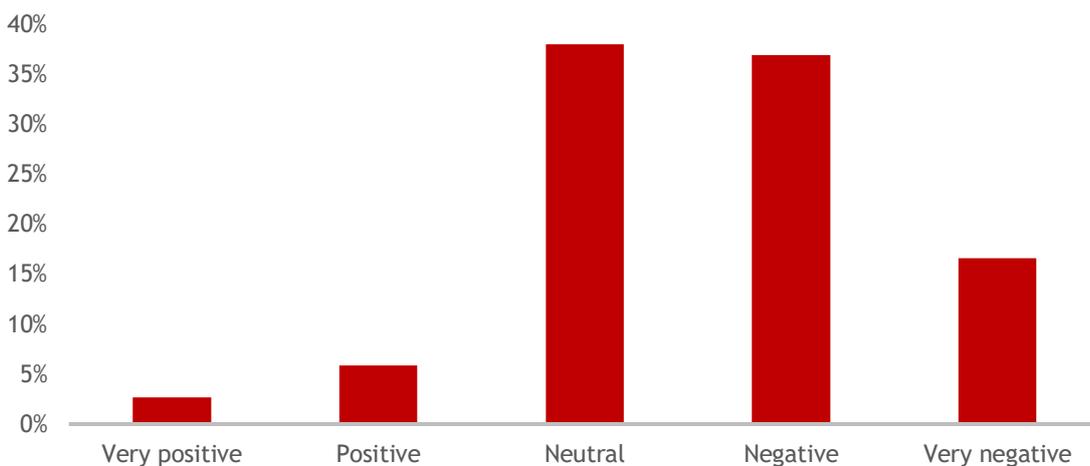
Graph 8: Extent the lockdown and easing changed the way staff and volunteers provide support to service users



Staff have been using telephone contact for ongoing support unless there are reasons to provide face-to-face support, such as communication difficulties and only wanting support in person. This approach has led to a reduction in face-to-face support during this period, especially during the initial full lockdown. All services are working towards a return to routine face-to-face visits but are always monitoring the situation in each local area with the aim to maintain service user and staff safety and confidentiality where performed in an outdoor space or a Covid-19 secure premise.

One third of staff and volunteers believe that the suspension in VS providing routine face-to-face support to victims and survivors negatively affected their ability to cope and recover. The negative effect perceived by staff was particularly high within the Homicide Service (77 per cent), children and young people specific services (71 per cent), sexual violence specialist services (71 per cent), and domestic abuse specialist services (55 per cent).

Graph 9: Effect of a longer-term reduction in the face-to-face support provided by victim services on victims’ ability to cope and recover according to staff and volunteers



Staff report a variation in whether service users have adapted well to more phone and remote support. Some service users wanted to postpone their support until they were able to benefit from face-to-face appointments. This was particularly raised by children and young people specialist services who primarily provide support in schools, which resumed in September.

There has been a lot of understanding from service users that face-to-face support has been limited, and some do not want to take the risk.

Staff and volunteers who participated in the survey highlighted that it has been possible to provide support over the phone and reduced travel has enabled more time to be spent speaking to victims. Some have also found it easier to get hold of service users where restrictions have meant they are more available and fewer appointments have needed rearranging. Feedback from service users via satisfaction surveys has remained positive.

However, it has been much harder for staff to build a relationship with service users where there have not been face-to-face appointments. Some service users do not feel comfortable providing personal information to someone over the phone they have not met. Providing ongoing support more through phone contact has required more time for calls to allow relationships to develop. Many staff have found that it takes longer to build trust, is harder to develop rapport.

'Some people found it really difficult to discuss their situation on the phone and really wanted a face-to-face meeting.' **Support worker**

'Some people can happily take their support by telephone but for some people that face-to-face contact makes the difference if they trust you or not, if they are able to be open with you or not... That will affect their ability to cope and recover.' **Support worker**

'I believe that we have still been able to provide a useful service and assist with most matters that arise but that the absence of visits has meant that clients have not been able to build as good a relationship with us. I feel emotional support has not been as successful via phone.' **Support worker**

'Unable to attend court for the much needed support which results in a disengagement from client.' **Support worker**

This has been a particularly challenging time for service users not accessing face-to-face support due to their need to feel less isolated. Staff have felt that some service users would have benefitted from face-to-face contact during this time and are concerned about a longer-term reduction in providing face-to-face support.

