

STRATEGIC POLICING AND CRIME BOARD
5 January 2016

Victim Services in the West Midlands
2015-16

Report of the Chief Executive

'This new approach to commissioning will improve how we respond to victims' needs. Our inclusive and consultative approach means that victims will be at the heart of the process and will ensure that the work that we do is victim-led. We will be clear about the outcomes we expect for victims and ensure that we get the most from the resources available.'

David Jamieson, West Midlands Police and Crime Commissioner

	Background
1.	Crime does not affect just the victim. It has a much wider impact on family and friends. Becoming a victim of crime can be a traumatic experience which can affect people in a variety of ways. It is important to ensure that victims who need support are able to access the right services.
2.	The new approach to commissioning services for victims in England and Wales forms part of a strategic move towards more personalised services for local people and investment in the voluntary and community sector. As part of this process, since October 2014 we have moved to a model where the majority of emotional and practical support services for victims of crime is commissioned locally, with responsibility transferred to Police and Crime Commissioners. At a national level, the Ministry of Justice continues to commission a witness service, a homicide service, support for victims of human trafficking, victims of rape through national rape support centres, some national telephone helplines and other support for victims of domestic and sexual abuse. The move to local commissioning has presented an opportunity to understand service delivery across the West Midlands, identify pathways and referral mechanisms and to ensure that services respond effectively.
3.	The Office of the Police and Crime Commissioner (OPCC) has addressed the new legislative responsibility for Victim Services in the West Midlands by not just thinking about how to optimise the funding, but by utilising a full range of resources. The OPCC has considered many different ways of improving outcomes and partnership working while assessing a range of different services available to try and secure better outcomes, meanwhile considering value for money. The OPCC is focussed on outcome based commissioning to achieve the overarching outcomes of supporting victims to cope with the immediate impacts of crime and recover from the trauma

	experienced. Cope and recover are the outcomes that the commissioning of services for victims of crime seeks to address.
4.	<p>The following objectives underpin the OPCC's approach to the commissioning of victims services:</p> <ul style="list-style-type: none"> - Support will be driven by need that is evidenced - Specialist support will be available to the most vulnerable victims in the West Midlands - Continuity of care is paramount and will be available for long as it is needed - The commissioning approach will be consultative and collaborative as partnership working is crucial to ensure that the best services are available for victims - The services commissioned as part of this service are one element of a complex and varied network of support which currently exists for victims - Where existing baseline services exist, the OPCC will work with partners to ensure resources are appropriately allocated to prevent duplication, and to encourage local innovation in developing responses to those victims with more acute needs. One good example of this innovative approach is the OASIS Support Services being delivered by Community Vision West Midlands CIC, which offers a whole family model of culturally appropriate interventions that combine intensive one to one support with group activities and specialises in BME victims of serious crime - Locally, regionally and nationally commissioned services should complement not duplicate. The OPCC will continue to monitor progress in relation to a number of national funding arrangements for services for victims of serious crime, and will keep abreast of any developments as to the wider scope for national services and funding arrangements.
5.	In addition to specialist victim services, all PCCs have a statutory duty to have a 1st contact, assessment and referral service for victims. In the West Midlands, this is being delivered by Victim Support.
6.	In order to comply with the requirements in the Victims' Code and the EU Directive, services commissioned or provided by the Police and Crime Commissioner must be in the interests of the victim, available whether they report a crime or not, free of charge, confidential, non-discriminatory (including being available to all regardless of residence status, nationality or citizenship), available whether or not a crime has been reported to the police and available before, during and for an appropriate time after any investigation or criminal proceedings.
	The West Midlands Response
7.	The Victims Commission was launched on 27 January 2015 and is the Police and Crime Commissioners Advisory Group on provision of specialist services. A link to the launch video is here . The group is made up of expert representatives from across the voluntary and community sector and they contribute to and influence the priorities within the Commissioner's Police and Crime Plan, and make recommendations regarding funding and service delivery. The Commissioner makes the final decision. This group are independent of the Commissioner, but accountable to him. They are committed to improving services and bringing expertise and experience to the development of policy as they relate to victims of crime. The Victims Strategy that sets out the framework for delivery is here http://www.westmidlands-pcc.gov.uk/media/359356/pcc-victims-services-strategy-2014-16.pdf
8.	The Victims Strategy will be reviewed and updated in the New Year to incorporate all

	the work that has taken place during 2015-16.
9.	One of the key outcomes from the work of the Commission is to identify key issues in each of the priority areas and to that end we have spent the last 9 months gathering information in a variety of ways about the priorities that have been identified.
10.	The starting point with most of the priorities is that they are hidden crimes and working jointly with partners we have recognised the need for raising awareness across the Force area. We have focussed on those who are most vulnerable, from new and emerging communities and also ensured a collaborative approach was adopted for each strand
11.	This report sets out the key issues within each of the priorities, what events have taken place, and some conclusions. We now have an understanding of the concerns of the voluntary and community sector who are delivering most of the services, a better idea of what needs to be addressed, where the gaps in provision are and the extent of further work that needs to be done.
12.	The Victims Commission has worked in partnership with West Midlands Police, particularly the strategic business leads for each of the priority areas, the voluntary and community sector, the Violence Prevention Alliance, the Preventing Violence Against Vulnerable People Board and sub-groups, the Heads of Community Safety and Local Police and Crime Boards, Health and other specialist agencies.
	Consultation
13.	The Commissioner has a statutory duty under the Police Reform and Social Responsibility Act 2011 to consult with victims of crime. This is an on-going strand of the work built into the process, both through monitoring of our commissioned services and priority setting which ensures that the views of the victim are at the heart of the decision making process. This has also created a structure to enable victims to question and input into the decision making process and therefore be part of the governance process.
14.	We are working with partners to establish the pathways of the victim journey from start to finish and to ensure that victims know what they can expect at every stage of their journey. Repeated concerns that have been expressed during consultation have included: an inability to identify existing services; inability to identify gaps in services; no central information point or signposting process regarding service provision; referral pathways are difficult to access; communication between agencies is poor and there is no process for victims to understand their journey through the system. These are the main issues that the OPCC and the Victims Commission have been seeking to address.
15.	We have used key principles which include engaging with victims, partners and service providers in order to understand the current landscape, identifying what works: how services are delivered locally and across the West Midlands, areas that need to be improved, gaps in delivery and duplication.
16.	The Victim Commission structure ensures that we are responsive to community need and emerging priorities, by working with the voluntary and community sector which is networked at local and grassroots levels.
17.	The OPCC in partnership with the 7 voluntary sector councils holds consultation events

