



PART 2

SEXUAL ABUSE



PART 2 – Introduction

The Sexual Offences Act 2003¹²

The Sexual Offences Act 2003 provides the definition of sexual abuse. The Act covers sexual offences, rape (including those aged 13 and under), assault by penetration and sexual offences. The act outlines sexual offences to those who are particularly vulnerable, including children, familial child sex offences, consent, abuse of positions of trust, individuals with a mental disorder, indecent photography, prostitution, trafficking and sexual grooming.

The National VAWG strategy

The VAWG strategy has a significant number of actions (17 actions) that are specific to sexual abuse and there are an additional 21 actions that refer to VAWG and therefore are also relevant to sexual abuse. Actions for sexual abuse cover all subject areas including awareness raising, preventing abuse online, the provision and commissioning of services, partnership working and changes to the criminal justice system. They are as follows:-

Number	Action	Action owner	Date
7	Develop Government communication resources to help inform local campaigns aimed at raising awareness of VAWG issues.	Home Office	May-16
9	Produce resource pack on women, girls and gangs to support identification of those at risk and effective interventions for frontline professionals.	Home Office	Jun-16
20	Support improvements in responses of health professionals to VAWG for example through roll out of the IRIS programme, free online training and more firmly embedding routine enquiry into domestic abuse in maternity and mental health services. From April 2016 we will begin to introduce sensitive routine enquiry of adverse childhood experiences in a range of targeted services where people who have been abused are likely to present, for example sexual assault referral centres and sexual health clinics.	Dept of Health	From April 2016
21	Take forward with national bodies responsible for the health professional and public health workforce and other stakeholders the recommendation by the Chief Medical Officer that VAWG needs to be included in healthcare undergraduate training.	Dept of Health	Apr-17
22	Work with health arms length bodies and other partners to expand and embed routine enquiry of abuse in childhood and adulthood in certain targeted services such as children's and adult mental health services, sexual health services, SARCs and substance misuse to improve early identification and support, and data for commissioners.	Dept of Health	Autumn 2016
34	Provide funding for core services (IDVAs, ISVAs and MARACs).	Home Office	Mar-17
36	Continued funding for rape support services at current levels in 2016/17 and ensure this funding remains throughout	MoJ	Mar-20
38-42	commissioning, consider pooled budgets, implementing best practice, have a national VAWG team of experts to target localities and work with to develop local strategies. Understand what 'success looks like', use of social bonds in local commissioning and holding services to account		
44	Develop a five year strategy for the commissioning of Sexual Assault Referral Centres (SARCs).	NHS England	Jul-16
45	Continue to invest in service improvements in SARCs and develop national performance indicators to quality assure and bench mark services across England.	NHS England	Apr-16
46	Undertake a deep dive to get an accurate picture of SARC commissioning and provision across England	NHS England	Apr-16
47	Undertake engagement events with CCGs to ensure their understanding of their commissioning role for therapeutic care for victims of rape and sexual abuse	NHS England	April to Oct 2016
48	Republish specification 30 defining the commissioning roles and responsibilities for SARCs.	DH / NHS England / Public Health	Apr-16
78	Continue to explore ways that vulnerable victims and witnesses can give evidence from a location away from the court and consider rolling out pretrial recorded cross-examination in VAWG cases.	MOJ	ongoing to 2020
Actions include reference to VAWG and therefore include sexual abuse			
	Awareness raising	5, 7, 10	
	Preventing abuse on line	28, 29, 30, 31	
	Provision of services	35, 37	
	Commissioning of services	43, 50, 52, 53	
	Partnership working	62, 63, 66	
	Improvements to CJP	90, 91, 92, 94, 95	

¹ http://www.cps.gov.uk/news/fact_sheets/sexual_offences/

² <http://www.legislation.gov.uk/ukpga/2003/42/contents>



Sexual abuse data

In order to better understand the extent of sexual abuse in England and Wales, and here in Sheffield the following data sources were reviewed:

1. The Crime Survey of England and Wales – which provides estimations of the number of victims of actual sexual assault since the age of 16 years and victims in the last 12 months.
2. The recorded police incidents database - police data shows sexual assaults reported and recorded as crimes by the police and outcome of the crime.
3. The Public Health Outcomes Framework indicators
4. Crime Prosecution data

This section includes information on sexual assault, rape, sexual coercion, sexual bullying, trafficking and sexual exploitation.

Sexual assaults may be committed by perpetrators who may be known (a partner, an ex-partner, a family member or an acquaintance) or unknown to the victim.

The next section will show that there is a disparity between the two (prevalence and reported incidents) and therefore it is likely that around 85% of sexual assaults are unreported to the police.



Part 2.1 Sexual Assault / Abuse – Prevalence Estimates

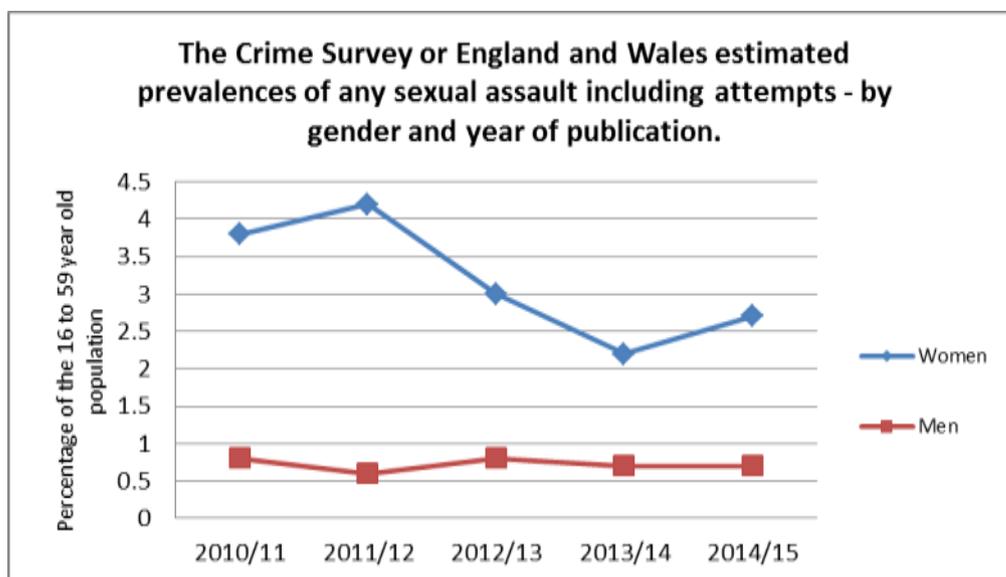
- The national estimated prevalence for sexual abuse is:-
 - 2.7% of women and 0.7% of men estimated to have experienced sexual abuse in the last 12 months
 - equivalent to 448,000 females and 115,000 male victims. *Crime Survey of England and Wales 2014/15*
- Estimated prevalence for Sheffield based on CSEW
 - Around 40,000 victims since the age of 16 (6,600 male & 33,500 female)
 - Around 6,000 victims in the last 12 months (4,800 female & 1,200 males)

Sexual Assault (including attempts) Prevalence³ estimates

Victim in the last 12 months

The CSEW estimate that in the last 12 months 0.7% of men and 2.7% of women aged 16 to 59 years old will have been assaulted sexually (including attempts). When applied to the population this equates to 448,000 female and 115,000 male victims in England and Wales.

The prevalence estimate has varied over the last five year period and these are shown in the graph below. For females the estimate has ranged between 2.2% and 3.8% and for men the range has been between 0.6% and 0.8% of the population in a 12 month period.



The Sheffield estimated prevalence for the number of victims of a sexual assault or attempt sexual assault in the last 12 months

- An estimated 4,763 females or 2.7% of the Sheffield 15 to 59 year old female population were a

³ CSEW published February 2016, 2014/15 data



victim of a sexual assault or attempt sexual assault in the last 12 months. When the variation of prevalence figures over the last five years (2.2% to 4.2%) the range could be between 3,881 to 7,410 females.

- An estimated 1,214 males or 0.7% of the Sheffield 15 to 59 year old male population were a victim of a sexual assault or attempt sexual assault in the last 12 months. When the variation of prevalence figures over the last five years (0.6% to 0.8%) are applied, the range could be between 1,041 to 1,387 males. See the table below for a summary:-

	Males		Females	
Sheffield population (15 to 60 years)	173,430		176,420	
CSEW Rate in the last year	0.70%	1,214	2.70%	4,763
CSEW Highest rate in the last 5 years	0.80%	1,387	4.20%	7,410
CSEW Lowest rate in the last five years	0.60%	1,041	2.20%	3,881

Please note the following:-

- The estimation for Sheffield has applied the CSEW prevalence figures - these figures are estimates and national averages have been applied.
- Sheffield may or may not have a higher incident rate of sexual abuse than the England average. This uncertainty is confirmed by local experts in the field who agreed it is difficult to decipher if Sheffield has a greater likelihood of sexual assault or if the recording of incidents is more effective.
- Therefore the Sheffield prevalence figure can only provide guidance on the number of victims in the last year.
- In order to qualify the quotation of an exact figure and account for the observed fluctuation in rates over the last 4 years the lowest rate, the highest rate and the latest rate for both males and females has been provided.

Victim since the age of 16

The CSEW estimate that in the last 12 months 3.8% of men and 19% of women aged 16 to 59 years old will have been assaulted sexually (including attempts) since the age of sixteen years old. When applied to the population the estimates suggest upward of 3,139,000 female and 625,000 male victims.

The Sheffield estimated prevalence for the number of victims of a sexual assault or attempt sexual assault since the age of 16 years old

The estimation for Sheffield has applied the CSEW prevalence figures. Bear in mind that these figures are estimates and national averages have been applied. Sheffield may or may not have a higher incident rate of sexual abuse than the England average. Again we do not know whether Sheffield has a greater likelihood of sexual assault or if the recording of incidents in the city is more effective, therefore

It is estimated that in Sheffield the number of people who have been a victim of a sexual assault or attempt sexual assault since the age of 16 years old is as follows see table below:-

- An estimated 33,584 females or 19% of the Sheffield 15 to 60 year old female population were a victim of a sexual assault or attempt sexual assault since the age of 16.
- An estimated 6,628 males or 3.8% of the Sheffield 15 to 60 year old male population were a victim of a sexual assault or attempt sexual assault in the last 12 months.