Some victims and survivors had particular difficulties if they could not receive face-to-face support due to the risk of Covid-19. These include service users with childcare responsibilities and limited ability to find personal space to speak at home, complex needs, communication difficulties, limited English proficiency or no access to the internet, phone credit or devices required for phone or digital support. Some people who are more at risk if they contract Covid-19 are also particularly vulnerable to the impact of crime, and therefore would have benefitted from face-to-face support if this was safer to provide, for example older people, people with disabilities and immigrants who are BAME. For service users that are particularly struggling, such as families grieving due to homicide, it is hard to engage on the phone as this requires concentration and it is better to attend their home or meet face-to-face. In addition, some victims do not like or feel comfortable with phone and web-based support.

'Telephone and Skype support is very difficult for someone who has a hearing impairment too or for those who do not have access to these devices.' **Support worker**

'Not everyone within the demographic we typically support has access to video call facilities.' **Support worker**

Staff from domestic abuse specialist services highlighted challenges in completing risk assessments and accurately assessing changes to risk over time where face-to-face appointments were not possible due to Covid-19 risk. In these circumstances, staff are very reliant on disclosures from service users, and are unable to assess their physical wellbeing or visually confirm whether a perpetrator is not present. In some cases, improved communication with external agencies has improved information around needs and risks.

'The impact of Covid-19 and living with the accused perpetrator makes it difficult for victims to seek support or to have access to their usual face-to-face appointment to give them the freedom to disclose the abuse to their mental health workers.' **Support worker**

CYP services have needed to be creative to enable safe meetings with service users that need a private space to express their personal struggles without a parent or guardian present, for example, meeting during their daily exercise. Activity packs were prepared and sent to the children and young people to facilitate conversations and engagement. When face-to-face support has not been safe due to Covid-19, children and young people services have increase the level of support provided indirectly by the safe parent. This has worked well where these sessions have enabled an improved understanding and relationship between the parent and child or young person. CYP services have also experienced challenges providing effective support where they are not able to meet the service user in person. Where the accused perpetrator of abuse is in the home, the service user is unlikely to answer phone calls and providing indirect support may not be possible. Young people have expressed to staff that speaking over the phone is not the same as face-to-face and staff have reported difficulties in engaging with service users during this period.

'It can be difficult to engage a young child over the telephone or video call as you are unable to create as much of an engaging environment as you can face-to-face with games. However, contact via video with older children and young people has been a fantastic new tool that has worked well and enabled us to continue face-to-face support with service users that were open pre-lockdown.' **Support worker**

Specialist sexual violence and domestic abuse services staff also found phone support to be preferable to some survivors.

'I have found that telephone support has been managed well and victims have responded better to it rather than face-to-face. It has reduced some anxieties in my view for the victim as they are not sat directly in front of me or awaiting my visit.' **Support worker**

'Some survivors prefer contact this way – not face-to-face – as they did not need to travel or arrange child care.' **Support worker**

With an increase in telephone and video contact for ongoing support some staff have highlighted that they have been able to make more contact attempts and have been contacting service users by phone more frequently. Others have reported having more time to complete tasks or obtain information on behalf of service users in between contacts. There has been a reduction in letters sent, with digital communication methods primarily used, such as texts or emails, alongside phone or video support. Some service users have welcomed the increased use of video calls.

