



Doing better for victims and witnesses with mental health problems in Kent

Executive Summary

Tamar Dinisman and Ania Moroz
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www.victimsupport.org.uk

In recent years, there has been growing evidence of the vulnerability of people with mental health problems to being victims of crime, and the barriers and negative experiences victims and witnesses with mental health problems face in the criminal justice system (CJS).^{1,2}

Nevertheless, there is still very little evidence of the experiences of people with mental health problems in the CJS. The Kent Police and Crime Commissioner (PCC) commissioned this research to provide much needed insight into the experiences of victimisation among people with mental health problems in Kent, their needs and the factors that might facilitate their engagement with the CJS and help them to cope and move on.

To meet the aim of the research and gain as rich an understanding as possible, we have used a mixed methods approach, including both quantitative and qualitative data collection. The approach consists of four methods: in-depth interviews with 14 victims with mental health problems; in-depth interviews with 12 frontline practitioners; quantitative analysis of data from the Crime Survey of England and Wales (CSEW) and Victim Support data; and a workshop with service providers for people with mental health problems in Kent.



1 Rossetti, P., Dinisman, T., & Moroz, A. (2016). *An easy target?* London: Victim Support.

2 Hart, C., de Vet, R., Moran, P., Hatch, S. L., & Dean, K. (2012). A UK population-based study of the relationship between mental disorder and victimisation. *Social Psychiatry and Psychiatric Epidemiology*, 47(10), 1581–1590.

Key findings

In line with the scope of the research, the findings are divided into two main sections:

- Who are the victims with mental health problems? And what are their needs?
- The experience of victims and witnesses in the CJS in Kent: areas for improvements.

Who are the victims with mental health problems? And what are their needs?

1 Victims with mental health problems should not be seen as one group of people

Victims with mental health problems are not a homogenous group. Our findings indicate that victims with mental health problems can be roughly divided into four main groups. The groups differ in two main factors: whether the mental health problem existed before the crime or emerged as a result of it; and the severity of the impact of the crime on the victim.

- a) Victims with previous mental health problems who were severely affected by the crime.
- b) Victims with previous mental health problems who suffered a limited impact of the crime on their mental health.
- c) Victims with no previous mental health problems who developed them as a result of being a victim.
- d) Victims with no previous mental health problems who developed them as a result of being a victim and were severely affected by the crime.

Accordingly, as will be presented later in this report, victims in different groups need different levels and intensity of services to cope with the effect of the crime and help them move on. The findings also emphasise the importance of appropriate services at the right time. For instance, if those who have suffered a limited effect on their mental health do not receive the correct support, they can experience a deterioration in their mental health problem. They then become a victim for whom the impact of the crime is severe.

2 People with mental health problems in Kent are more likely to be victims of several crime types

Adults with mental health problems in Kent have a higher risk of being a victim of serious violent crime (violence with injury) and burglary. For both crime types, these proportions are slightly higher than in the population with mental health problems in England and Wales. People with mental health problems in Kent are also at greater risk of being a victim or witness of antisocial behaviour (ASB) in their local area. This is similar to the differences found between people with and without mental health problems in England and Wales.ⁱ

3 Victims with mental health problems have additional and distinctive support needs in the criminal justice process

Victims with mental health problems expressed support needs through the CJS and wider support needs. Support needs through the CJS include: a) to be treated with understanding of their mental health problems and taken seriously by the CJS; b) to be given information clearly and slowly; c) to feel safe and relaxed when giving evidence in court; and d) to be provided with enhanced entitlements.ⁱⁱ

Wider support needs of victims with mental health problems include: psychological and emotional support; practical help, which includes assistance with everyday tasks or issues around leaving the house; forming a strong, trusting relationship with service providers; and having support provided close to home.

ⁱ Data from the CSEW from the year ending March 2016 to the year ending March 2017 was used.

ⁱⁱ For a full list of enhanced entitlements, please see pages 26–27 in the full report.