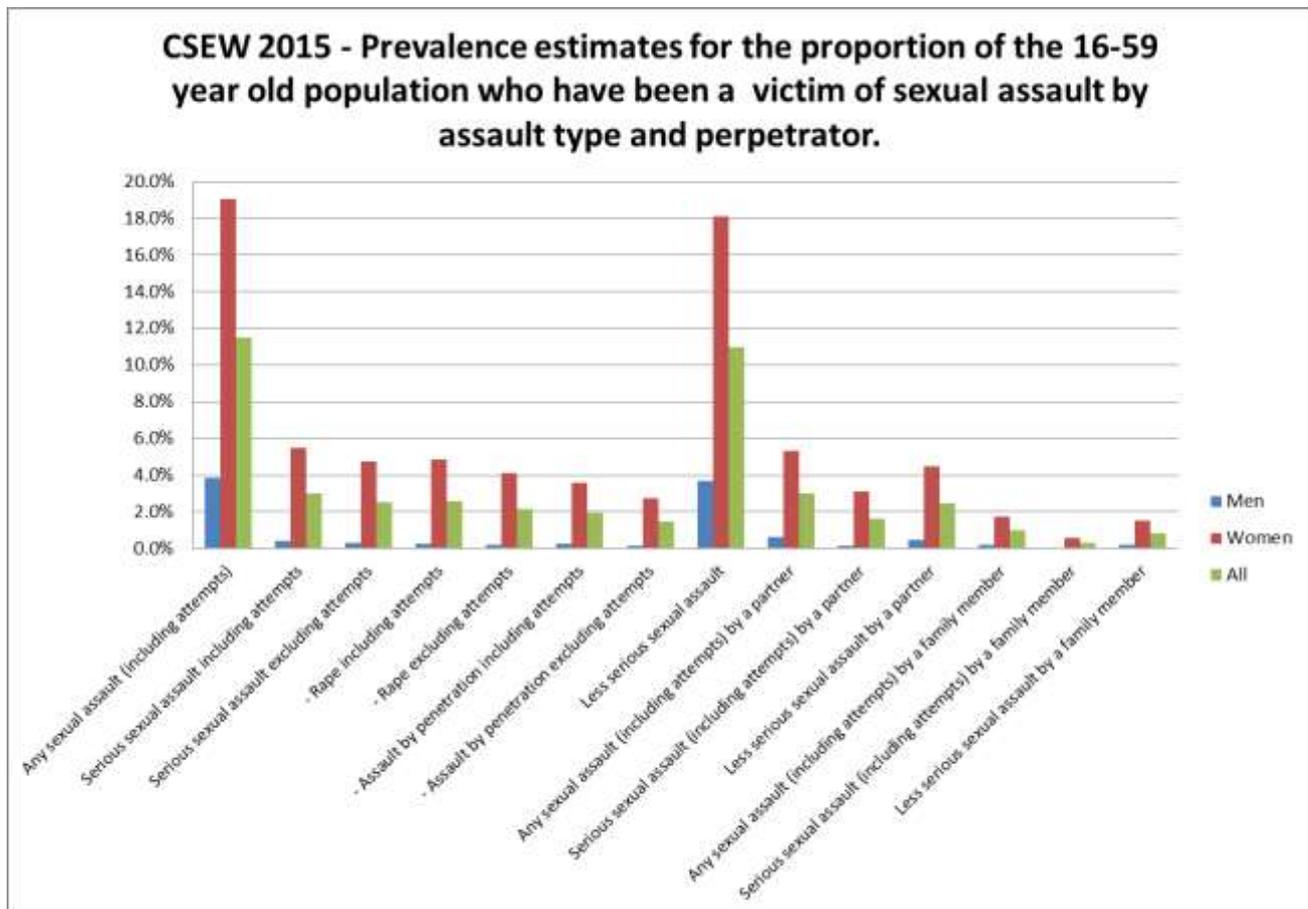
	Males		Females	
Sheffield population (15 to 60 years)	173,430		176,420	
Rate in the last year	3.80%	6,590	19%	33,520

The prevalence rates of sexual assault by type of assault

The CSEW prevalence figures also provide more detailed sexual assault information, in a total of 13 categories; see Appendix 1 for full details. These include serious sexual assault including attempts, less serious sexual assault and rape.

The two graphs below show that:-

- Victims are more likely to be a victim of *less serious sexual assault* than *serious sexual assault* (5.5% females and 0.4% of males of serious sexual assault compared with 18.1% females and 3.7% males since the age of 16 years).



The CSEW provides some further demographic and socio demographic insight into sexual assault.

AGE - The age group with the highest prevalence (or most vulnerability) is those aged 16 to 19 years old. The average for all ages is 0.7% men and 2.7% women but increases to 1.4% men and 9% of women for the youngest age group.

ETHNICITY - The ethnic group with a higher prevalence than the average for all ethnicities (0.7% men and 2.7% women) is the mixed/multiple ethnic groups (5.6% men and 9.3% of women).

MARITAL STATUS – those with single, separated, divorced and widowed status have a higher rate of sexual assault than those who are married / civil partnership and cohabiting.



When sexual assault by partner is observed the CSEW suggests that 16% of victims will have been sexually abused by a partner on one occasion in the last 12 months, 42% more than once, 18% don't know and 26% refused to answer.

Where 'any sexual assault' has been by a partner or family member since the age of 16 years, the perpetrator is three times more likely to be a partner than a family member. For example 5.3% females and 0.6% of males were abused by ex/current partner compared with 1.7% females and 0.2% males by a family member.

EMPLOYMENT STATUS – Male students have a higher prevalence rate of being a victim of sexual assault (2.6%) than those who are employed (0.6%). Unemployed females (4.7%) and students (8.5%) have higher prevalence rates than females who are employed (2.4%).

LONG STANDING ILLNESS / DISABILITY – The prevalence rates are higher for individuals who have a long standing illness / disability than those who are able bodied e.g. 4.3% females and 1.3% males.

The additional social and demographic information provides insight into key areas of vulnerability: the younger cohort, students, those in a less stable relationship, who are inactive in terms of employment and / or have a long standing illness or disability and who are from a mixed/multiple ethnicity group.

Note – all prevalence figures should be used with caution. They provide an indication of the extent of the issue, but are limited by the sample of the CSEW and by those willing to answer.



Part 2.2 Prevalence Estimates - Rape (including attempts)

The CSEW provide estimates for the proportion of individuals who will have been a victim of rape or an attempted rape in the last twelve months and since the age of 16 years. The table below shows three prevalence figures; one for total victims, one for female victims and one for male victims.

National Prevalence estimates for victims of rape and attempted rape						
The percentage of the 16-59 year old population who	A victim since the age of 16			A victim in the last year		
	Men	Women	All	Men	Women	All
- Rape including attempts	0.27%	4.85%	2.58%	0.04%	0.52%	0.28%
- Rape excluding attempts	0.21%	4.09%	2.17%	0.03%	0.32%	0.18%

Victim of rape or attempted rape in the last 12 months

It is estimated that:-

- 0.30% (or 3 in every 1,000 of the population aged 16 to 59 years old) were a victim of rape OR attempted rape in the last 12 months.
- 0.52% (or 5 in every 1,000 of the female population) aged 16 to 59 years old were a victim of rape OR attempted rape in the last 12 months.
- 0.04% (or 4 in every 10,000 of the male population) aged 16 to 59 years old were a victim of rape OR attempted rape in the last 12 months.

Victim of rape or attempted rape since the age of 16 years

It is estimated that:-

- 2.6% (or 2.6 in every 100 of the population aged 16 to 59 years old) were a victim of rape OR attempted rape since the age of 16 years
- 4.8% (or 5 in every 100 of the female population) aged 16 to 59 years old were a victim of rape OR attempted rape since the age of 16 years.
- 0.2% (or 2 in every 1,000 of the male population) aged 16 to 59 years old were a victim of rape OR attempted rape since the age of 16 years.

Victim of rape in the last 12 months

It is estimated that:-

- 0.32% (or 3 in every 1,000 of the female population) aged 16 to 59 years old were a victim of rape OR attempted rape in the last 12 months.
- 0.03% (or 3 in every 10,000 of the male population) aged 16 to 59 years old were a victim of rape OR attempted rape in the last 12 months.

The national prevalence rates applied to Sheffield population figures

The Sheffield estimated prevalence for the number of victims of rape or attempted rape in the last 12 months is around 1,000 individuals aged 15 to 60 years old and of this figure the majority (over 90%) will be female or around 915 in number.

The Sheffield estimated prevalence for the number of victims of rape in the last 12 months is around 600 people aged 15 to 60 years old (this figure is part of the 1,000 above and not an additional figure). Again, of these the majority (over 90%) will be female, or around 560 in number.



Sheffield prevalence estimates for 1. victims of rape and attempted rape in the last 12 months and 2. victims of rape and attempted rape since the age of 16 years old.

The percentage of the 16-59 year old population who were a victim once or more of:	A victim since the age of 16			A victim in the last year		
	Men	Women	All	Men	Women	All
- Rape including attempts	475	8555	9017	66	915	980
- Rape excluding attempts	371	7219	7578	51	564	613
Sheffield 15-60 year old population		349,850				
Sheffield 15-60 year old FEMALE population		176,420				
Sheffield 15-60 year old MALE population		173,430				

The Sheffield estimated prevalence for the number of victims of rape or attempted rape since the age of 16 years is around 9,000 individuals and of this figure the majority (around 95%) will be female or around 8,550 in number.

The Sheffield estimated prevalence for the number of victims of rape in the last 12 months is around 7,600 people aged 15 to 60 years old (this figure is part of the 9,000 above and not an additional figure). Again, of these the majority (around 95%) will be female or around 7,200 in number.

Note – all prevalence figures should be used with caution. They provide an indication of the extent of the issue, but are limited by the sample of the CSEW and by those willing to answer.



Part 2.3 Police Data on All Sexual Assault, Attempted Sexual Assault and Rape

Police Data

Police data reflects the number of recorded crimes for sexual abuse. It does not present the full picture of sexual abuse because:-

1. It only counts the number of times a victim has reported the incident to the police – The CSEW in 2012 reported that only around 15% of female sexual assault victims reported the incident to the police⁴. The reasons why they did not report included being embarrassed, ‘*didn’t think the police could do much to help*’, the incident was ‘*too trivial or not worth reporting*’, or that they saw it as a ‘*private/family matter and not police business*’. **It is suggested here that in 2012 all reported and recorded sexual assault crimes reflect around 15% of total incidents per annum and that 85% of all incidents go unreported to the police.**
2. The police do not record all reported sexual abuse incidents as crimes. The HMIC report of 2014 found that 26% of sexual assault reported incidents were not then recorded as a crime⁵.
3. South Yorkshire police have changed their recording processes, and now record all incidents of sexual assault at the point of contact, where as previously this was not the case and numbers were therefore not captured accurately⁶. This goes some way to explain the observed increase in sexual abuse reported activity and provides more confidence in the data presented.
4. Police data records crimes when they were reported which is not necessarily when the crime took place e.g. reports of historical sexual assault.