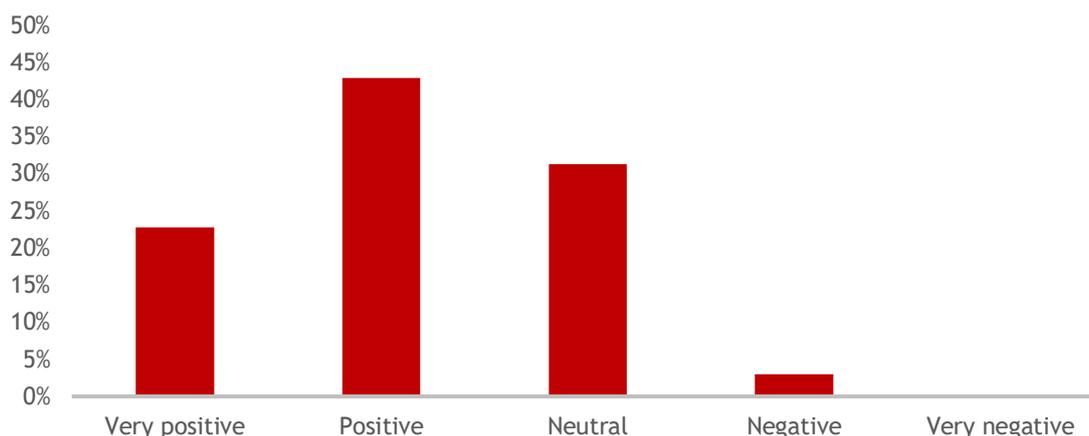
‘Video call has offered greater choice to young people and has been empowering. Video calls have allowed me to build a rapport easier with vulnerable young people with additional needs, for example a parent asked whether the client could see me because of his autism, we arranged a video call together and it really helped break the ice and make the client feel at ease.’

Support worker

‘I have found phone support oddly liberating, I have been more prepared than I ever was for support calls, and can have easier access to the support materials and toolkits, I feel this has strengthened my support sessions. Young people have engaged brilliantly over the phone and there has been a sense from parents of all being in this together and service users have been equal measures understanding and adaptable.’ **Support worker**

There has also been an increase in virtual support with My Support Space expanding in content and reach as well as Livechat becoming available across England and Wales. Government funding from Ministry of Justice has enabled these improvements in digital support, with funding for Livechat from the end of April and My Support Space funding from 1 May. The majority of staff and volunteers (67 per cent) report that service users have responded either positively or very positively to the remote support options offered by VS.

Graph 10: How service users responded to the remote support options offered by VS since 23 March 2020



‘We now have a domestic abuse recovery group set up to carry out virtually, decreasing barriers to victims walking into a room and feeling intimidated which so far has increased the uptake of the course and makes the courses run more often reducing waiting.’ **Support worker**

Other adjustments made to delivering services during this period include the length of support sessions and adjusting multi-agency working where services are used to working in a hub.

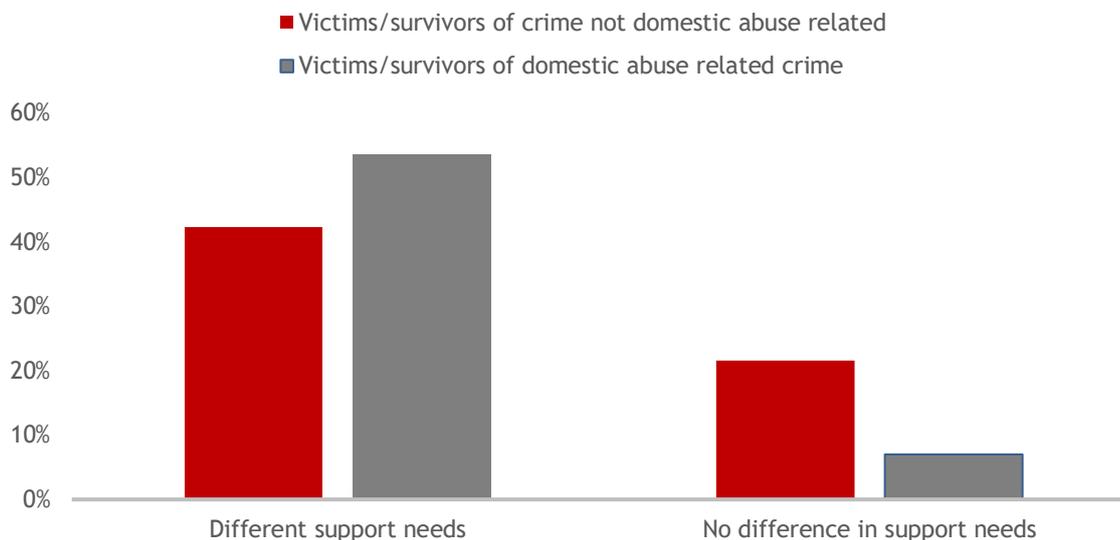
‘Many clients are looking after children whilst trying to access support making it more difficult to find time to discuss their issues without the children present – many were not able to do this and support was provided in short sessions.’ **Support worker**