	in each local authority area twice a year to ensure the local voice influences the work that we are doing.
	Mapping of Services
18.	Another clear message from each of the events is a lack of knowledge on the ground about what services are available in each of the seven local authority areas. The OPCC has been developing a map of services which will be developed into a directory of victim's services. One of our biggest challenges will be to keep the information up to date, as the landscape changes due to financial pressures.
	1st Contact, Assessment and Referral Service
19.	The national and local focus of support to victims is to put the victim and their individually identified needs at the centre of delivery. The support provision provided by Victim Support is not a standalone service links with, and support access into, other support services, provided via both statutory and voluntary organisations across the West Midlands and works closely with the Victims Commission. In addition to the Victims Fund allocation of £1,385,000, Victim Support also receive the PCCs Prisoners Earnings Act allocation of £48,839 which is used for practical purposes such as moving a victim who may have to leave home, translation services, food, heating, clothing, transport, personal alarms, counselling, childcare, repairs, or cleaning.
20.	<p>The service that Victim Support delivers is based on vulnerability and risk as the priority, and the scope of delivery is as follows:</p> <ul style="list-style-type: none"> - Referral services – movement of victim details from West Midlands Police to Victim Support, as and when required in a secure manner - Named and dedicated single point of contact for each service user - Telephone support, advice and guidance about the experience of victimisation and the journey through the criminal justice system and other services where appropriate - The scope of provision to victims to assist them to cope and recover from crime(s) is likely to comprise of, but is not limited to direct delivery by Victim Support, or referral to services provided elsewhere - Evidence-based interventions shall be provided whenever possible and may include: key working, one-to-one support, befriending, support groups, peer support, talking therapies, health promotion/harm reduction advice and information and advocacy support
21.	Referrals come from a number of sources including West Midlands Police, statutory agencies, victims self-referring, British Transport Police, Action Fraud and other third party organisations.
22.	The service is provided to all victims who want it, whether they report the crime formally or not and is provided with a structured support plan to service users which meets their individual needs and is based on risk assessment and safety. Police Officers now make an assessment at the scene as to whether or not a victim is referred, and that assessment is made on the basis of vulnerability and risk. Referrals made are therefore victims who we know are in need of support. If a victim decides that they do not want support at that moment, they are left with information that

	<p>ensures they can access the service should they wish to do so at a later date. Prior to the change in referral mechanism, the Force had a policy of automatic referral to Victim Support who would then screen out the victims that did not fit their crime types. The change has led to a substantial reduction in the number of referrals that are made. West Midlands Police now refer approximately 20% of the total referrals that were made prior to April 2015. This has allowed us to design and offer a more bespoke and individual service to victims.</p>
23.	<p>It has also allowed us to determine areas of duplication and understand the way in which Victim Support works with partners. The OPCC working with the Force have decided that high risk victims of domestic abuse should not be referred to Victim Support but should be referred immediately to specialist providers through the Public Protection Unit, West Midlands Police also refer victims of fatal road traffic accidents directly to BRAKE and there is no direct service for young victims of crime. The Victims Commission will look at commissioning these services separately. We will consider how this all impacts on service delivery of Victim Support and the funding allocations when we negotiate for 2016-17.</p>
	<p>Monitoring of the Service</p>
24.	<p>Monitoring takes place quarterly by the Commissioner, the Strategic Police and Crime Board Lead for Victims, Cath Hannon and West Midlands Police Head of Criminal Justice Services with OPCC officer support. The monitoring meetings are used to ensure that Victim Support are delivering the desired outcomes for victims that are referred, the referral mechanism is working, that outcomes are being met and that we are getting value for money.</p>
25.	<p>The monitoring information for Q1 (April-Jun) is here and the financial data is here.</p>
26.	<p>The performance monitoring information for Q2 is here and the financial data is here.</p>
	<p>Future Provision of the Service</p>
27.	<p>The Commissioner is currently considering how the service will be delivered in the future and there are potentially a number of options available:</p> <ul style="list-style-type: none"> - Continuation of the service through Victim Support - Development of the work taking place around a “Vulnerable Citizens Portal” which aims to deliver a consistent approach to referrals. There is an opportunity to enhance the work of the Force and ensure that the statutory duty of the OPCC is delivered as both capabilities provide a means of identifying vulnerable people and signposting to appropriate local support. This could lead to us supporting victims in a more joined-up, focussed and co-ordinated way. The OPCC will explore the potential for this in the New Year with the Force and partners - Delivery of the service by other 3rd sector partners
28.	<p>All of these options will be explored further in the New Year.</p>
	<p>The Victims Commission</p>
29.	<p>The role of the Victims Commission is to ensure that services have a positive impact on victims by improving their circumstances around coping with the effects of crime and recovering from the harm they have experienced, the victim experience is simplified and improved and their voice is put both at the heart of the service and</p>

	delivery, victims know what to expect at every stage of their journey.
30.	In addition the Victim Commission is building a culture of ownership for victim care by the voluntary and community sector and partners so that victims experience quality support from the first point of contact.
31.	Members of the Victims Commission bring expertise, knowledge and experience to the development of policy related to victims of crime and have been selected by the voluntary sector to represent the different priorities.
32.	The priorities for 2015-16 have been determined using the Commissioners' Police and Crime Plan as the foundation. This has been informed using intelligence from the West Midlands Police Strategic Assessment 2014-15, Local Police and Crime Plans, local consultation, consultation with victims of crime and the West Midlands wide consultation process involving events in all of our seven local authority areas.
33.	The priorities include: Domestic Violence, Child Abuse, Child Sexual Exploitation, Human Trafficking, Rape and Serious Sexual Offences, Hate Crime, Female Genital Mutilation, Honour Based Violence/Forced Marriage, Anti-Social Behaviour, Fatal Road Traffic Collisions and Volume Crime.
34.	There are a number of strategic objectives that underpin the work that we have been doing; increasing our organisational knowledge and understanding of what 'vulnerability' is, improving our ability to take proportionate action in support of the recommendations made to the Commissioner by the representatives on the Victim Commission, as well as giving victims the confidence to report crime by raising awareness while commissioning services to ensure that there are support services in place.
35.	The starting point within each of the priorities has been different. Within some, we have been establishing details such as referral pathways and service provision, so the exercise has been a long and detailed one, and it is still on-going. The Commissioner has prioritised areas where there is high vulnerability, and we are learning and listening to the voice of the victim.
36.	The next section sets out the work that has taken place within each area and is the view of the voluntary and community sector and the issues that affect them.
	DOMESTIC VIOLENCE AND ABUSE
37.	<p>Domestic abuse is a widespread problem and is represented on the Victims Commission through the Domestic Violence Consortium (Coventry Haven, Wolverhampton Haven, Sandwell Women's Aid (also covering Dudley), Birmingham and Solihull Women's Aid, Walsall rep to be added) with one in four women experiencing domestic abuse in their lifetime. Across the UK, more than two women a week are killed by a current or ex-partner. It costs the UK tax payer an estimated £3.9bn per year, with high risk domestic abuse making up nearly £2.4bn of this.</p> <ul style="list-style-type: none"> - Each year around 2.1m people suffer some form of domestic abuse - 1.4 million women (8.5% of the population) and 700,000 men (4.5% of the population) - Each year more than 100,000 people in the UK are at high and imminent risk of being murdered or seriously injured as a result of domestic abuse - Women are much more likely than men to be the victims of high risk or severe domestic abuse: 95% of those going to MARAC or accessing an Independent