National Sexual Abuse Data

In 2015/16 sexual offences in England and Wales accounted for 2.7%⁷⁸ of all offences recorded by the Police.

There were a total of 104,521 sexual assault offences recorded against the sexual offence group by the police in the latest 12 month period (2015/16). This is the highest number per annum over the last five financial years and an increase of 20% or an additional 17,365 offences on the previous financial year (2014/15) when a total of 87,156 were recorded (see table below).

England and Wales						
Year	Other sexual offences	Rape	Grand Total	% change on the previous financial year	% other sexual offences	% rape
2011/12	35,973	16,021	51,994		69%	31%
2012/13	36,563	16,359	52,922	2%	69%	31%
2013/14	42,659	20,725	63,384	20%	67%	33%
2014/15	57,884	29,272	87,156	38%	66%	34%
2015/16	68,915	35,606	104,521	20%	66%	34%

⁴ *An Overview of Sexual Offending in England and Wales*, Ministry of Justice, Home Office & the Office for National Statistics, Published 10 January 2013

⁵ *Crime recording: Making the victim count- The final report of an inspection of crime data integrity in police forces in England and Wales*, HMIC, 2014

⁶ Mr Peter Horner, SCS PPU Policy and Compliance Unit Manager, HQ PPU Carbrook

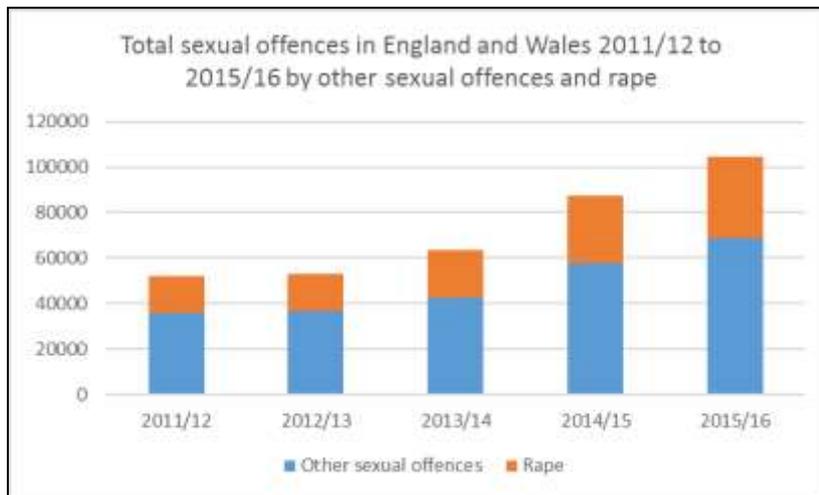
⁷ Police recorded crime open data Community Safety Partnership tables from year ending March 2012 onwards

<https://www.gov.uk/government/statistics/police-recorded-crime-open-data-tables>

⁸ There were a total of 3,835,679 offences and 104,521 sexual offences recorded.



The sexual offences group is the total of other sexual offences (66% of the total sexual offences) and rape offences (33% of the total). The graph below shows the increasing trend. In 2015/16 there were a total of 68,915 'other sexual offences' (+ 11,031 on the previous year and an increase of 19%) and 35,606 rapes recorded (+6,334 on the previous year and an increase of 22%).



The CSEW report explains that the increase is a combination of an improvement in police recording processes, and a number of high profile enquiries and investigations in the public eye resulting in an increased general public awareness and willingness for victims to report.

Sheffield Recorded Sexual Offences

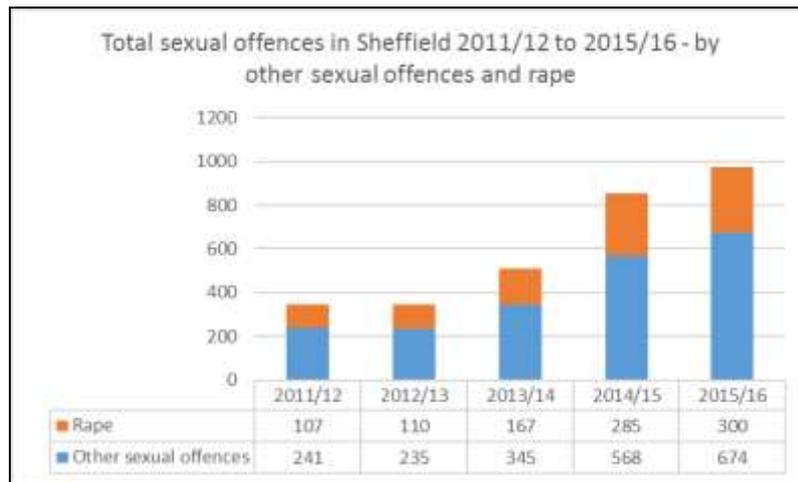
Sheffield had its highest number of recorded offences in the last five years in 2015/16. There was a 14% increase in recorded sexual assaults compared with the activity in 2014/15 but the increase was slightly lower than the 20% observed nationally.

There were 974 total sexual offences recorded in Sheffield during 2015/16 and 300 or 31% were recorded as rape and 674 were 'other sexual offences' (69%)⁹, see table below.

Sheffield						
Year	Other sexual offences	Rape	Grand Total	% change on the previous financial year	% other sexual offences	% rape
2011/12	241	107	348		69%	31%
2012/13	235	110	345	99%	68%	32%
2013/14	345	167	512	48%	67%	33%
2014/15	568	285	853	67%	67%	33%
2015/16	674	300	974	14%	69%	31%

This means in 2015/16 there were an additional 121 sexual offences recorded (+106 sexual offences and +15 rapes recorded than in the previous year 2014/15 when a total of 853 were reported, see Graph to observe trends over the last five years.

⁹ Police recorded crime open data Community Safety Partnership tables from year ending March 2012 onwards <https://www.gov.uk/government/statistics/police-recorded-crime-open-data-tables>



The police explain 'that the reported figures have increased due to more effective recording of sexual abuse crimes at the first point of contact. Therefore there is now increased confidence in the activity numbers now reported for Sheffield.

The police response and management of both victims and offenders has not radically changed on sexual abuse cases, with the same levels of service being delivered during this time¹⁰. However the number of investigators and the Safeguarding Adult Team has been further developed in the public protection units. This gives a greater resilience and increased investigative resources when dealing with future increases'.

What are the estimated total sexual offences in Sheffield if we understand the police get 15% of incidents reported to them?

The CSEW 2013 'An overview of sexual offending in England and Wales' observed that 15% of females who disclosed being a victim of sexual offence in the survey also reported the incident to the police. Therefore, there is a suggestion that the 974 sexual assaults reported in Sheffield in 2015/16, may only reflect around 15% of the total instances that occurred in Sheffield.

Had 100% of instances had been reported, it is estimated around 6,493 incidents could have occurred in Sheffield and therefore a potential and significant volume of 5,519 sexual assaults were unreported.

How does this estimate compare to the prevalence of victims in the last 12 months for Sheffield?

The estimated 6,493 total number of sexual offences (reported and unreported) figure falls within the Sheffield estimated prevalence figure range of 4,922 and 8,797 victims in the last 12 months.

The following assumptions were made regarding this calculation:-

- That the 15% calculation from the 2012 survey data may have changed since that date and in 2014/15 there was more likelihood of reporting incidents to the police (given the increase in police reported incidents and the increased public confidence and awareness in reporting following Operation Yewtree).
- That the same reporting rate of 15% also applies to men.

¹⁰ Mr Peter Horner, SCS PPU Policy and Compliance Unit Manager, HQ PPU Carbrook



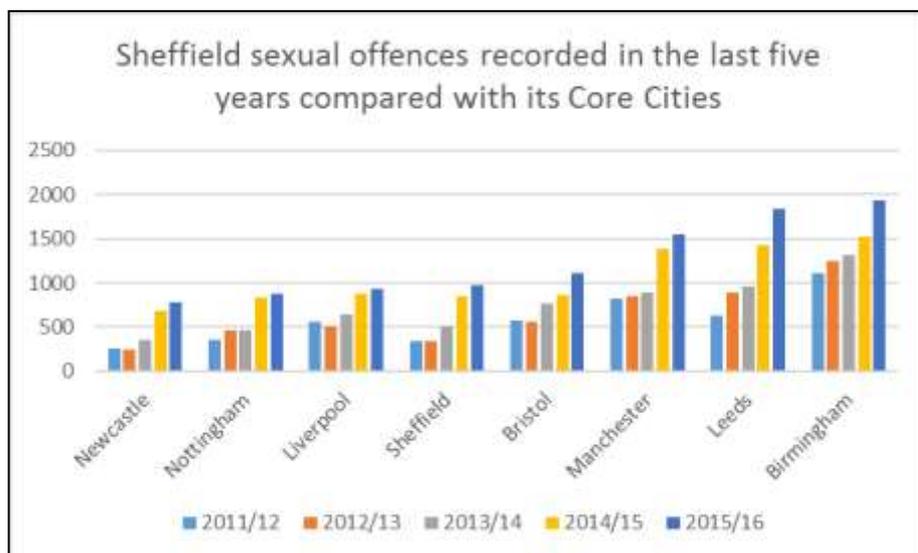
Sexual offences in Sheffield compared with other Core Cities

Sexual offences activity by Core City between 2011/12 to 2015/16 is presented in the table below¹¹. Sheffield is mid table, ranked fourth lowest of eight cities with 974 sexual offences in 2015/16. The cities with the highest sexual offences recorded were Birmingham, Leeds and Manchester.

Sheffield had the third lowest increase of all the eight core cities, at 14% in 2015/16 compared with 2014/15. Five of the cities experienced an increase much higher than the 20% England and Wales' average, e.g. Nottingham experienced a 42% increase in recorded sexual offences.