‘We have worked through support plans and tailored around the restrictions – so have had to adapt and be smart around what is achievable, what can be done as a work around, or what simply has to wait until lockdown eases.’ **Support worker**

Types of support

As well as affecting the crime experienced and access to services, our staff and volunteer survey found that the support needs of many service users changed during lockdown. Fifty-four per cent of staff reported that the support needs of victims and survivors of domestic-related crimes were different during a lockdown. Fewer staff (42 per cent) reported a change in the needs of victims of other crime.

Graph 11: Whether the support needs of victims and survivors differed during the lockdown



Many staff and volunteers have expressed that victims needed more intense and regular support during a full lockdown, in particular by vulnerable and isolated service users. Without other services or the ability to communicate with professionals, family and friends have felt much more isolated and our staff and volunteers have held wider conversations that they usually would have. In the initial months staff also report that service users wanted to talk initially about the pandemic before speaking about the crime and their related needs. Phone conversations were longer and more frequent. Usual coping strategies not always available due to a reduction in support networks and routine. Staff increased coping techniques that can be done from home rather than exploring wider options.

'Isolation has made victims need more emotional support.' **Support worker**

'There appears to have been a requirement for more intensive work to be carried out over a longer period but often this has been because the victim wants to talk about other things as well as the crime such as how the pandemic is impacting on their lives. The conversations are longer and the support longer term. However, it would appear that victims have still recovered well.' **Support worker**

'People need more to time to talk than they ever have, in my experience.' **Support worker**

'The amount of time spent talking to victims increased... to sometimes double, if not treble the amount.' **Support worker**

Directly related to an increase in the impact of crime on victims mental health, there has been an increase in support around mental health issues.

'Needed a lot more support around their anxiety and mental health as these levels increased during lockdown. Some felt their progress had gone backwards as had just started leaving the home etc and found they had lost that confidence again during lockdown.' **Support worker**

There have been fewer opportunities available for service users to engage in positive activities that would often be included in support plans, such as volunteering, social networking, some sports, classes and hobbies. Staff and volunteers have highlighted that this has negatively affected the length of time it has taken for victims to move on from the impact of the crime.

'Clients had more time to connect with their struggles and less opportunities to access services or activities to manage their emotions or structuring their lives.' **Support worker**

'It's difficult to encourage people to get out and about and to socialise as this helps recovery when lock down restrictions are against this.' **Support worker**

There have been increases in practical needs and information and advice around services available. Some staff have highlighted an increased need for, and provision of, foodbank vouchers and financial assistance. Some practical interventions have been harder to provide due to imposed restrictions and staff and volunteers working primarily from home. For example, staff have not been able to offer as many security items and it can take longer to send resources via post.

'We have had to provide more practical and welfare support – shopping vouchers, home essentials, mobile phones etc as service users have been unable to access other services.' **Support worker**

For survivors of domestic abuse accessing VS services, staff have reported a notable increase in financial issues, due to loss of employment or income and economic abuse, assistance with protection orders and accessing alternative accommodation such as refuges.

'They have tended to need far more information and support in relation to economic abuse as well as financial support.' **Support worker**

'Some survivors require information on alternative services related to Universal Credit issues, discussions on social welfare incomes that could be available to them, legal support, advice on child contact arrangements to proceed with new lockdown regulations that changed almost weekly.' **Support worker**

'More clients required legal support – particularly those who needed Protection Orders.' **Support worker**

Safety planning whilst the service user was restricted in being able to leave the home has been challenging and required creative solutions from domestic abuse services. There has been further challenges when the accused perpetrator of abuse was still in the home not only for managing safety but in delivering any support. Delivering services to victims of domestic abuse living with the accused perpetrator meant that the urgency with which support was required increased, as there was less freedom to call or opportunities to get away.

The reduction in availability and provision of other services has affected the support needed and provided by VS services.