	<p>Domestic Violence Advisor (IDVA) service are women</p> <ul style="list-style-type: none"> - In 2013-14 the police recorded 887,000 domestic abuse incidents in England and Wales - Seven women a month are killed by a current or former partner in England and Wales - On average high-risk victims live with domestic abuse for 2.6 years before getting help - 85% of victims sought help five times on average from professionals in the year before they got effective help to stop the abuse - Each year more than 100,000 people in the UK are at imminent risk of being murdered or seriously injured as a result of domestic abuse - Each year the situation of 50,000 high-risk victims and 70,000 children are discussed at MARAC meetings across England and Wales. More than 90% of these victims are female, and 5-10% are male, 15% are black, Asian or minority ethnic (BAME), 4% are disabled, 1% are lesbian, gay, bisexual or trans (LGBT).
	<p>The West Midlands Context</p>
38.	<p>Across the West Midlands each regional local authority has signed up to a shared set of West Midlands Domestic Violence and Abuse Standards, a link is here demonstrating their commitment to implementing effective strategic and operational responses to this issue including a commitment to resourcing.</p> <p>It is significant that in the West Midlands Police Force Area, six authorities fall within the 20% most deprived local authorities in England. Evidence shows that where there is deprivation, the risk of experiencing violence as a victim or as a perpetrator is much greater.</p>
	<p>Reporting and Under-reporting</p>
39.	<p>There could be as many as half a million people across the UK who are experiencing domestic abuse but have not reported it. Across the UK, there is an increase of reporting to the police each year and improved recording by police. Taking Sandwell as an example in the West Midlands, in the year to-date there has been a 13% increase in domestic abuse crime and non-crime incidents reported to the police. During the quarter July-September, there was a 37% increase in DV crime incidents, with no obvious single causal factor. West Midlands Police have indicated that they have also seen an increase of 33% of repeat victims. In Birmingham, Most Serious Violence in Domestic Violence has increased by 23% over a 24 month period.</p>
40.	<p>Despite this increase in reporting we know that victims of domestic violence are less likely to report than victims of other forms of violence. For specialist services the overwhelming minority of service users have had contact with the police.</p>
41.	<p>Whilst there is general consensus that there is a growing confidence for victims to report and seek help, we cannot consider that we are reaching all victims, and awareness raising remains a priority, alongside the need to identify and target marginalised groups.</p>
	<p>Volume</p>
42.	<p>West Midland's data indicates that as a result of the increase in demand, specialist agencies are experiencing pressure on existing services as volume increases by up to a quarter. As victims come forward, good-quality, safe services are needed, to act quickly and appropriately, if victims are not to be put at greater risk.</p>

43.	The demand for refuge space significantly outweighs the availability. Furthermore, refuges are emergency accommodation: good, safe accommodation needs to be available at the other end to ensure that women are able to set up stable homes for themselves and their children. Limited housing stock within the public sector, unaffordable accommodation in the private sector further limits the choices and options for women needing to leave violent and abusive homes. For many, they are forced to remain in violent and abusive circumstances and will rely on access to community support services as a life line.
Victim Impact and the need for Specialist Support	
44.	Domestic abuse has serious, complex effects, with 70% experiencing physical abuse, 57% experiencing stalking and harassment, 22% experiencing sexual violence, 31% having mental health issues, and 6% misusing drugs or alcohol. 66% of victims have children.
45.	Victims need timely support to avoid escalation of risk. In the year before getting support from a specialist domestic abuse service, 68% of high-risk victims and 57% of medium-risk victims attempted to leave the perpetrator. On average they tried to leave either two or three times – showing that many were ready to take action to stop the abuse well before they got the right help. Victims need support at the first attempt to stop the abuse, rather than attempting (often at great personal risk, given that separation is a moment of significant danger) a number of times.
46.	Many victims ask repeatedly for help. 78% of high-risk victims and 62% of medium risk victims reported the abuse to the police in the year before getting effective help – an average of 2.8 times each for high-risk and 2.3 times for medium risk victims. 85% of victims sought help five times on average from professionals in the year before they got effective help to stop the abuse. The majority of domestic homicide reviews (DHRs) in the region had been assessed to be at standard risk.
47.	The current national model to tackle domestic abuse prioritises victims at high risk of serious harm or murder, is coordinated through Multi-Agency Risk Assessment Conferences (MARACs), meetings chaired by the police, where partners work together to deliver a coordinated safety plan to protect each victim. The relationship between the IDVA and the victim is crucial in ensuring that all the facts are available and that the interventions are appropriate, safe, and are implemented.
48.	Evidence from IDVA services indicates that 99% of clients got what they wanted, 93% said their overall situation had improved, 88% said their confidence had improved, 92% said their ability to cope had improved, and 93% said their personal safety had improved. <i>“She (IDVA) has been exceptionally supportive and there for me at any point when I needed her. She reassured me on many occasions that the choice had to be mine. She was not judgmental and understood why my decision was so hard” (Dudley Domestic Abuse client)</i>
Access to Services and Risk	
49	The environment that we work in, and the changing statutory sector has been created in response to a variety of factors: political, social, environmental, and most recently particularly the austerity agenda.

50.	<p>What is the journey of a victim of domestic abuse? Through the eyes of the voluntary sector provider: over-burdened social care teams and support services, reduced care and support options in the new Care Act, routine enquiry within health services but little time or resource to follow up on disclosures, over-burdened and under-resourced police, courts bursting at the seams, reduced Legal Aid, interventions concentrated at 'high risk' but with under-resourced IDVA provision. There is a significant shortage of resources for early intervention and support, subsequently families are unnecessarily being referred into child protection due to the lack of lower level early support. Significantly, evidence suggests that Domestic Homicide Reviews (DHRs) mainly concern women seen as standard risk or unknown to services; concentrating only on the high-risk misses this picture. There is a need for investment to reach these hidden victims, and prevent the escalation of risk illustrated in DHRs.</p>
51.	<p>The local authority response to domestic abuse is built around child protection, leaving a huge gap for young women and those with no children, who will also become more vulnerable due to benefit cuts for the under 25s.</p>
Changing Communities, Changing Need	
52.	<p>In many regions of the West Midlands, populations shift and change, with transient elements in council and temporary accommodation, and new communities quickly settling, for example new migrants from Eastern Europe. New communities are often insular and isolated, economic and immigration insecurity coupled with lack of knowledge of the laws and rights of women in the UK can put women at increased risk of abuse, and reduce their opportunities to reach help. For example, in Sandwell there have been two DHRs involving Polish women not known to any specialist services. Understanding the needs of, and creating links with, new communities must be a priority, and this depends on services having the capacity to offer outreach and community development alongside case-work.</p>
Priorities	
53.	<p>Domestic abuse is about patterns, not isolated incidents, and services for victims must respond to and reflect this. They must be available at all risk levels, not be concentrated at the high-risk, and be woven into other universal and targeted services so that wherever and whenever a victim presents, they can get help.</p>
54.	<p>The Domestic Violence Consortium have put forward the information below as a response o how domestic abuse should be dealt with across the West Midlands:</p> <ul style="list-style-type: none"> • Securing specialist support for high-risk victims: through IDVAs • Securing specialist support at court: supporting Court IDVAs to ensure that victims are able to engage with the criminal justice system • Prioritising specialist early intervention and work at all risk levels: through Domestic Abuse Advocacy offering responsive early support not tied to risk levels or statutory processes to women and girls where little is currently available, e.g. to those at risk of abuse, those experiencing abuse at standard risk, women without children • Integrated family support: Offering independent support for children which runs in tandem and integrated with support for their mother • Prioritising engagement with communities and schools to build awareness amongst disengaged communities, 16+ young people that support is available