	2011/12	2012/13	2013/14	2014/15	2015/16	% change between 2014/15 and 2015/16
Newcastle	255	252	349	681	777	40%
Nottingham	362	469	468	841	877	42%
Liverpool	555	511	646	873	926	6%
Sheffield	348	345	512	853	974	14%
Bristol	578	567	770	866	1112	28%
Manchester	818	855	897	1381	1543	12%
Leeds	624	891	958	1421	1833	29%
Birmingham	1114	1242	1309	1518	1937	28%

The graph below shows the increasing trend in sexual offences recorded by the police in the last five years. Increasing trends have been observed by all cities since 2012/13.



Public Health Outcomes Framework¹²

The PHOF indicator 1.12.iii adds to the core city discussion, providing comparisons based on the rate of sexual offences, the indicator measures the - **Violent crime (including sexual violence) by crude rate of sexual offences per 1,000 population**^{13,14}.

¹¹ Police recorded crime open data Community Safety Partnership tables from year ending March 2012 onwards
<https://www.gov.uk/government/statistics/police-recorded-crime-open-data-tables>

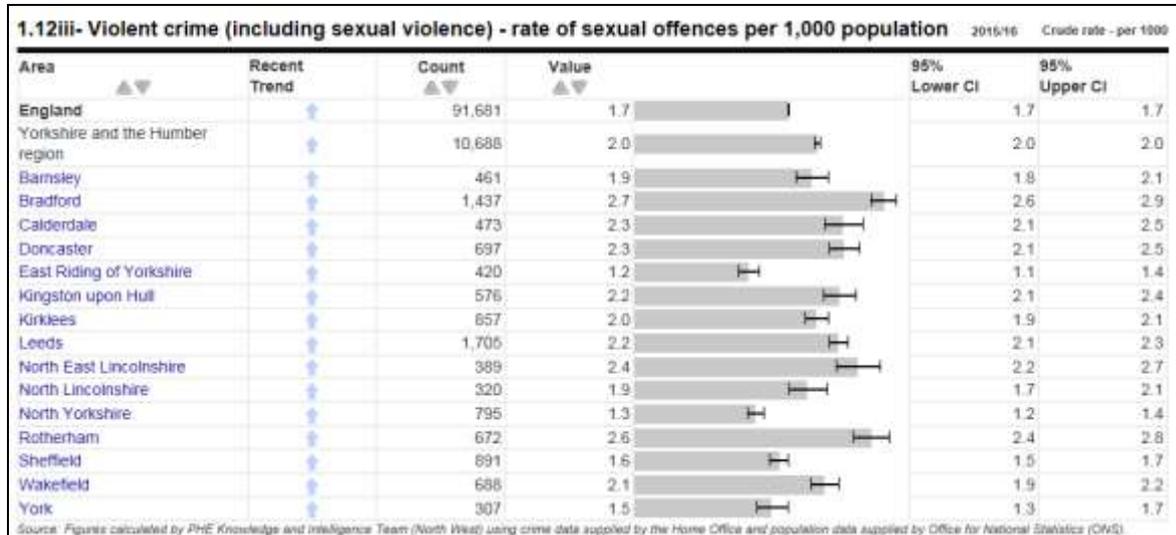
¹² The Public Health Outcomes Framework has three performance indicators that cover violent crime and include sexual violence. The indicators provide a ratio enabling comparisons to the England average, the Yorkshire and Humber regional average and other cities to be made. The PHOF indicators are updated annually and at present (June 2016) contain reported data for the year 2014/15.

¹³ The PHE indicator 1.12.iii does not count Exposure and voyeurism in its list of sexual offences. In 2014/15 Exposure and voyeurism was 76 offences, which when added to the 777 reported from PHE for indicator 1.12.iii equals 853.

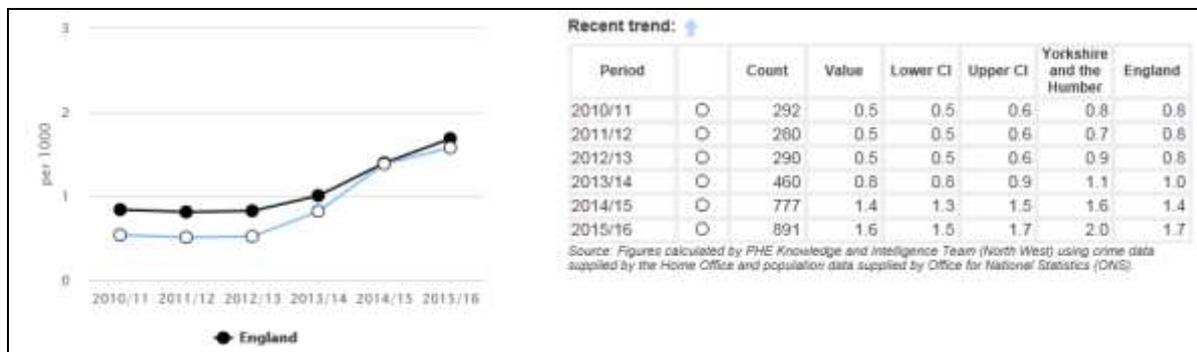
¹⁴ <http://www.phoutcomes.info/>



- The Sheffield rate of violent crime (including sexual violence) was 1.6 per 1,000 populations in 2015/16 which is similar to the England average of 1.7¹⁵ but slightly lower than the 2.0 observed for the Yorkshire and Humber region. It is also a higher rate than the 1.39 per 1,000 populations observed for Sheffield in 2014/15¹⁶.
- Sheffield is ranked 12th in the Yorkshire and Humber region, see the PHE image below.



The image below shows the PHOF indicator for the latest six financial year's periods. Between 2010/11 and 2012/13 Sheffield had a lower rate than England however since this period Sheffield reported violent crime including sexual activity has increased at a faster rate than England from 2013/14 and 2014/15 and therefore resulting in becoming more aligned to the England rate.



Sexual offences by South Yorkshire Police Force areas 2011/12 to 2015/16¹⁷

The table below shows the South Yorkshire Police Force activity for the last five financial years, with Sheffield's data highlighted.

¹⁵ Rate of sexual offences based on police recorded crime data per 1,000 population.

¹⁶ The Indicator 1.12iii rate for Sheffield is calculated using the same data Police recorded sexual offences but excludes data for Exposure and voyeurism'.

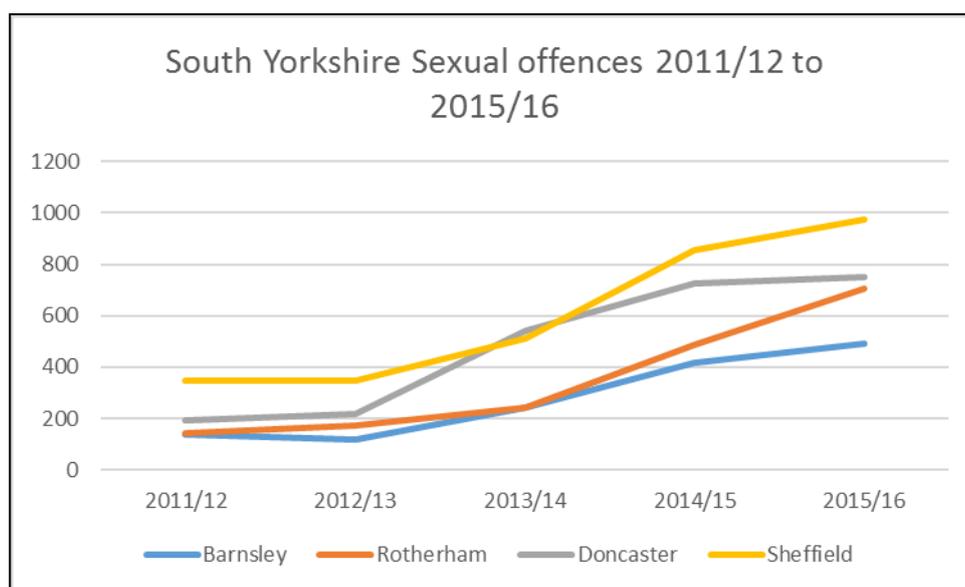
¹⁷ Police recorded crime open data Community Safety Partnership tables from year ending March 2012 onwards <https://www.gov.uk/government/statistics/police-recorded-crime-open-data-tables>



	2011/12	2012/13	2013/14	2014/15	2015/16	% change between 2014/15 and 2015/16
Barnsley	140	117	241	416	489	118%
Rotherham	143	173	245	486	704	145%
Doncaster	193	216	542	725	750	103%
Sheffield	348	345	512	853	974	114%
Total South Yorkshire	824	851	1540	2480	2917	118%

South Yorkshire reported a total of 2,917 sexual offences in 2015/16. This is an 18% increase in the previous financial year when 2,480 offences were recorded. Sheffield’s 974 sexual offences account for 33% of all South Yorkshire activity, and this has remained stable for the last three financial years.

The graph below shows the activity for each South Yorkshire area between 2011/12 to 2015/16.



All four South Yorkshire areas experienced an increase in the number of sexual offences recorded between 2015/16 and 2014/15; however there is a significant difference in the uplift experienced. Sheffield and Barnsley were 14% and 18% higher, but Doncaster remained stable, with an increase of 2% whilst the opposite was experienced in Rotherham with an increase of 45%.

With the current trend increasing year on year, it is highly likely that South Yorkshire will record over 3,000 offences and Sheffield will record over 1,000 sexual offences in 2016/17.

South Yorkshire Activity - Local RaSSO data¹⁸ – A report produced by the Office of the Police and Crime Commissioner monitors the quarterly sexual abuse activity and is the data used to review current sexual abuse activity and trends across the region.