'Changes to statutory services have affected the level of services required from Victim Support. There has also been an increase in advocacy on behalf of service users with other agencies such as housing due to challenges in accessing these services. With an increase in neighbour disputes, there have been more requests for help with moving house. Where outcomes from housing, health and other services have taken more time, the length of support provided by staff and volunteers increased.' **Support worker**

'Especially during the early stages of lockdown, there was a reduction in other services' availability which reduced options available.' **Support worker**

'Domestic abuse group sessions and other signposting agencies were not running their sessions therefore we have been unable to use normal service signposting.' **Support worker**

Service delivery challenges

Providing support during the Covid-19 pandemic and related restrictions has created challenges for support workers in providing services to victims and survivors. The main challenges highlighted by staff and volunteers through the survey are:

- Building a trusting relationship with service users
- Risk assessing and providing safe support
- Managing caseload
- Staying positive and emotional strain
- Accessing other services and professionals
- Technical issues.

Building a trusting relationship with service users

The main challenge staff and volunteers raised was their ability to build rapport with service users where face-to-face support has not been possible.

'Even if you know the person, you don't have any of the facial cues or body language to help you to understand what they're thinking. If you don't know them it's even harder and is quite stressful and tiring for the caseworker.' **Support worker**

'Not being able to see service users face-to-face to monitor body language and to pick up something that you wouldn't be able to see over the phone. Also not being able to build up a strong rapport over the phone to the most vulnerable.' **Support worker**

'Biggest challenge is not being able to see victims of crime, to feel their energy and aura, to know what they are trying to say especially if English is their second language, not being able to see body language.' **Support worker**

Risk assessing and providing safe support

A significant challenge for services due to its level of importance has been providing accurate risk assessments and support when the victim or survivors of domestic abuse were in isolation with the perpetrator.

'If contacting by text message only it is hard to gain tone from messages. Ensuring the client is safe and away from alleged perpetrator has been a challenge. Monitoring safety has been a high priority as it always is but the safety questions have been altered to reflect lockdown and government focus on getting out if in danger.' **Support worker**

'The issues seem to be around not being able to speak to victims direct in a safe space where they have time to talk. Where the abuser of an adult or child victim is present in the home most of the time, the space is not there to provide support either by phone, text or online.'

Support worker

'Accessing safe and confidential space to contact victims and witnesses are not always accessible or provided. Engaging survivor with services can be inconsistent as the accused perpetrator or those that are perpetrating the abuse are at home also.'

Managing caseload

Since May, frontline staff and volunteers have seen an increase in case volume, complexity of needs, the level of support required to build relationships and length of recovery or support due to delays in trials. This has stretched capacity and led to the development of backlogs and waitlists. This is a particular concern as the pandemic and demand continues, especially as services do not have resilience when staff and volunteers contract the virus, and will require medium- and longer-term considerations on the scale of services available.

'Existing service users are taking longer to recover from crime as well as services seeing an increase in new service users who are needing more intense and longer support.'

Support worker

'More clients want more frequent emotional support (every 3–4 days or so) and with the amount of crime occurring this is hard to provide. Waiting lists have become longer.'

Support worker

'The sheer volume of requests for support have been unprecedented, we all have extremely high caseloads.'

Support worker

In response to the surge in demand for domestic abuse and sexual violence services specifically, the Government created two funding streams to help existing services cope with this increase. Funding was initially awarded until the end of October 2020 but the deadline for spending the additional funds were later relaxed to the end of March 2021. This quick cash injection into services is hugely welcomed and many staff expressed gratitude for the additional funding provided. Nevertheless, it is clear that the short period given did not allow for the time it takes to recruit, induct and train new staff that would enable services to manage higher caseloads. Some staff expressed that the additional funding put additional pressure on existing staff rather than reducing it due to the need to spend time with recruitment processes. Furthermore, not all services received additional funding.

'We have not seen any of this funding... We have had an 80 per cent increase in referrals and been a staff member short throughout – this has put a huge amount of stress on the IDVA service.'

Support worker

Considerations of the reality of growing domestic abuse and sexual abuse service provision longer-term are required to respond to the sustained increase in demand. Staff have highlighted that the additional funding helped existing service users who have accessed support but not enabled community outreach and promotion of services with the challenges restrictions create for this activity.