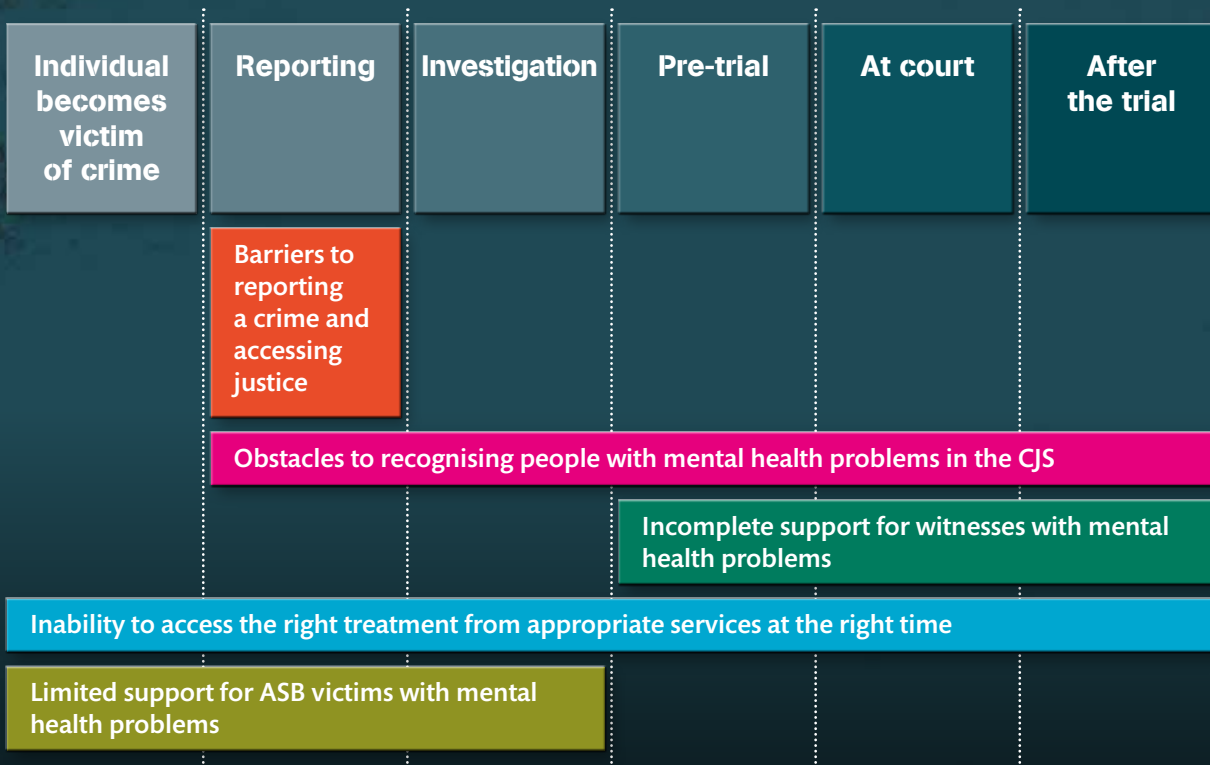
The experience of victims in the CJS in Kent should be improved across the CJS, and other statutory and non-statutory agencies

Due to their complex situation, victims with mental health problems often need the support of more than one service. Areas for concern, where victims and witnesses are not receiving the services they deserve, were found across the CJS, and other statutory and non-statutory agencies. We identified five areas where support needs to be improved for victims and witnesses with mental health problems in Kent. Each of the areas comprises several issues:

1 Victims with mental health problems have unique barriers to reporting a crime

We identified three main issues that hinder victims with mental health problems in reporting a crime and seeking help in Kent: a) a sense of isolation from the community as a result of the harm caused by hate crime and prejudice; b) victims' negative perceptions of the police due to past experiences of being detained by the police under the Mental Health Act 1983; and c) the impact and symptoms of mental health problems, mainly low energy and poor memory.

Areas for improvements in the CJS in Kent to better support victims and witnesses with mental health problems



2 Victims' mental health problems are not known to criminal justice agencies or support services in all cases

Mental health problems are not known to criminal justice agencies or support services in all cases. It is not uncommon for mental health problems of witnesses to become known to the prosecution or the court staff only on the first day of the trial. As a consequence, victims or witnesses are not identified as vulnerable and may not receive the enhanced support they deserve throughout the criminal justice process.

Four issues emerged as obstacles to recognising people with mental health problems in the CJS. First, victims and witnesses face barriers to disclosing mental health problems to criminal justice agencies. In particular, they fear social services involvement, and are concerned about not being taken seriously by criminal justice agencies and/or that their disclosure will lessen their credibility as a witness. Second, there is a gap in identification of victims' and witnesses' mental health problems by the police. Other criminal justice agencies and support services also rely too heavily on the police, rather than seeing this issue as a shared responsibility. Third, the court process lacks clear records of witnesses with mental health problems. Fourth, it is difficult to recognise and share updated information across the CJS and organisations when victims and witnesses have developed mental health problems, or their conditions have worsened, while waiting for a trial.

3 Incomplete support for witnesses with mental health problems

The findings indicate that some areas need to be improved before, during and after the court process. We found a low take-up of pre-trial visits, insufficient provision of special measures, unwanted contact between witnesses and defendants and their supporters, and a lack of support after the trial in cases when the effects of the trial are not immediate.

4 Inability to access the right treatment from appropriate services at the right time

We identified three main issues that affect victims' access to the right treatment at the right time: long waiting times for mental health services and counselling; the absence of a joined-up approach between agencies and clear information for signposting; and challenges to making contact and engaging with victims with mental health problems.

These issues are mainly caused by the number of agencies involved in supporting victims and witnesses with mental health problems. This also emphasises the need for improvements across all agencies, statutory and non-statutory, in the CJS, NHS and third sector.