The RaSSO data reported a total of 1,817 sexual assault offences in 2015/16, this is the total for 932 ‘other serious sexual offences’, 443 rape offences for those aged 18 and over and 442 rape offences for under 18 year olds. This is lower than the 2,917 reported in the national police dataset report¹⁹. The number of rapes is the same (932, with the exception of 2 crimes), but the number of other sexual offences is much lower (by 1,098). The reason is because the RaSSO report considers only four of the 16 sexual offences, classifying these (female victim aged 13+, female victim aged

¹⁸ Rape And Serious Sexual Offences Steering Group report Q4 2016, Oliver David Murphy, Office of the Police and Crime Commissioner, South Yorkshire Criminal Justice Board

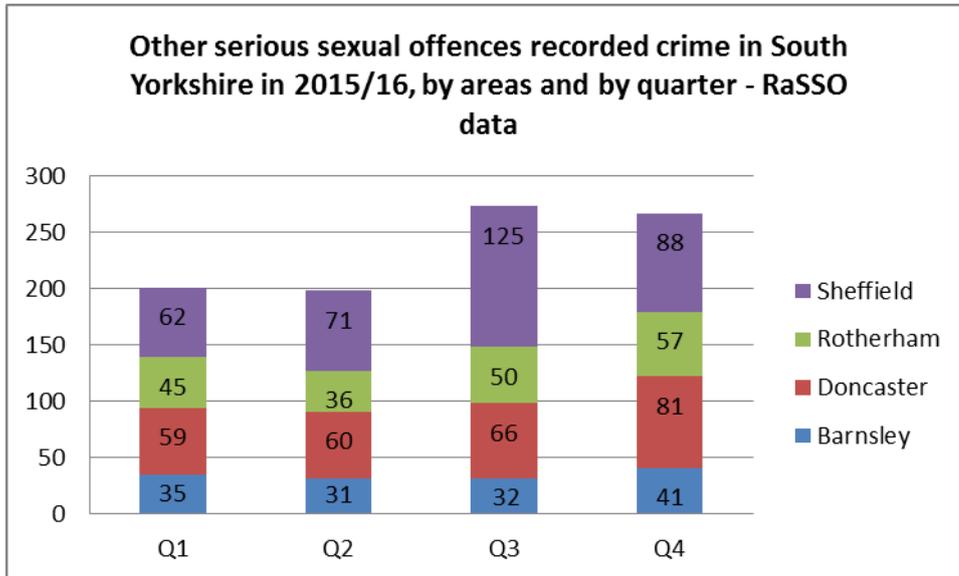
¹⁹ Police recorded crime open data Community Safety Partnership tables from year ending March 2012 onwards
<https://www.gov.uk/government/statistics/police-recorded-crime-open-data-tables>



under 13, male victim aged 13+, male victim aged under 13) as Other Serious Sexual Offences.

Of the 54% 'other sexual offences' on the national dataset that are not reported under the 'other serious sexual offences' category in the RaSSO report, 74% are sex with a minor and 17% are exposure and voyeurism²⁰.

The latest RaSSO data shows Sheffield's activity accounts for around one third (36%) of all other serious sexual offences in South Yorkshire, see graph below based on the RaSSO report.



Sheffield had its highest activity in the second half of the year, when there was a sharp rise in the total number of other serious sexual offences recorded between Q2 and Q3. The increase in activity in Q3 was also observed by Doncaster and Rotherham, albeit to a smaller percentage growth (39% and 10% respectively) see the graph above.

On average over the 2015/16 year Sheffield had around 28 other serious sexual offences recorded per month (or a ratio of 0.9 reported per day)-but in quarter 3 this increased to 1.4 per day ratio or 113 in a three month period.

If there is a similar 19% increase in 2016/17, this could mean an estimated 403 other serious sexual offences are recorded for Sheffield, increasing the ratio to 1.1 per day reported.

Note again, this activity only the amount reported to the police and 'crimed'²¹. This does not include the total volume that happen in Sheffield that go unreported.

Of the 339 'other serious offences' recorded for Sheffield on the RaSSO report, the England and Wales data²² can provide more detail, see the table below.

²⁰ Note exposure and voyeurism are also not counted in the PHOF indicator, hence why the PHOF shows lower activity to the RaSSO data.

²¹ Police record a crime if the circumstances reported amount to a crime and are defined in law and there is no credible evidence to the contrary. As per the 'An overview of sexual offending in England and Wales; Ministry of Justice, Home Office & ONS Statistical Bulletin, January 2013

²² Police recorded crime open data Community Safety Partnership tables from year ending March 2012 onwards
<https://www.gov.uk/government/statistics/police-recorded-crime-open-data-tables>



Row Labels	Total					%				
	Sexual assault on a female aged 13 and over	Sexual assault on a female child under 13	Sexual assault on a male aged 13 and over	Sexual assault on a male child under 13	Grand Total	Sexual assault on a female aged 13 and over	Sexual assault on a female child under 13	Sexual assault on a male aged 13 and over	Sexual assault on a male child under 13	Grand Total
Barnsley	85	36	*	*	137	62%	26%			
Doncaster	144	60	46	18	268	54%	22%	17%	7%	
Rotherham	117	45	14	13	189	62%	24%	7%	7%	
Sheffield	248	53	25	14	340	73%	16%	7%	4%	
Grand Total	594	194	93	53	934					

73% of all sexual assaults recorded in Sheffield related to women aged 13 and over. This is significantly different to the trends observed in the other three South Yorkshire regions where Doncaster had 54% and Barnsley and Rotherham had 54%.

There were a total of 301 females sexually assaulted in 2015/16 in Sheffield; this was significantly higher than the 39 males, where males totalled 11%.

80% of victims sexually assaulted in 2015/16 in Sheffield were aged 13 or over.

Police data - Rape

As stated earlier in this section the 35,606 rapes and attempted rapes in England and Wales in 2015/16 was an increase of 22% or an additional 6,334 on 2014/15.

Total recorded rapes in South Yorkshire (Adults and Child)

In 2015/16 there was a total of 885 rapes in South Yorkshire, this was an increase of 19% on the previous financial year (2014/15).

Sheffield had 300 rape victims which is 33% of all rapes recorded in South Yorkshire in 2015/16.

Sheffield had a 5% increase in rapes in the last 12 months, Doncaster a 6% increase, Barnsley had an 11% increase and Rotherham had a 70% increase (see table below for data). The serious sexual abuse situation which has happened in Rotherham over the last couple of years may well explain the reason behind the continued increase²³ which will include reporting of historic assaults.

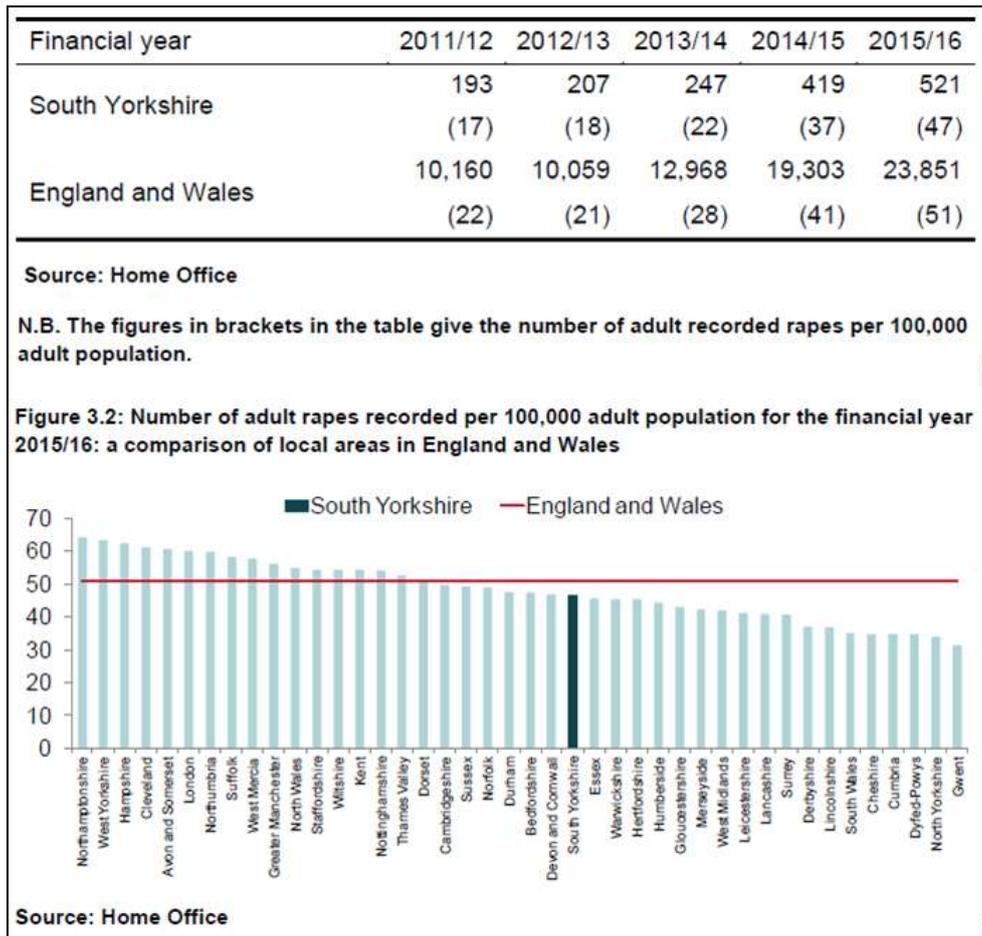
Rape	2011/12	2012/13	2013/14	2014/15	2015/16	% change between 2014/15 and 2015/16
Barnsley	54	56	86	131	145	11%
Rotherham	69	61	82	145	246	70%
Doncaster	69	83	165	183	194	6%
Sheffield	107	110	167	285	300	5%
Total South Yorkshire	299	310	500	744	885	19%

²³ Police recorded crime open data Community Safety Partnership tables from year ending March 2012 onwards
<https://www.gov.uk/government/statistics/police-recorded-crime-open-data-tables>

South Yorkshire Adult recorded rape victims (aged 16 and above)

Of the total 885 recorded rapes in South Yorkshire during 2015/16, 59% or 521²⁴ victims were aged 16 years and over and are classified as an adult as per the Sexual Offences Act 2003²⁵.

The table and figure below show the increasing trend of recorded rapes for adults since 2011/12. In the last 12 months recorded rapes in South Yorkshire have increased by 20% (2014/15 to 2015/16) and there has been a change in the ratio from 37 per 100,000 populations to 47 per 100,000 populations, an increase of 10 per 100,000. The rate remains lower than the national average of 51 per 100,000 populations (see table below) however there has been a similar increase in the national rate which has also increase by 10 per 2100,000 populations (from 41 to 51).



The graph shows the South Yorkshire Police force rate²⁶ compared to the other force areas. South Yorkshire has a lower recorded rate than 23 other force areas and ranked 24th from the top and 18th from the bottom and is therefore 'mid table' out of the 42 force areas.

South Yorkshire Child recorded rape victims (aged 15 and under)

Of the total 885 recorded rapes in South Yorkshire during 2015/16, 41% or 364²⁷ victims were aged 15 years and below and are classified as a child as per the Sexual Offences Act 2003²⁸.