	<p>to them</p> <ul style="list-style-type: none"> • Seeking partnership approaches and joint work: supporting and promoting collaborative working amongst and between specialist agencies, the statutory sector, health bodies and the community sector to seek ways to reach hidden victims • Capacity building on a multi-agency basis to understand and act upon the learning from DHRs • Integrated data sets across the region <p><i>The Commissioner has allocated:</i></p> <ul style="list-style-type: none"> - £260,000 for a West Midlands Independent Domestic Violence (IDVA) service that ensures that each Local Authority area has at least one IDVA (2 in Birmingham) who works with high risk victims of domestic abuse. The service provides independent and impartial support for all high risk victims/survivors of domestic violence including risk assessment, safety planning, crisis intervention, practical and emotional support, court support and Multi agency Risk Assessment Conference (MARAC) representation. - £38,170 to Sandwell Women’s Aid for the provision of 1 court based Independent Domestic Violence Advisor in Sandwell and Dudley - £41,778 to Birmingham and Solihull Women’s Aid for the provision of 2 court based Independent Domestic Violence Advisors in Birmingham 																		
RAPE AND SERIOUS SEXUAL OFFENCES																			
55.	<p>The West Midlands Sexual Violence Provider Consortium (Birmingham Rape and Sexual Violence Project, Coventry Rape and Sexual Assault Centre, Crisis Point and Sandwell’s Womens Aid) state that they have experienced a year-on-year significant increase in demand on services for the last five years. The OPCC has been working with the 4 providers to develop a West Midlands response that will ensure a consistent response to victims regardless of which local authority area you live in.</p>																		
56.	<p>The table below highlights this increase for the Independent Sexual Violence Advisors (ISVA) and counselling services, since 2010/11.</p> <table border="1" data-bbox="480 1491 1184 1908" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th style="text-align: center;">Year</th> <th style="text-align: center;">ISVA Services</th> <th style="text-align: center;">Counselling services</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">2010/11</td> <td style="text-align: center;">1,214</td> <td style="text-align: center;">1,449</td> </tr> <tr> <td style="text-align: center;">2011/12</td> <td style="text-align: center;">1,629</td> <td style="text-align: center;">1,586</td> </tr> <tr> <td style="text-align: center;">2012/13</td> <td style="text-align: center;">1,661</td> <td style="text-align: center;">1,945</td> </tr> <tr> <td style="text-align: center;">2013/14</td> <td style="text-align: center;">2,120</td> <td style="text-align: center;">2,286</td> </tr> <tr> <td style="text-align: center;">2014/15</td> <td style="text-align: center;">2,386</td> <td style="text-align: center;">2,731</td> </tr> </tbody> </table>	Year	ISVA Services	Counselling services	2010/11	1,214	1,449	2011/12	1,629	1,586	2012/13	1,661	1,945	2013/14	2,120	2,286	2014/15	2,386	2,731
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57.	<p>The ISVA service offers any support that is required such as emotional support, they can refer victims for counselling, assess needs and decide in partnership what type of support is required. The increasing demand on specialist sexual violence services has resulted in significantly longer waiting lists for counselling (currently between 6-9 months for all specialist agencies across the region). All Consortium member agencies have experienced not only this increase in demand for services, but also significantly more complex caseloads being referred to them for both the ISVA and counselling services. An example in relation to increased pressure on the ISVA service is not only the increase in referrals, but also the increase in the duration clients need the service as a direct result of the increase in waiting time from report to court (currently between 18-24 months). This increase has inevitably escalated pressure on ISVA services. In addition, funding cuts across statutory and voluntary sector services have resulted in the loss/dramatic reduction of services that victims may otherwise have engaged with, for example, mental health services such as Psychological and CAMHS Services.</p>
Priorities	
58	<ul style="list-style-type: none"> • reduce waiting lists for counselling by up to 50% in six months, including increasing capacity via therapeutic groups. • standardise the provision of services to children aged 5+ across the West Midlands region • enable ongoing partnership work across the region, developing robust pathways between specialist abuse services and other partners, which minimises duplication and creates streamlined pathways for victims/survivors • Increase the capacity of the child and adult psychotherapeutic counselling services to enable us to achieve a reduction in current wait lists • Increase psychological support • Increase the women and girls counselling service capacity to achieve a reduction in current waiting lists • Build the capacity of the Volunteer counselling Service to support the reduction in counselling waiting times across all client groups • Increase the number of Independent Sexual Violence Advisors/Children's Independent Sexual Violence Advisors • Helpline
Outcomes	
59.	<p>Outcomes that the OPCC will be looking for include:</p> <ol style="list-style-type: none"> 1. survivors have better health and well-being 2. survivors are more in control of their lives 3. survivors are more able to keep themselves safe 4. survivors are more able to access further support 5. survivors are more able to develop and maintain positive relationships with those who matter to them 6. survivors are more able to assert their views and their rights
The Commissioner has allocated	
60.	<ul style="list-style-type: none"> - £59,078 to Crisis Point in Walsall and Wolverhampton for the provision of practical and emotional support to vulnerable victims of sexual abuse - £102,492 to Coventry Rape and Sexual Abuse Centre (CRASAC) for the provision of outreach, specialist support and counselling services in Coventry for vulnerable groups of BME women and young girls from the age of 11 who are victims of rape

	or sexual violence
	CHILD SEXUAL EXPLOITATION
61.	The Home office recently raised CSE to the status of a national threat in the strategic policing requirement so that it is prioritised by every police force. The official definition of sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child's immediate recognition; for example being persuaded to post sexual images on the Internet/mobile phones without immediate payment or gain.
62.	In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social/economic and/or emotional vulnerability. This definition of child sexual exploitation was created by the UK National Working Group for Sexually Exploited Children and Young People (NWG) and is used in statutory guidance for England. See the following link for an insight from a young person: https://www.youtube.com/watch?v=E4xpL77ksr0&feature=youtu.be
63.	The See Me, Hear Me campaign was launched in June 2014 by Dudley, Wolverhampton, Sandwell, Walsall, Coventry, Birmingham and Solihull councils, along with West Midlands Police and other partners, to raise awareness of child sexual exploitation and a link to their website is here http://www.seeme-hearme.org.uk/index.html and part of the role of the Commission will be to raise awareness of the website.
64.	<p>The Victims Commission's starting point was to get a greater understanding of what support services exist for victims of CSE in the West Midlands. By understanding the current level of provision, the Commission can offer informed recommendations to the Commissioner about future CSE service delivery in the West Midlands. Services for victims of crime are organised thematically within local authority areas. There is no consistent service provision across the West Midlands other than through statutory agencies, primarily West Midlands Police (WMP). One of the aims of this event was to unpick systems, processes, working practice and communication in each area.</p> <p>The main themes to emerge from the event were:</p> <ul style="list-style-type: none"> - Service provision, systems and processes: there is no clear understanding of what services are available or how they are co-ordinated. Support pathways for victims are not clear and should include both direct and indirect counselling. Services need to address a victim's need and be available when the victim needs them. Outcomes frameworks pressure providers to deliver outcomes, not necessarily appropriate interventions. Shared outcomes/interventions may improve services. Success needs to be defined. Success for agencies and for young people may differ and may not always include a criminal justice outcome. Models that rely on victim, location and offender may lose the victim in the prosecution process. The CJS needs to be joined up and victim focused. - Partnership working: statutory and voluntary agencies need to work closely together, pooling knowledge, resources, risk and success. Information sharing