'It will take a significant amount of time to catch up and support all those who have been referred into the service in addition to those who are already service users.' **Support worker**

CYP services have experienced a reduction in demand rather than an increase, though levels are starting to return to baseline levels since schools have returned. However, these services still do not expect to see an increase in victims accessing services until the New Year, as it may take time for disclosures to happen.

Staying positive and emotional strain

Staff and volunteers have been effected themselves by the pandemic in terms of knowing people who are suffering or have died, being at risk of the virus especially when doing face-to-face appointments, and managing the risk to which they expose their household. Many service users have understandably sought reassurance and insight from services, which in some instances has been difficult for staff and volunteers to provide.

'Listening to descriptions of abuse is traumatic and they are doing more of this and the abuse is worse.' **Support worker**

'People having concerns or anxiety relating to the pandemic and lockdown that I would sometimes feel powerless to help with, since I don't know what to expect next either.' **Support worker**

Staff and volunteer wellbeing is affected by not being in offices or hubs with colleagues who can provide instant reassurance, advice and assistance.

'Not being able to discuss cases with colleagues in person has proven difficult at times and working in isolation can feel very hard to process information told to us by service users.' **Support worker**

'Not having the direct contact with colleague to discuss ideas and offer support to each other after difficult conversations.' **Support worker**

'In the homicide team you are constantly dealing with death and grief. During lockdown, the whole world was experiencing this, hearing it on the TV, in media, in their personal life etc, so it was difficult to get away from it. Especially working from home, it was hard to have a break from it. The clients were also feeling this because they were dealing with the same but for some it was worsening their grief, which can be difficult to manage when Covid-19 is a global issue.' **Support worker**

Accessing other services and professionals

Another challenge highlighted by staff and volunteers has been the reductions or changes to other services that facilitate holistic support for those with complex or multiple needs, including joint visits and access routes. This has led to staff and volunteers needing to spend time understanding what other services are available and when, chasing responses or making more attempts to contact other services and responding to needs that other services would usually meet.

'Fewer services are available and open, hard to contact professionals, it takes longer to do almost all types of work currently but the workload has increased.' **Support worker**

'The biggest impact was signposting, keeping up to date with who was doing what instead of their usual.' **Support worker**

'I am a hospital based IDVA and it has been very difficult not to be on site – I am used to visiting wards or departments very quickly. It has been hard at times to make contact with referrals if they have been discharged from the hospital. It may have been the only chance for someone to be able to speak to a professional.' **Support worker**

Technical issues

There have been some technical difficulties with increasing use of remote communication methods, where service users have access to the internet. These include internet connectivity when making video calls, having compatible technology with service users, and being able to assist service users with installing software or navigating VS's digital platform. There have also been some difficulties with redirecting office-based phones. Although VS resources are in multiple languages, providing a digital platform in multiple languages would require new funding that has not yet been secured.

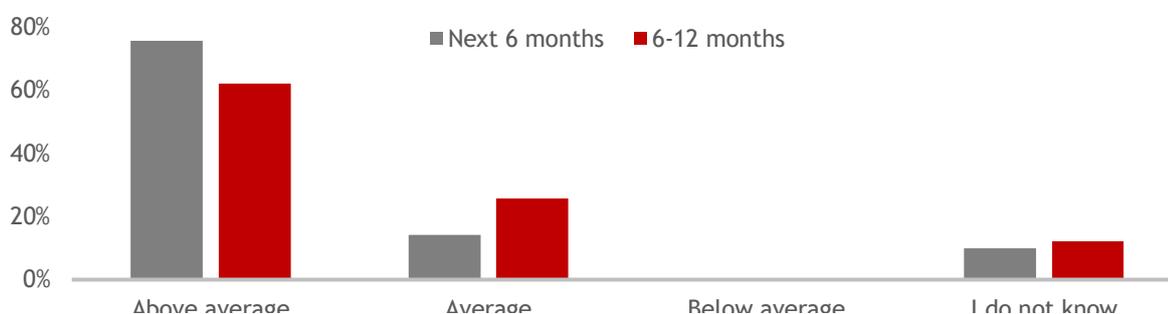
'Lots of booklets had to be send via email, this was not ideal especially if the victim had no printer.' **Support worker**

Future demand

It is too early, and the situation with Covid-19 is still too uncertain, to provide accurate information on what will be the longer-term impact on victims, service users and service provision, and how long the effects will be felt. However, current data trends and caseworker experience provides indications of potential effects and challenges.