²⁴ HMIC Rape Monitoring Group – Local area data for 2015/16 – South Yorkshire, October 2016, page 24

²⁵ Ibid, page 16

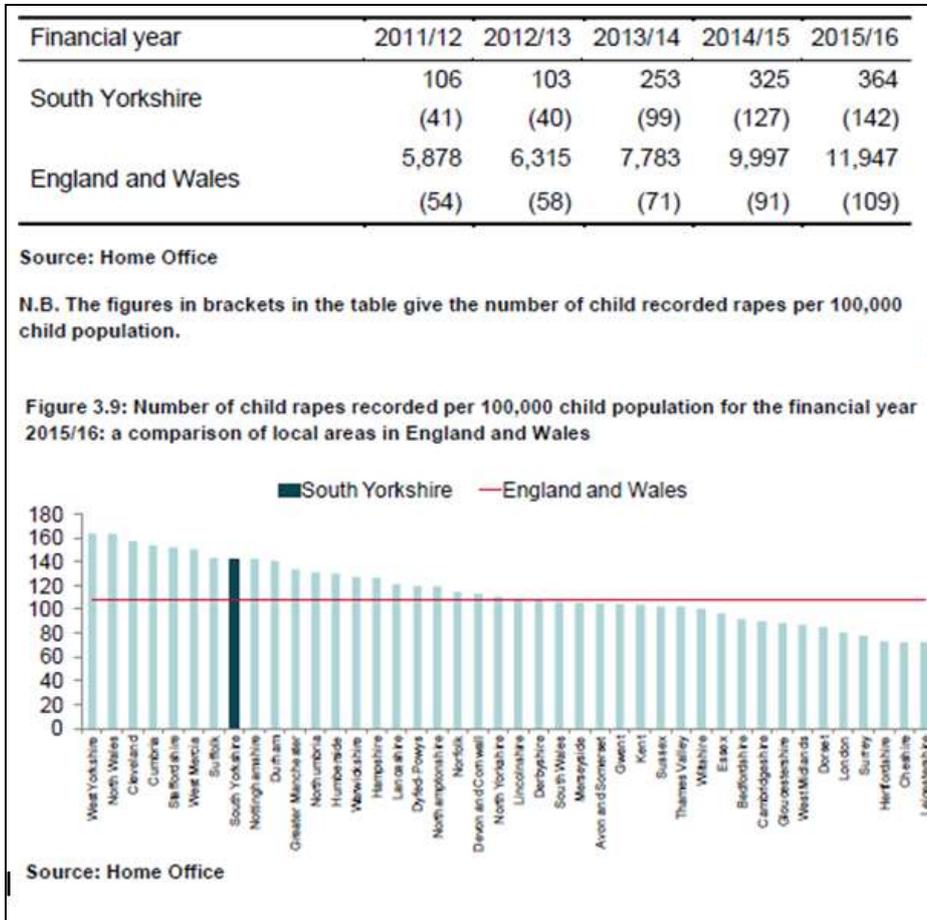
²⁶ Ibid, page 25

²⁷ Ibid, page 33

²⁸ Ibid, page 16



The table and figure below show the increasing trend of recorded rapes for children since 2011/12. In the last 12 months recorded rapes in South Yorkshire have increased by 11% (2014/15 to 2015/16) and there has been a change in the ratio from 127 per 100,000 populations to 142 per 100,000 populations, an increase of 15 per 100,000. The rate remains above than the national average of 109 per 100,000 populations (see table below) however there has been a slightly larger increase in the national rate as the ratio has increased by 18 per 100,000 populations (from 91 to 109).



The graph shows the South Yorkshire Police force rate²⁹ compared to the other force areas. South Yorkshire has a significantly higher recorded rate than the other force areas and is ranked 8th from the top out of the 42 force areas and is much higher ranking than for the adults recorded rape comparison data.

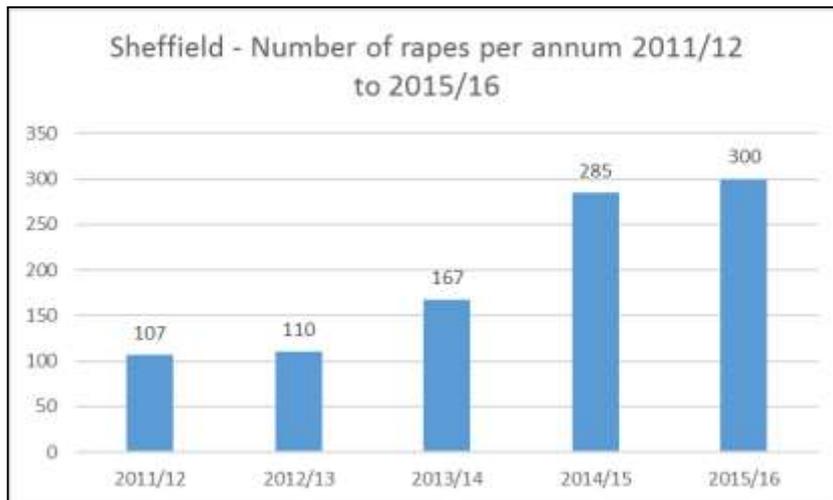
Total Rapes in Sheffield (Victims aged 13 and under, 16 and under and 16 years and older)³⁰

In the last five years a total of 969 rapes have been recorded by the police in Sheffield, 300 which were recorded in 2015/16. These are for rapes of all ages and include those aged 13 and under, 16 and under and 16 years and older. The last two years have observed the highest number of rapes, with a significant increase observed since 2014/15.

The average number of rapes recorded per annum over the last five years has been 193; however, the average of the last two years is higher, at 292. It is important to remember that if the assault is historical, the age of the victim is recorded as the age at which the assault took place, not the age of the victim when it was reported.

²⁹ HMIC Rape Monitoring Group – Local area data for 2015/16 – South Yorkshire, October 2016, page 34

³⁰ Police recorded crime open data Community Safety Partnership tables from year ending March 2012 onwards <https://www.gov.uk/government/statistics/police-recorded-crime-open-data-tables>



In 2015/16 there were a total of 300 rapes recorded for Sheffield; this is an increase of 5% on 2014/15 and is the highest recorded in the last five financial years.

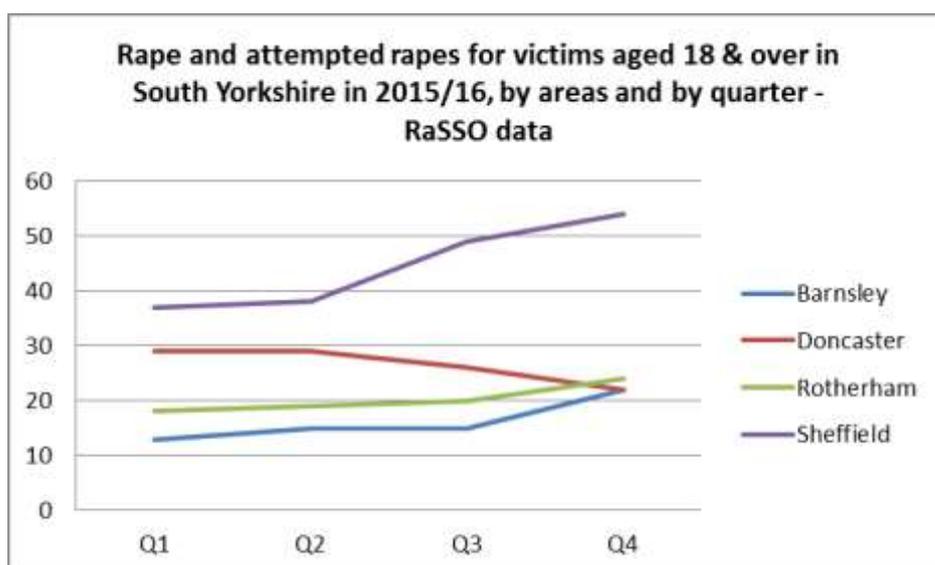
Given that the prevalence figures for Sheffield estimated that around 1,000 people aged 15 to 60 years old would have been a victim of rape or attempted rape in the last 12 months in Sheffield, this suggests 30% of rapes that occurred in 2015/16 were recorded as rape crimes, e.g. if the estimates are accurate and that around 700 rapes were not reported.

Total Rapes and attempted rapes in Sheffield – age and gender

Of the total rape victims, the majority were female, 89.8% and 10.2%, or 28 victims were male³¹.

Victims aged 18 years or older

RaSSO data shows that there were 186 rapes (or 62%) in Sheffield during 2015/16 with a victim aged 18 years or older. This is a 16% increase on the previous financial year. The graph below shows that Sheffield’s recorded rapes and attempted rapes has increased significantly in the last six months, which is significantly different to the trends observed for Rotherham, Doncaster and Barnsley.



³¹ RaSSO data, Q4 2015/16 showing activity for all 2015/16

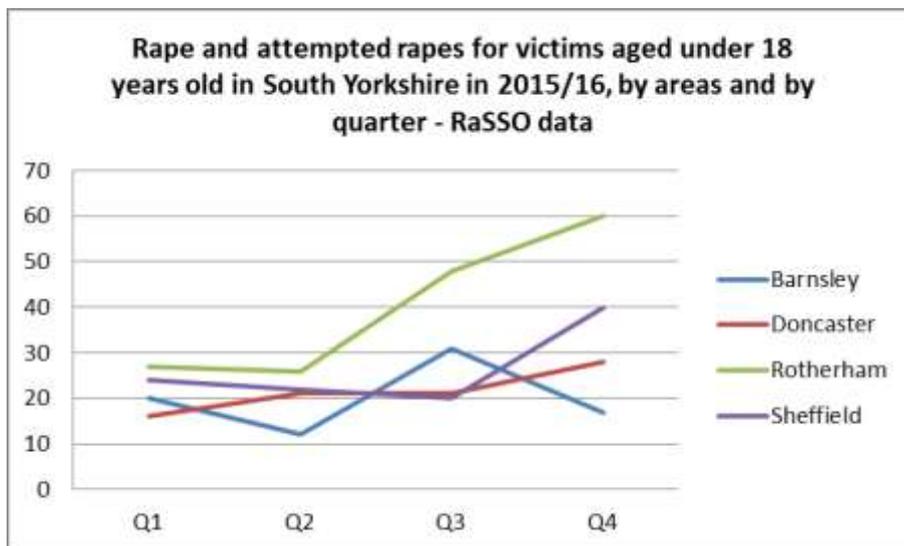


Victims aged 17 years old or younger

The RaSSO data reports that 114 of the 300 (38%) rapes and attempted rapes in Sheffield during 2015/16 were for victims aged 17 years or younger. This was 11% reduction compared with the previous year, which is opposite to the 16% observed for victims aged 18 and older.