	<p>would encourage shared culture and better understanding of service provision. It is felt that public confidence would increase if the statutory and voluntary sector worked together. Professionals need to trust each other and the victim. Communities should challenge offenders and support victims. Agencies should support this process working with community/faith leaders.</p> <ul style="list-style-type: none"> - Funding: as the voluntary sector loses funding, it loses skills. Increased funding is seen as increasing capacity and capability in the sector. - Education: there is a role for schools and educational establishments here. They are key to identifying CSE and mitigating its effects. It should be the national driver, focussing on safer and healthier relationships, helping young people protect themselves and recognise CSE. Parents have a safeguarding role and should be upskilled to support children. People need to be educated about the role that social media plays in supporting CSE. - Criminal Justice System: consultation between the police and CPS needs to start early with an appropriate sensitive approach. Specialist prosecutors and a greater use of special measures would ameliorate secondary victimisation through the CJS process. - Victim/offender identification: a common screening tool is needed to identify victims and offenders. Professionals can be confused about identifying victims and/or offenders, particularly when it comes to peer grooming. The police have a role in identifying those young people who move between victim and offender status. There are no rehabilitation programmes for any offenders engaged in CSE. YOTs are essential in building relationships with offenders who may also be victims. YOTs need to develop offender orders which challenge and mitigate the impact of CSE. Young male offenders need support to deter inappropriate behaviour as they age. Female offenders are disadvantaged by the CJS, only receiving assistance once inside the system. There is no oversight of services for offenders. There is limited or no understanding of probation services and response from community rehabilitation companies. Prevention work is essential. - Significance of time in responses to CSE: time factors are significant to service provision in that services should be provided at the point in the victim's journey that the victim wants to access them. Services should match the pace of the victim with longer term therapeutic interventions available when the victim wants to access them and for as long as necessary. This will empower victims to make decisions about their future. Longer term support needs are not currently acknowledged. While longer time scales are seen as essential for effective therapeutic support, a swift response is required to disclosures and concerns. <p>This work is on-going and links into the work of the PVVP Board through the Regional Strategic CSE Coordinator. The OPCC will propose services that address the needs of children and young people affected by CSE once the scoping and gaps in provision analysis is completed.</p>
	<p>MODERN DAY SLAVERY</p>
65.	<p>Modern Slavery can take many forms including the trafficking of people, forced labour, servitude and slavery. Any consent victims have given to their treatment will be irrelevant where they have been coerced, deceived or provided with payment or benefit to achieve that consent. Children (those aged under 18) are considered victims of</p>

	<p>trafficking, whether or not they have been coerced, deceived or paid to secure their compliance. They need only have been recruited, transported, received or harboured for the purpose of exploitation.</p> <p>The term Modern Slavery captures a whole range of types of exploitation, many of which occur together. These include but are not limited to:</p> <ul style="list-style-type: none"> - Sexual exploitation This includes but is not limited to sexual exploitation and sexual abuse, forced prostitution and the abuse of children for the production of child abuse images/videos. 42% of all reported trafficking victims in the UK are victims of sexual exploitation. - Domestic Servitude This involves a victim being forced to work in usually private households, usually performing domestic chores and childcare duties. Their freedom may be restricted and they may work long hours often for little or no pay, often sleeping where they work. 24% of all reported victims of domestic servitude in the UK are children. https://www.youtube.com/watch?v=rKWCdsoTk1I - Forced labour Victims may be forced to work long hours for little or no pay in poor conditions under verbal or physical threats of violence to them or their families. It can happen in various industries, including construction, manufacturing, laying driveways, hospitality, food packaging, agriculture, maritime and beauty (nail bars). Often victims are housed together in one dwelling. Over a third (36%) of reported victims of Modern Slavery are subject to forced labour. One fifth of all reported forced labour victims are children – an increase of 24% since 2012. Three quarters of all reported forced labour victims are male. - Criminal Exploitation This can be understood as the exploitation of a person to commit a crime, such as pick-pocketing, shop-lifting, cannabis cultivation, drug trafficking and other similar activities that are subject to penalties and imply financial gain for the trafficker. 16% of reported Modern Slavery victims are also involved in fraud or financial crime whereby perpetrators force victims to claim benefits on arrival but the money is withheld, or the victim is forced to take out loans or credit cards.⁵ Cannabis cultivation is the next most common form of criminal exploitation – and 81% of those exploited are children, most of whom are from Vietnam.⁶ - Other forms of Exploitation Organ removal; forced begging; forced benefit fraud; forced marriage and illegal adoption.
66.	<p>The Modern Day Slavery Act, the first of its kind in Europe, received Royal Assent on 26 March 2015. The act consolidates slavery and trafficking offenses and introduces tougher penalties and sentencing rules. While Modern Slavery covers a range of complex issues that are often hard to detect, it is important the public are aware that such abuses can take place and that victims have a right to identification and support.</p>
67	<p>The West Midlands Anti-Slavery Network (WMASN) is an organisation that exists to ensure a collaborative and partnership approach to the issues of Modern Slavery. It provides an ability to ensure a root to branch model including the provision of information and data, identification and rescue of victims, supporting law enforcement prosecutions and ensuring victims receive the appropriate aftercare service. This is all</p>

	in addition to knowledge building, research and the sub group work such as child trafficking and CSE.
68.	There is no other organisation in the West Midlands that brings all the statutory and non- statutory organisations together to ensure a coherent and collaborative partnership response to every issue of Modern Slavery.
	The Need
69	Earlier this year the Government estimated that there were between 10,000 and 13,000 victims of trafficking in the UK at any one time. Last years (2014) NRM referrals (a process set up by the Government to identify and support victims of trafficking in the UK).numbered 2,340 so there is still a huge gap in those trafficked and those being rescued. This then in turn links to the numbers of victims rescued against the number of crimes registered, investigations, prosecutions and convictions and the seizure of criminal assets.
70.	The Home Office Modern Slavery Strategy here advocates partnership working as does the Independent Anti-Slavery Commissioners Strategic Action Plan which can be found here .
71.	West Yorkshire Police and more recently Greater Manchester have seen the importance of working in partnerships and adopted models similar to the West Midlands Anti-Slavery Network. The PCC's in both forces fund and support the partnerships. West Yorkshire has the highest number of referrals now and GMP are on a par with the West Midlands. This is due to the work the WMASN do together with the work of West Midlands Police. NRM figures in the West Midlands to date this year is almost 200 and a sharp rise from last year. This is due to working more closely together and the fact that working collaboratively means we can do a lot more to address the issues of trafficking. However, the current analytical work being conducted in the West Midlands acknowledges there is room to improve.
72.	Since 2009, the WMASN has been the sole source of multi -agency partnership working providing West Midlands Police with information, data and learning regarding the issues of modern slavery. This in part has led to the knowledge and awareness of modern slavery, effective working with West Midlands Police, its inclusion into the Sentinal work and the recent modern day slavery Conference. The WMASN is seem as one of the leading networks in England.
73.	The West Midlands is a key hub for modern slavery and human trafficking in the UK and the NRM data and National Crime Agency intelligence reflects this. Partnership working in order to gather information and data, ensures collaboration with all organisations who may encounter human trafficking i.e. NGOs, charities, housing associations, multi-cultural groups, faith groups and more recently safeguarding boards and local authorities is essential. The WMASN is also starting to include the business sector. This has started with the Chamber of Commerce and a large national construction company who have just won a funding bid to service 34,000 local authority houses.
74.	The WMASN brings all these agencies together and ensures a coherent collaborative response to Modern Slavery in the West Midlands. This includes providing and resourcing the information and data to identify and rescue victims of human trafficking in the West Midlands. Once rescued most victims enter the NRM aftercare system that is funded by the Home Office. This aftercare exists on average for 45 days as per the NRM procedure. It is recognised that this is often insufficient in terms of ensuring the