With ongoing restrictions and recent increases in the prevalence of Covid-19 VS services expect that high demand for support will continue in line with current trends in above average referrals, complex needs and longer case durations. Seventy-seven per cent of staff and volunteers expect the level of demand for victim services to remain above average over the next 6 months. Furthermore, 62 per cent of staff expect demand to continue to be higher than usual levels over the coming 6–12 months.

Graph 12: Expected levels of demand for victim services according to staff and volunteers



We anticipate the main medium- and long-term impact of Covid-19 pandemic on service users and the service itself will be on case length and court delays. We also expect that other services will continue to be less accessible and are concerned about the resilience of some small organisations that provide specific services that highly benefit victims and survivors.

Many staff who responded to the survey expressed that they need funding for additional support workers in their service to manage demand. This relates to service users needing more support than usual, higher case volumes and challenges with staff absences and pressures staff are experiencing during these unprecedented times.

'I am concerned the high demand on caseload coupled with how caseworkers have coped in Lockdown and staff absences due to long term sickness will lead to burnout for our existing caseworkers.' **Support worker**

Nevertheless, a number of specific services for which staff and volunteer want the Government to provide additional funding due to the impact of lockdown on victimisation:

- Early intervention services for domestic abuse and education about healthy relationships: With a particular increase in medium risk service users, staff have raised the need for these services to receive additional longer-term funding to help prevent escalation and provide effective support
- Refuge spaces
- Funds for survivors of domestic abuse with no recourse to public funds and their children
- ASB and harassment services
- Outreach services for victims of hate crime.

Other requests for additional funding in relation to the pandemic include extra funding to source Covid-19 secure premises for face-to-face, private meetings.

'Victims need time, space, security, freedom and trust to disclose and support prosecutions or investigations, we need to provide continuity and accessible services 24/7 and be visible to victims in safe places that they are able to access on foot, locally or from a phone for free in a timely manner so if they have just a moment to make that call for help they can know they will be protected.' **Support worker**

'Special funding for complex cases with additional mental health and addiction needs and criminal records needs to be devised also as many services decline our service users for being seen as too complex or chaotic, yet they deserve the help and support too to move forward safely. The complex cases are the ones that aren't offered services that they need which makes them additionally vulnerable especially from sexual crimes.' **Support worker**

A common theme in responses to the staff survey is the need for courts to adapt to address the backlog of cases, which have a knock on effect to the length of support needed to help victims who feel unable to move on.

Many staff have highlighted the need for other agencies to receive additional funding to improve the services currently available and better adapt to providing support during ongoing restrictions, these include mental health services and counselling services, housing, befriending services, social services, youth work, legal services and emergency accommodation.

'Funding for people not eligible for legal aid to get civil protection.' **Support worker**

'The homeless system needs addressing as putting all homeless people in the same environment increased the crimes reported, putting a vulnerable single parent with mental health needs and addiction problems in the next b&b room to a recently released prisoner with alcohol issues for example is unhealthy for both and makes all parties more vulnerable.' **Support worker**

There are many changes in the way victim services have operated and liaised with other services that staff and volunteers think should continue in the future. There is appetite to keep providing a variety of contact options when accessing support such as Skype, phone, text, video, email, letter, Livechat and My Support Space.

There is recognition that being in an office environment provides communal support between staff and can help coordinate support where staff work in multi-agency hubs. However, many staff have found some positive effects to the quality of service they provide from working from home, such as being in a quieter environment for calls with service users, having more time for admin and follow up with for service users with other agencies, less travel and a better work—life balance which has helped reduce stress levels.