5 Limited support for ASB victims with mental health problems

The findings emphasise the adverse and substantial effect that ASB has on victims with mental health problems, especially if experienced at home. Furthermore, victims feel they are let down by the treatment they receive from the agencies responsible for addressing ASB.



Summary of recommendations

“I don't think it's just a matter for the police, it's a matter for everybody working together properly, to make sure that some of the issues outside of a crime are addressed... It's about the importance of sharing information and making sure that we do the right thing for that person, to try and get them the support that they need.”

Practitioner, mental health charity

The findings of this report relate to the many agencies involved in supporting victims and witnesses with mental health problems, including all criminal justice agencies, NHS Clinical Commissioning Groups (CCGs) and services, councils, housing associations and charities for victims and witnesses and for people with mental health problems. Although good practice exists and some victims with mental health problems in Kent report positive experiences, the research found that improvements in all these agencies and organisations are needed. Only by the agencies and organisations acting collectively can the needs of victims and witnesses with mental health problems be fully met.

While the research was undertaken in Kent, it is likely that other areas across England and Wales share some of the issues and require improvements. Accordingly, while we make some recommendations for improvements at a local level, others can only be addressed at a national level.

There are three overarching recommendations:

1 Take a joined-up approach

To improve victims' and witnesses' experiences of the justice system and enable them to access the support they need, agencies and services in Kent should:

- establish regular informal meetings between people with mental health problems, members of criminal justice agencies and services for victims. These less formal and more relaxed settings can contribute to reducing barriers to engagement with the CJS and disclosing mental health problems
- build regular forums of agencies that work with victims and witnesses in general and those with mental health problems in particular, including NHS services, to develop and implement holistic solutions for these victims' and witnesses' needs, particularly addressing the areas for improvement highlighted in this report. These forums can also highlight gaps in services and advise commissioning bodies, such as the PCC and NHS, on ways to reduce these gaps. It is highly important that service user groups are also represented
- ensure that commissioning bodies such as the NHS (including CCGs), the PCC and local authorities regularly exchange information and that details of new services, and changes to services, for victims of crime are shared between relevant criminal justice agencies and organisations.

2 Increase identification and recording of victims and witnesses with mental health problems

This report recommends that actions are taken to:

- establish shared responsibility across criminal justice agencies for identifying mental health problems, and sharing this information with others
- promote a question to be asked of victims and witnesses by criminal justice agencies about vulnerability in general or mental health in particular
- ensure that every service in the CJS – including HM Courts & Tribunals Service (HMCTS), the Crown Prosecution Service (CPS) and the Witness Care Unit (WCU) – has effective and clear recording systems in place to identify victims and witnesses with mental health problems.

3 Enhance support for victims with mental health problems

To ensure all victims and witnesses with mental health problems receive the support they need to cope and recover, the following steps should be taken. While this report focuses on victims with mental health problems, our recommendations are relevant to, and could improve the experience of, all vulnerable and intimidated victims.

- It is important to improve the awareness and training of CJS practitioners of the invisible nature of mental health problems and the importance of identifying victims and witnesses whose mental health problems develop or worsen later in the process.
- The police (including the WCU), the CPS, HMCTS and the Witness Service should work to improve the provision of special measures. More evidence should be gathered nationally on the issues causing this patchy provision and ways to improve it. Better collaboration locally between all agencies is also essential.
- Any court reforms should include updating all criminal courts to ensure that special measures are available, fit for purpose and working.
- The Government should fulfil its commitment to roll out nationally pre-recorded cross-examination at a faster rate.
- It is vital that HMCTS ensures that separate spaces are available for defendants and victims at all criminal courts. This includes separate entrances, toilets and waiting areas.
- A mechanism should be introduced through collaborative working between the WCU, the Witness Service and services for victims to ensure that witnesses with mental health problems are contacted and offered support several weeks after the trial.
- CCGs should increase investment in mental health services to ensure a wide range of support is available and to reduce waiting times for NHS services and counselling services for victims of crime.
- The crisis resolution and home treatment (CRHT) team should increase its provision of specialist support for people with mental health problems experiencing crisis.
- The Department of Health and Social Care (DHSC) and the Home Office should review the current response to people with mental health problems; the review should include representatives of victims with mental health problems.
- The visibility of support services, including Victim Support, should be increased in Kent, by promoting the service in places recommended by victims with mental health problems.
- Support services should provide an enhanced service to victims with mental health problems, including increased efforts to make and maintain contact.
- Additional research is required with victims and practitioners to better understand the complexity of supporting ASB victims with mental health problems and to inform the development of an intervention that will improve their experiences.

3 Enhance support for victims with mental health problems



2 Increase identification and recording of victims and witnesses with mental health problems

1 Take a joined-up approach

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President HRH The Princess Royal

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

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