	victim/survivor is able to recover and reintegrate into society in the UK or abroad.
	Aftercare
75.	<p>The WMASN is in a unique position to collaborate with existing and emerging partners including the Police, Salvation Army, aftercare sub-contractors and other specialised resources and identify the exact gaps in provision of victim support and care and ensure a partnership approach to provide appropriate cost effective provision for the victims of modern slavery in the West Midlands.</p> <p>Priority</p> <ul style="list-style-type: none"> - Develop a West Midlands multi agency response to modern day slavery working with the West Midlands Modern Day Slavery Network. - Put in place support services for survivors through multi-agency working.
	HATE CRIME
76.	<p>Hate Crime is any criminal offence committed against a person or property that is motivated by hostility towards someone based on their actual or perceived disability, race, religion, gender identity or sexual orientation, which is a factor in determining who is victimised. It can be based on prejudice, misunderstanding, and or hostility and in some cases extremist views against particular groups, affecting the whole community. The experience of prejudice and hate isn't limited to one particular group and hate crimes are committed on the grounds of prejudice against Race, Religion (including faiths / beliefs), Sexual Orientation, Gender Identity and Disability.</p>
77.	<p>The offences are under reported across all types of hate offences and in the West Midlands, race hate recorded crime accounts for the majority of overall recorded hate crime, followed by homophobic, religious, disability and transgender. The majority of Hate Crime offences are classified as violent offences, which occur following disagreements or arguments over a variety of issues and hate crime victims are often identified as repeat victims, with the vast majority of recorded hate crime victims being male. A number of factors will influence whether a victim reports a Hate Crime to the police, including, whether or not the victim thought that the crime was serious enough to report, whether or not they think the police would or could respond to the crime, if the victim was aware the offence had occurred and also the victim's relationship to the perpetrator.</p>
78.	<p>Further research has also suggested that victims of Hate Crime will suffer from psychological stress such as depression, anxiety and feelings of heightened vulnerability. In comparison to other crimes, hate crime victims are more likely to be fearful, expect to be targeted for additional offences, and are less likely to visit the area where they became the victim.</p>
79	<p>Stop Hate UK are the current representatives for this area on the Victim Commission. They are a national charity providing a range of services including 24/7 reporting services, advocacy and training services to increase awareness and understanding of all forms of hate crime. Within the West Midlands they currently provide their Stop Hate Line reporting service in Birmingham, commissioned by Birmingham City Council.</p>

	Data for Hate Crime 2014-15 and year to date:																					
	<table border="1"> <thead> <tr> <th>Type of Hate Crime</th> <th>2014/15</th> <th>2015/16 (to date)</th> </tr> </thead> <tbody> <tr> <td>Disability</td> <td>59</td> <td>50</td> </tr> <tr> <td>Homophobic</td> <td>284</td> <td>259</td> </tr> <tr> <td>Racial</td> <td>2676</td> <td>2137</td> </tr> <tr> <td>Religious</td> <td>128</td> <td>105</td> </tr> <tr> <td>Transgender</td> <td>24</td> <td>19</td> </tr> <tr> <td>Total</td> <td>3203</td> <td>2589</td> </tr> </tbody> </table>	Type of Hate Crime	2014/15	2015/16 (to date)	Disability	59	50	Homophobic	284	259	Racial	2676	2137	Religious	128	105	Transgender	24	19	Total	3203	2589
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80.	It is also recognised from research undertaken as part of the British Crime Survey of England and Wales, further supported by research undertaken by the EHRC and other organisations such as Stonewall that many incidents go unreported due to a number of barriers including lack of recognition by victims, fear of reprisals, past experience of the police and the wider criminal justice system and people not been aware of how or where they can report incidents.																					
81.	As part of the scoping to find out what referral pathways exist for victims in the West Midlands, the OPCC held a conference titled Shaping Services for victims of hate crime 2015-16 and Beyond: A Collaborative Approach, on 23 August 2015. The event was held in Birmingham and was attended by organisations from across the West Midlands to understand levels of service provision, gaps and barriers. It was chaired by DPCC Yvonne Mosquito & ACC Carl Foulkes.																					
	So what did we find out?																					
82.	The full report of the event is available, however key issues include the view that there are few accessible voluntary sector support services available for victims of hate crime within the West Midlands. Service provision is disparate with victims often sourcing support from agencies that provide services for a specific group rather than from an agency that specialises in supporting victims of hate crime. The emphasis for support is on and often remains dependent on the protected characteristic.																					
83	As a group, victims of hate crime are underrepresented in terms of reporting crime and receiving support. It is not clear whether victims are aware of the choices available to them in reporting hate crime and receiving support. Third party reporting centres are a way of people reporting incidents and they have been introduced across the force area. The under reporting of hate offences means a clear understanding of why offences take place in the first instance is not available and it is also difficult to provide an accurate overall profile of hate crime victim characteristics from the limited data that is available. In order to rectify this situation and gain a better understanding of the relevant issues, West Midlands Police and partner agencies will continue to work together to understand why hate crime occurs. The reporting centres are typically already established groups and third sector organisations who may come in to contact with these communities as part of their day to day work.																					

84.	Once a report is made, the person taking the report will submit the information online via the True Vision website http://www.report-it.org.uk/home The website allows you to find out what hate crimes or hate incidents are, find out about the ways you can report them, report using the online form and importantly, find information about people that can help and support you if you have been a victim. This means that these groups are empowered to make reports of hate crime and hate incidents on behalf of their service users or community members. West Midlands is seen as best practice around the website and use of the data that we use to respond to the needs of victims that are identified.
Priority	
85.	An improvement in specialist hate crime support services will only take place when the gap between supply and demand is identified. If needs remain hidden for whatever reason, services cannot develop to match unexpressed need. A co-ordinated West Midlands wide approach with the statutory and voluntary sector working together to create a support network that encourages victims to choose how they would prefer to be supported to cope and recover from their experience of hate crime would be welcome in terms of identifying needs and improving outcomes for victims. This would help address unexpressed and unmet needs and create a robust response to isolation and community disengagement.
86.	In addition to the event, meetings and focus groups have taken place with agencies including Victim Support, Race and Equality Sandwell, Summit House, Stop Hate UK and West Midlands Police and Birmingham Local Police and Crime Board to consider the needs of victims of hate crime, referral pathways and the availability of support across all strands of hate crime.
87.	Further meetings have taken place with the Force and Stop Hate UK to consider what a West Midlands response to Hate Crime should look like. We will look at utilising existing 3 rd party reporting centres across the West Midlands to provide a consistent and coherent service across the area that provides communities with a range of methods to report incidents and access support. In addition we will campaign to raise the profile of the True Vision website and the feasibility of the Stop Hate UK helpline across the West Midlands.
FEMALE GENITAL MUTILATION	
88.	This is a priority area that the Victim Commission acknowledged we needed further information on. We needed to find out what voluntary sector provision was available in the West Midlands for victims of FGM. We wanted to understand a victim's needs both emotionally and practically, including the needs of potential victims.
BACKGROUND	
89.	The following information has been obtained from www.fco.gov.uk/fgm 'female genital mutilation - the facts', the Government Equalities Office Factsheet and HM Governments ' Multi-Agency Practice Guidelines: Female Genital Mutilation'. Female Genital Mutilation (FGM) comprises all procedures involving the partial or total removal of the external female genitalia or any other injury to the female genital organs for non-medical reasons.