The England and Wales dataset provides more details on the age of victims; that 42 of the 114 were for victims aged 13-16 and 42 were victims aged 12 years or less. This therefore means 30 were aged 17 years old (although a proportion of these are likely to be reports of historic assaults).

The graph below shows that Sheffield's recorded rapes and attempted rapes for victims less than 18 years old was relatively stable for the first three quarters of the year but increased significantly in the last quarter, which is similar to trends observed in Doncaster.



Victim of rape and attempted rape who are aged less than 18 year's old account for 38% of the total in Sheffield during this 12 month period. This is significant but is a smaller percentage to the 50% observed South Yorkshire wide.

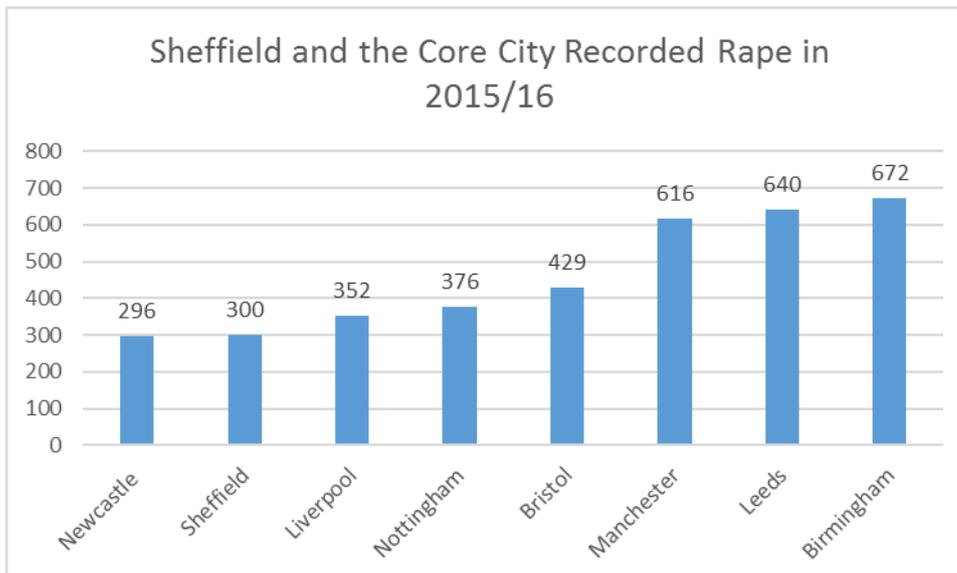
Given that we know the prevalence of sexual assault (which includes rape) is significantly higher for the 16-19 age group (the average is 2.7% females aged 16-59 years compared to 9% of those aged 16-19 years) the RaSSO data appears to also suggests there are also higher levels of rapes for the younger cohort. This suggests young people are prepared to report rape and attempted rape, but given that Sheffield reports a lower percentage for this age group compared to its South Yorkshire peers, there is also a suggestion that maybe more could be done in Sheffield to encourage a higher proportion of this age group to report.

Action – Review the messages given to young people on reporting rape and attempted rape in Sheffield and what is required to increase the number of these crimes reported by those aged 17 and younger.

Total Rapes - Sheffield's Core cities comparison³²

Sheffield, with 300 recorded rapes in 2015/16 is ranked the second of the eight core cities in 2015/16. The core cities of Birmingham (672), Leeds (640) and Manchester (616) had the highest number of recorded rapes.

³² Police recorded crime open data Community Safety Partnership tables from year ending March 2012 onwards
<https://www.gov.uk/government/statistics/police-recorded-crime-open-data-tables>



Sheffield had the lowest proportion of rape to other sexual assault ratio, with a 31 to 69 split. The average of the core cities was that rape accounted for 38% of all sexual offences, with a range between 31% (Sheffield) and 43%, Nottingham.

Discussions in the expert group were inconclusive as to why Sheffield ranks lower than its core cities for rapes. One argument is that people were less likely to report rapes in Sheffield and a second is whether there were actually fewer rapes per head in Sheffield compared with other areas. The PHE indicators may add to the discussion, as it shows that Sheffield has a relatively low rate per 1,000 for violent crime (which includes sexual violence).

PHOF Indicator 1.12ii is ‘Violent crime (including sexual violence) – violent offences’

In 2014/15 the crude rate of violence offences (including sexual offences) in Sheffield was 10.4 per 1,000 populations (the lower and higher confidence intervals are 10.1 and 10.7), meaning that Sheffield has 5,825 offences in 2014/15, see table XX below³³.

Area Name	Value	Lower CI	Upper CI	Count	Denominator	Sex	Age
Sheffield	10.40	10.13	10.67	5825	560100	Persons	All ages

The Sheffield ratio is lower than the England average rate of 13.8 (but PHE do not rate this indicator, therefore the chart below shows grey bands) and ranks 39 out of the 151 LAs for this indicator.

Sheffield also has the 13th lowest rate out of the 15 Yorkshire and Humber areas. The average rate for the region is 12.1.

Sheffield is again is low in the nearest neighbours ranking; 14 out of the 16 Local Authorities for the rate per 1,000 populations for violent crime (including sexual offences), see the PHE graph below. These are LAs with similar profiles to Sheffield in terms of social demographics. – see footnote for a more detailed explanation. Six of the Core cities Sheffield directly works with are also in the same CIPFA grouping to Sheffield, with the exception of Manchester and Birmingham.

³³<http://www.phoutcomes.info/public-health-outcomesframework#page/9/qid/1000041/pat/6/par/E12000003/ati/102/are/E08000019/iid/11202/age/1/sex/4>

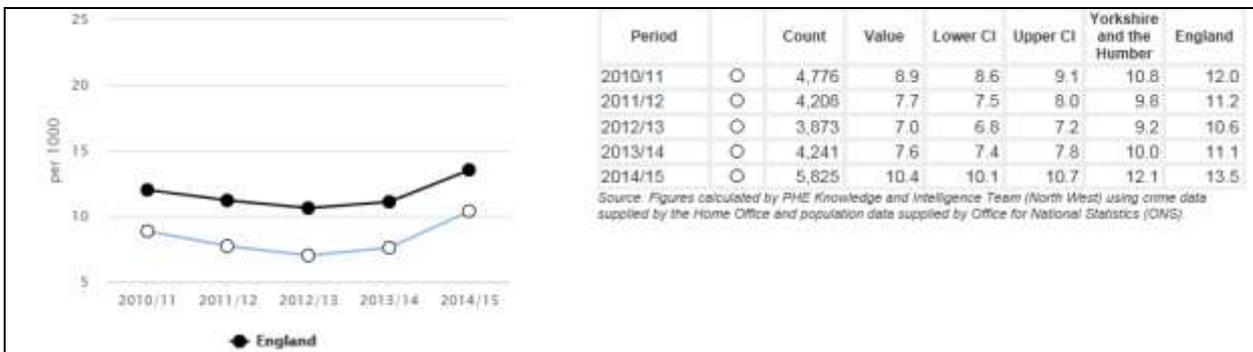


Sheffield and its CIPFA nearest neighbours³⁴ for the PHOF indicator 12.ii - Violent crime (including sexual violence) – violence offences’

Area	Rank	Count	Value	95% Lower CI	95% Upper CI
England	-	729,265	13.5	13.5	13.6
Nottingham	14	6,959	22.4	21.9	22.9
Plymouth	9	5,483	21.2	20.6	21.7
Bristol	13	8,447	19.3	18.9	19.7
Liverpool	15	7,985	17.0	16.6	17.3
Bolton	6	4,208	15.0	14.6	15.5
Derby	3	3,763	15.0	14.5	15.5
Newcastle upon Tyne	2	3,984	13.9	13.5	14.3
Coventry	4	4,305	13.1	12.7	13.4
Leeds	1	9,654	12.7	12.4	12.9
Wakefield	8	4,160	12.6	12.2	13.0
Salford	10	2,918	12.2	11.8	12.7
Kirkcaldy	7	5,013	11.7	11.4	12.0
Rotherham	12	2,802	10.8	10.4	11.2
Sheffield	-	5,825	10.4	10.1	10.7
Dudley	5	3,053	9.7	9.4	10.1
Gateshead	11	1,644	8.2	7.8	8.6

Source: Figures calculated by PHE Knowledge and Intelligence Team (North West) using crime data supplied by the Home Office and population data supplied by Office for National Statistics (ONS).

The trend for Sheffield on this indicator does show an increase, which is aligned with the increase observed for England (see the trend graph in figure XXX below). There has been an increase in total violent offences in Sheffield for the last three financial years (2012/13 to 2014/15). In Sheffield in 2014/15 there were a total of 5,825 violence offences (including sexual offences) recorded by the police, which is significantly more (+1584) than the 4,241 reported in 2013/14 (+27%).



While Sheffield shows a relatively ‘low’ rate for violence offences, the Sheffield admission rate for the crimes that happen is higher than the England average.

PHOF Indicator 1.12i is *Violent crime (including sexual violence) – hospital admissions for violence*³⁵

The hospital admission rate for violent crime (including sexual offences) in 2014/15 was 66.8 per direct standardised rate per 100,000 populations. This is higher and classified by PHE as ‘worse than’

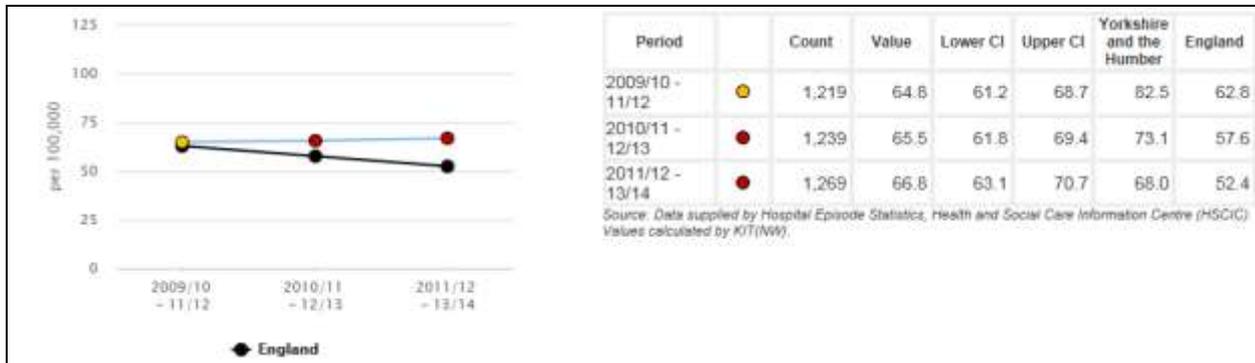
³⁴ PHOF Nearest Neighbours – ‘The Chartered Institute of Public Finance and Accountancy (CIPFA) have created a model which seeks to measure similarity between Local Authorities. This is done by following the traditional ‘distance’ approach whereby a selection of variables (see below) is standardised (with a mean value of zero and a standard deviation of one) and the Euclidian distance between all possible pairs of local authorities is calculated¹. These distances are then summed across every single subject and ‘rebased’ (by assigning a distance of 1 to the farthest neighbour meaning all overall distances will lie between zero and one) to calculate the final distance. The output returned by these calculations is a simplistic way of presenting complex underlying data. Broadly speaking, the results are what might be expected, though the outcome ultimately relies on the indicators and mathematical procedures used.