'[Working from Home] I've had some really important calls with clients (such as suicidal callers or high anxiety or recovering from trauma) where I've had the privacy to have a meaningful conversation. Telling them that I'm working from home and only my dog can hear them really helps some people and they open up far more.' **Support worker**

The reduction in face-to-face appointments has increased the number of victims and survivors staff can contact in a day due to time saved from travel, but this has been counteracted by longer phone calls and higher emotional support needs. Overall, some staff feel that they may increase the use of calls in future but feel strongly that face-to-face appointments are vital for delivering effective support to those who need it. It has increased confidence in using other methods to support service users.

'It would be good to continue to offer some online support and online Peer Supporter training after lockdown to offer accessible services to those unable to make face-to-face sessions due to geography, health, caring responsibilities, etc.' **Support worker**

Some meetings being via video conference has been positive due to reduced travel, more people being able to attend and an increase in frequency. These include MARACs, which IDVAs have found to work well in many areas.

'MARACs being held more frequently and remotely has worked well as there is a reduced time between referral and intervention, especially in cases of non-engagement.' **Support worker**

With the pandemic continuing, it is vital that measures and resources are in place to increase accessibility and engagement with victim support services. Staff and volunteers have suggested that more funding is allocated to marketing, for example displaying localised information in shops and pharmacies, community outreach and promotion of services by other agencies.

Other improvements to victim services suggested by staff and volunteers during this time include providing information on where people can get food and other essentials, having an emergency fund to purchase another phone (if police have taken it for analysis) or to top up phone credit as well as the development of online support sessions.

There is also appetite for additional training around mental health awareness, cognitive behavioural therapy and other emotional support practices to help manage the increase in mental health issues faced by service users, especially with long waiting times for specialist counselling.

Conclusion

The Covid-19 pandemic has had, and continues to have, a significant impact on crime and those affected. Victims and survivors have faced additional barriers and challenges to accessing support services during this unprecedented time. Isolation, mental health issues, financial instability and hardship, fewer positive activities, anxiety around police investigations, delays to trials and reduced access to statutory services have exacerbated the impact of crime and impeded recovery. There are some victims and survivors who would have been able to access support through co-locations and outreach work in usual times which remain unsupported, and those struggling daily due to their close proximity to the perpetrator. The significant reduction in CYP accessing VS services are of particular concern.

VS services have adapted to continue to be available. Digital communication and remote support options have increased and VS will continue to provide the face-to-face services, closely following government advice on Covid-19 guidelines to protect service users and staff. During this challenging time, our expert support services are still open and we are here for victims and survivors that need us.

However, as lockdowns return and restrictions continue more must be done to ensure that challenges identified in this report do not endure. Further research is required with victims and survivors to develop a greater understanding of these challenges. Although VS is supporting more people through this period we are conscious that there are others affected by crime that need support and therefore new outreach activities need to be developed, targeted and resourced. Those who have accessed our services deserve to receive bespoke support that suits their communication abilities, circumstances and individual needs, which does not put them at risk. We will continue to provide and develop our remote support options and the abilities of our frontline staff and volunteers to deliver them effectively, as well as risk assess and manage face-to-face appointments where beneficial to service users.

Looking forward services that support victims and survivors need additional funding to increase frontline staffing and resilience to continue to meet ongoing demand. It is vital that as Covid-19 risk levels reduce more and more victims and survivors are able to receive face-to-face services, which continues to prove to be a crucial support method. This funding must be sustainable and long-term, to provide services with the security and stability they need to support victims. Higher investment in victim services will not be sufficient without equivalent funds allocated to struggling statutory services such as housing, social services and mental health services. Furthermore, the Government will need to take significant action to meaningfully address the backlog of cases awaiting trial to prevent victims and survivors waiting years for justice and losing all confidence in the criminal justice system. Finally, future restrictions and lockdowns need to recognise the negative effect of isolation and reduced opportunities for disclosure and accessing help.

VS VICTIM SUPPORT

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For information and support, contact us by:

- calling: Supportline **08 08 16 89 111**
- using Next Generation Text (add **18001** before any of our phone numbers)
- Online: **victimsupport.org.uk**

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Published by Victim Support
President HRH The Princess Royal

Victim Support, 1 Bridge Street, Derby DE1 3HZ
Telephone: 020 7268 0200

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