90.	<p>There are four known types of FGM, ranging from a symbolic prick to the vagina to the fairly extensive removal and narrowing of the vagina opening.</p> <ul style="list-style-type: none"> - Type 1 – removal of the clitoral hood with or without the removal of the clitoris - Type 2 – removal of the clitoris and partial or total removal of the vaginal lips - Type 3 – removal of the clitoris, vaginal lips and stitching of the vagina, leaving a 1 – 2 cm opening - Type 4 – piercing the clitoris, cauterisation, cutting the vagina, inserting corrosive substances <p>All four types of FGM have been found in the UK.</p>
91	<p>The World Health Organisation (WHO) estimates that three million girls undergo some form of the procedure every year. It is practiced in 28 countries in Africa and some in the Middle East and Asia. FGM is found in the UK amongst members of migrant communities. It is estimated that up to 24,000 girls in the UK, under the age of 15 are at risk of FGM. However, the age at which FGM is carried out varies according to the ethnic group, and can be from birth, during childhood, adolescence, at marriage or during the first pregnancy. However, girls within the ages of five and eight years are considered to be at high risk.</p>
92.	<p>The Female Genital Mutilation Act of 2003 makes it illegal to practice any form of FGM in the UK. It is illegal to take girls who are British nationals or permanent residents of the UK abroad for FGM whether or not it is lawful in that country. It is also illegal to aid, abet, counsel or procure the carrying out of FGM abroad. There is a penalty of up to 14 years in prison and/or a fine. The 2003 Act replaced 'The Prohibition of Female Circumcision Act' of 1985; however, there have been no prosecutions in either England or Wales since either legislation was introduced. Usually it is a girl's parents and/or her extended family that are responsible for arranging FGM. Some of the reasons given for the continued practice of FGM include: protecting family honour, preserving tradition, ensuring a women's chastity, cleanliness and as a preparation for marriage. Although FGM is often seen as act of love, rather than cruelty, it can have very serious consequences for the woman's health, particularly during childbirth and in some instances can lead to death.</p>
93.	<p>FGM is often performed in very primitive conditions by traditional circumcisers, with little or no anaesthetic used and using special knives, scissors, razors or pieces of glass. In the more severe forms of the procedure healing can take up to 40 days. However, more than 18% of all FGM is performed by health care providers, and this trend is increasing.</p>
94	<p>It is believed that FGM happens to British girls in both the UK as well as overseas (often in the family's country of origin). Girls of school age are subjected to FGM overseas are thought to be taken abroad at the start of the school holidays, particularly in summer, in order for there to be sufficient time for her to recover before returning to her studies.</p>

95.	<p>Indicators that a girl may be at risk of FGM are:</p> <ul style="list-style-type: none"> - The family come from a community that is known to practise FGM - Parents planning to take the child out of the country for a prolonged period – school holidays – child may talk about a long holiday to a country where the practise is prevalent - Child may confide that she is to have a special procedure or celebration - The position of the family and the level of integration within UK society – it is believed that communities less integrated into British society are more likely to carry out FGM - Any girl born to a woman who has been subjected to FGM is considered at risk, as must other children in the extended family. - Any girl withdrawn from Health Education or Personal and Social education may be at risk as a result of her parents wishing to keep her uninformed about her body and rights. - It may be possible that families will practise FGM when a female family elder is around, particularly when visiting from a country of origin. - In conversation – a girl may tell other children about it. <p><i>The information above has been taken from: www.fco.gov.uk/fgm 'female genital mutilation - the facts', the Government Equalities Office Factsheet and HM Governments 'Multi-Agency Practice Guidelines: Female Genital Mutilation'.</i></p>
	<p>So what are we doing?</p>
96.	<p>This link details the work taking place by West Midlands Police using FGM Protection Orders as reported in the Birmingham Mail on 30 September 2015.</p>
97.	<p>To support the work taking place by statutory agencies, a morning session took place on the 25 June 2015 where we had excellent representation from across the voluntary and community sector, the statutory sector from health and local authority and West Midlands Police. The discussion was formed in such a way as to harness each attendee's expertise to try and build up a complete picture of a victim's needs at different stages in their lives. Attendees agreed to be a workgroup for this area of work. This is the start of a campaign around the FGM stream and will be led by the Deputy Police and Crime Commissioner, working in partnership with the voluntary and statutory sector representatives on the group. The workgroup includes representation from West Midlands Police, the voluntary and community sector, health and other statutory agencies.</p>
98.	<p>The OPCC is represented on the PVVP FGM Taskforce to ensure there is no duplication in the work that is taking place. A key issue is the lack of support services that are available to communities across the West Midlands.</p>
99.	<p>The Commissioner currently funds Allies Network Ltd £54,860 for a community based project based in Birmingham working with women in communities where FGM is practiced.</p>

HONOUR BASED VIOLENCE/FORCED MARRIAGE	
100.	<p>Honour based violence is a violent crime or incident which may have been committed to protect or defend the honour of the family or community. It is often linked to family members or acquaintances who mistakenly believe someone has brought shame to their family or community by doing something that is not in keeping with the traditional beliefs of their culture. For example, honour based violence might be committed against people who:</p> <ul style="list-style-type: none"> - become involved with a boyfriend or girlfriend from a different culture or religion - want to get out of an arranged marriage - want to get out of a forced marriage - wear clothes or take part in activities that might not be considered traditional within a particular culture
101.	<p>Women and girls are the most common victims of honour based violence however it can also affect men and boys. Crimes of 'honour' do not always include violence. Crimes committed in the name of 'honour' might include:</p> <ul style="list-style-type: none"> - domestic abuse - threats of violence - sexual or psychological abuse - forced marriage - being held against your will or taken somewhere you don't want to go - assault
102.	<p>A forced marriage is one that is carried out without the consent of both people. This is very different to an arranged marriage, which both people will have agreed to. There is no religion that says it is right to force you into a marriage and you are not betraying your faith by refusing such a marriage.</p>
103.	<p>Discussions at the Commission highlighted that our voluntary sector representatives are dealing with this issue when women present as victims of domestic or sexual abuse with a number of complex needs.</p>
104	<p>Karma Nirvana, http://www.karmanirvana.org.uk/ is a national organisation supporting victims of forced marriage and honour crimes. They have informed us that the West Midlands generates the second highest level of calls. Investigations have taken place in all LPUs, with the majority taking place to the East and West of Birmingham City Centre. Although this is seen as just an Asian/Muslim issue, HBV and forced marriage has been reported to charities from a wide number of backgrounds. The victim profile in the West Midlands is overwhelmingly Asian/Muslim, however we do need to be aware of other persons at risk. Offenders are usually from the immediate family (or spouse) of the victim. As with FGM, we need to challenge potentially ingrained cultural beliefs.</p>

	Proposed Activity - Awareness Raising
105.	It is important that community engagement and awareness raising is an element of any package to address forced marriage and honour based violence. The way in which we propose to work is to address this through engagement with young people, local communities and professionals working with young people and led by our domestic abuse providers, by way of a 12 month pilot project.
106.	A regional model will ensure capacity development across the agencies that will engage young people aged 16-25 years from across the region, and professionals from education, social services, healthcare, Children Missing in Education, Children's and Young People's Directorate, Crown Prosecution Service and Police.
107	<p>Strand 1 - Raising Awareness of those working with professionals Working directly with professionals across the region to hold a series of workshops and debates on the issue of HBV/FM.</p> <p>The workshops will be discussion-based and involve scenarios to allow participants to discuss and consider how to identify indicators and respond to the risk of FM/HBV.</p> <ol style="list-style-type: none"> 1. create a greater awareness of the issues of HBV/FM; 2. aid early identification of risk and early referral to appropriate agencies/support services. 3. ensure that young people have a safe person to speak to, enabling them to develop strategies and the confidence to seek help and maintain their own safety <p>Strand 2 - An education programme will</p> <ol style="list-style-type: none"> 1. Promote the resources already available to support young people and professionals who may encounter HBV/FM. 2. Produce an information sheet for teachers, to make them aware that children and young people could be missing school as a result of HBV/FM. 3. Provide information in places where young people spend time, promoting the support that is available for people with concerns about HBV/FM, including leaflets and posters with local sources of information and support. <p>Strand 3 - Good practice</p> <p>Embedding good practice at the frontline through 2 regional events we will support front line professionals to have a great understanding of safeguarding procedures, national Forced Marriage Statutory Guidance, FMPO, and new localised good practice standards. It will directly address misconceptions, gaps in knowledge, and how their approach affects implementation. The programme will include dedicated training for professionals who support people with disabilities. In particular, we will focus on:</p> <ul style="list-style-type: none"> - Use of language, preventing alienation of communities and promote effective engagement. - Recognition that well intentioned practice such as talking to the family, could actually be highly dangerous.

	<ul style="list-style-type: none"> - Awareness that young people are apprehensive about talking to professionals, especially fearing judgement and stigma against their communities. - Identifying appropriate support and CJS <p>Strand 4 - Promotional events</p> <p>1) Develop promotional and support materials for professionals and for young people</p> <p>2) Host a conference to be Chaired by the PCC or his designated representative to promote the work of the Regional Group and raise awareness of Violence against Women issues including HBV and FM and Coercion and control</p> <p>The work will be monitored by the OPCC and next steps will be considered by the Victim Commission after evaluation of the pilot.</p>
	FATAL ROAD TRAFFIC COLLISIONS
108.	The dedicated Family Liaison Team started on the 1st September 2015 and comprises of eight Police Constables dedicated to the role of Family Liaison Officer (FLO). All officers within the team have been selected and chosen for their dedication and passion for the role and receive a week of specialist training to enhance already developed existing skills. The primary aim for the unit is to ensure that the voice of the family that it serves is heard within the investigation process. This will improve service delivery and the officer's ability to focus on the needs of the bereaved family.
109.	This model offers police services the opportunity to deliver a real family focused service while remaining cost effective. Taking a lead from our 'Victim Services Strategy' document and the development of the Victims Commission, the Force value the thoughts and suggestion from our communities and are very keen for these voices to have an opinion in how the department should operate, guiding and ensuring we improve the service we provide in the future.
110.	The unit have held focus groups that will have an integral part in the development of the unit and direction and was supported by organisations such as the Crown Prosecution Service, Coroner's Office and relevant bereavement charities, but more importantly by the relatives of victims.
111.	The department is the first within the UK, and recognises the responsibility that they have to ensure they achieve the main goal of putting victims first. The PCC is fully supportive of the new department.
112.	Working alongside the Unit is BRAKE, who offer a helpline service for anyone in the UK who has been bereaved or seriously injured in a crash or their carers', whether the crash was recent or a long time ago. They are currently funded nationally by the Ministry of Justice. Funding for 2016-17 has not yet been announced, however it may be a possibility that PCCs may be approached to contribute individually for the service, if as last year, funding is reduced. A link to the website is here: http://www.brake.org.uk/victim-support/helpline-for-road-crash-victims

113.	All PCCs have received a letter requesting £1,500-£2,000 for this financial year which the Commissioner has approved. The OPCC will continue to monitor progress of the new department, their referral pathways and how they work with BRAKE.
	BUSINESS CRIME
114.	Business crime is a priority for the PCC and he recognises that successful businesses are the life blood of prosperous communities. Crime plays a significant role in a business's development as it can cause high costs and damage to companies. Small and Medium Enterprises (SMEs) are particularly vulnerable when they are victims of crime, as it can force businesses to stop trading. The consequences of businesses closing have a negative effect on the economy and a direct impact on suppliers and buyers to those businesses.
115.	Business crime has been described as a victimless crime but this is certainly not the case. Not only does business crime affect the individual business concerned, it affects people employed at the business through a loss of jobs or investment and everyone pays a price.
116.	<p>The PCC has commissioned a service that responds to the individual needs of business and will provide expert support and guidance to businesses who are victims of crime – whether the crime is reported to police or not. The services it offers includes:</p> <ul style="list-style-type: none"> - ensuring that businesses can access the support they need from the first point of contact and at every step of their journey through the provision of a helpline and a one to one service - ensuring that businesses can access services that can help prevent businesses from being a victim of crime in the first place - offering a timely and tailored support service for businesses who have experienced crime - ensuring effective signposting to appropriate and specialist services not only to help the firm deal with the immediate crime, but also to help build resilience against any future incidents - Identifying funding opportunities through which victims of business crime can access funding/support to help keep people in employment and prevent the loss of investment - helping with the writing of a victim personal statement which gives victims an opportunity to explain how the crime has affected them, physically, emotionally, psychologically, financially or in any other way. This can now be read out in court as part of the judicial process - providing security and crime prevention advice as well as giving support with insurance claims and information - helping with ICT recovery and reputational damage - ensuring that businesses have a choice of service access options eg: a telephone helpline, on line, site visit or face to face we will make sure they get

	a service tailored to their needs.
117.	The service is available to all firms/businesses in Birmingham. This is a 6 month pilot project that we are looking to roll out across the other 6 local authority areas after an initial evaluation. It began on the 1 st November and is being monitored by the OPCC, West Midlands Police and an independent business representative on a monthly basis. A link to website is here: http://www.riscassociates.co.uk/blog/support-services-for-victims-of-business-crime/ The OPCC will undertake an independent evaluation of this project as the intention is to roll the project out across the West Midlands once the pilot has finished, dependent on an effective evaluation.
	The Commissioner has allocated £60,000 to the business crime support project.
	Financial Implications
118.	The total budget for Victims Services 2015-16 is £2,344,273. The table below sets out the allocations as discussed in the report.

What for?	Service Provided	Crime Type	Total allocation
Victim Support	1st Contact, Assessment and Referral	Volume Crime	£1,385,000
	Prisoners Earnings Act allocation	Practical support for victims of crime	£48,839
Formal Grant Process	Various services	Priorities of the Victims Commission	£250,000 Link to the decision is here
Recommendations to the PCC from the Victims Commission	Service Delivery		
Sexual Violence	IDVA's and counselling		£320,000
Modern Day Slavery	Development of support services		£50,000
Honour Based Violence/Forced Marriage	Pilot to raise awareness and evidence need		£110,000
FGM	Funding for a community based project		£50,000
Children and Young Peoples' Services	Allocation		£125,434
Fatal Road Traffic Collisions	BRAKE and WMP for resources		£5,000
Total			£660,434
Total Victims Fund			£2,344,273

	Legal Implications
119.	The funding is issued as a grant under s58 of the Domestic Violence, Crime and Victims Act 2004.
120.	Schedule 9 of the Police Reform and Social Responsibility Act 2011 provides Commissioners with the powers to award crime and disorder grants to any organisations and projects they consider will help them achieve their crime prevention and wider priorities.
121	The Police Reform and Social Responsibility Act 2011 states that the PCC must make arrangements for obtaining the views of victims of crime in that area.

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