³⁵ The number of emergency hospital admissions for violence (external causes: ICD-10 codes X85 to Y09). Directly age standardised rate per 100,000 populations.



the England average rate of 52.4. Sheffield ranks 10th lowest out of the 15 Yorkshire and Humber areas. The region as a whole is also classified as 'worse than' the England average and ranks 106 out of 150 LAs.

The data shows (and shown in the PHE image below) that in 2014/15 there were a total of 1,269 admissions to hospital due to violent crime (including sexual violence)³⁶, which is slightly more (+30) than the 1,239 reported in 2013/14 (+2%).



The indicator is a total of all violent crime and hospital admissions, and some of these will be due to sexual offences. The indicator does not separate out the proportion of sexual violent crimes compared to the non-sexual violent crime.

³⁶ The number of emergency hospital admissions for violence (external causes: ICD-10 codes X85 to Y09). Directly age standardised rate per 100,000 populations.



Part 2.4 – Criminal Justice System: – Police investigations, outcomes and CPS Prosecutions for Sexual Offences

South Yorkshire Detections in sexual offences cases

Rape - The local RaSSO reports South Yorkshire had a 19% detection rate of perpetrators for rape offences in 2015/16, making a total of 166 detections in the last 12 months, an increase of 37% increase in detections on the previous 12 month period.

In the latest 12 months period (January to December 2016) the number of detections has been 134 for South Yorkshire, which is a reduction of 32 detections.

Other serious sexual offences – In 2015/16 South Yorkshire has a total of 164 detections for other serious sexual offences, which was a decrease of 22% on the previous year.

In the latest 12 months period (January to December 2016) the number of detections has been 212 for South Yorkshire, which is an increase of 48 detections.

Sheffield Detections in sexual offences cases

Rape - Sheffield rape detections were 54 in 2015/16 and this has reduced to 39 in the latest 12 month reported period January to December 2016.

Other serious sexual offences – Sheffield other serious sexual assault detections were 48 in 2015/16 and this has increased to 65 in the latest 12 month reported period January to December 2016.

The data here shows that police detections can vary over each 12 month period, in 2015/16 rape detections experienced an increase and other serious assault detections reduced, however the opposite has happened in the latest 12 month period. Data is routinely monitored and scrutinised each quarter at the South Yorkshire Criminal Justice Board.

National Outcomes data

More detailed outcome data is produced in the Crime Outcomes in England and Wales 2014/15³⁷ report. The report uses the standardised dataset that has a total of 19 outcomes and reviews all crime offences, including sexual offences. The report found that (see table XXX below):-

- 11.3% of all sexual offences (including rape) had the perpetrator charged or summonsed for the crime (irrespective of any subsequent acquittal at Court).
- Rape offences specifically had a lower proportion of perpetrators charged or summonsed, with an 8.5% outcome rate.
- 12% of all sexual offences had been closed with no suspect identified, but this was lower for rape with 5% closed with no suspect identified.
- Sexual offences was the offence category with the highest proportion experiencing evidential difficulties³⁸, accounting for around one-third (33%) of all sexual offences outcomes and 35% for

³⁷ Crime Outcomes in England and Wales 2014/15 <https://www.gov.uk/government/statistics/crime-outcomes-in-england-and-wales-2014-to-2015>

³⁸ The definitions of evidential difficulties are as follows: - Outcome 14: Evidential difficulties: suspect not identified; victim does not support further action: Evidential difficulties victim based – named suspect not identified. The crime is confirmed but the victim declines or is unable to support further police action to identify the offender.

Outcome 15: Evidential difficulties (suspect identified; victim supports action): Evidential difficulties named suspect identified – the crime is confirmed and the victim supports police action but evidential difficulties prevent further action. This includes cases where the suspect has been identified, the victim supports action, the suspect has been circulated as wanted but cannot be traced and the crime is finalised pending further action.



rape cases specifically.

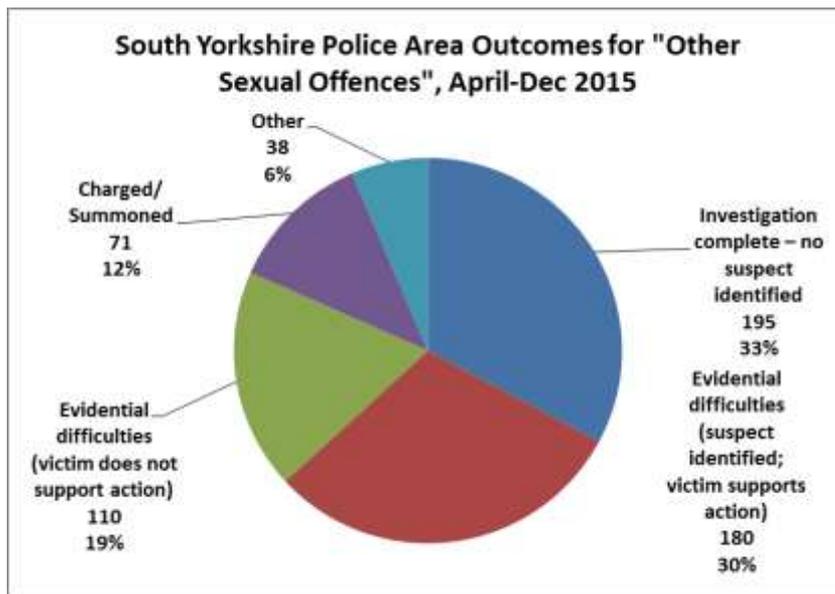
Table 2.3: Outcomes assigned to crimes recorded in 2014/15, by outcome and offence group (revised)

England and Wales, Recorded crime										
Offence group	Charged/summoned	Taken into consideration (TICs) ¹	Out-of-court (formal) ²	Out-of-court (informal) ³	Prosecution prevented or not in the public interest ⁴	Evidential difficulties (suspect identified; victim supports action)	Evidential difficulties (victim does not support action) ⁵	Investigation complete - no suspect identified	Offences not yet assigned an outcome	
Sexual offences	11.3	0.0	1.3	0.7	4.4	16.3	16.8	12.2	36.9	
of which: Rape	8.5	0.0	0.1	0.0	2.3	15.7	19.7	4.9	48.7	

- Sexual offences had a high proportion of crimes (37%) that remained under investigation at the year end.
- Sexual offences generally took much longer to be assigned an outcome than other offence types, with 39% taking over 100 days and 27% taking 31 to 100 days. *This is likely to be due to the complexity of these cases and the level of investigation needed.*
- Rape crimes took longer than all sexual offences, with 54% taking more than 100 days to have an outcome assigned.

Outcome data for South Yorkshire - other sexual offences

South Yorkshire Outcomes (but not that of Sheffield) are also produced in the Outcomes Open Data April 2015 to December 2015³⁹.



In the nine month period between April and December 2015

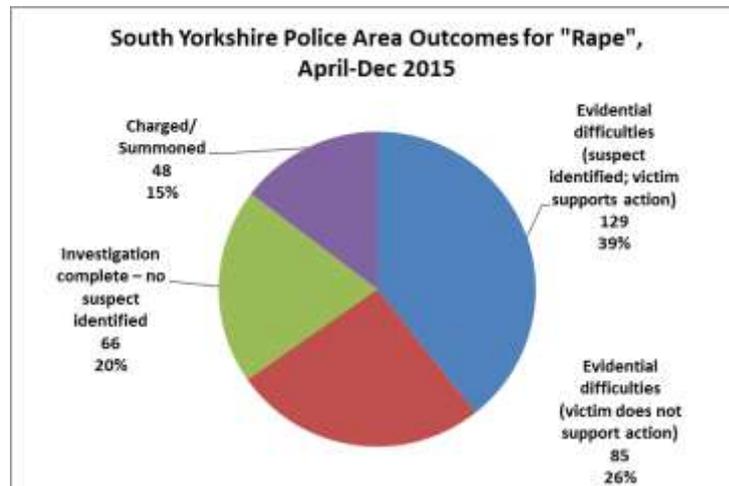
- 12% of all other sexual offences in South Yorkshire had a perpetrator charged or summonsed (70 crimes) which is the same observed nationally in 2014/15.
- Around half (49%) had evidential difficulties, higher than the 33% observed nationally in 2014/15.
- 33% had an investigation completed and no suspect identified (again much lower than the 12% observed nationally in 2014/15).

Outcome 16: Evidential difficulties: suspect identified; victim does not support further action: Evidential difficulties victim based – named suspect identified. The victim does not support (or has withdrawn support from) police action.

³⁹ Outcomes Open Data April 2015 to December 2015 <https://www.gov.uk/government/statistics/police-recorded-crime-open-data-tables>



Outcome data for South Yorkshire - rape offences



In the nine month period between April and December 2015 (see chart above):-

- 15% of all rape in South Yorkshire had a perpetrator charged or summonsed (48 crimes) which is much higher than the 8.5% observed nationally 2014/15 and much higher than the percentage observed for other sexual offences (connecting to the RaSSO detection work which shows more detections for rape than sexual offences in this same time period).
- A significant 65% had evidential difficulties which is higher than the 24% observed nationally in 2014/15
- 20% had an investigation completed and no suspect identified (again much lower than the 12% observed nationally in 2014/15).

Action - The Outcome data adds to the detection measure reported on the RaSSO data. It is encouraging to see the proportion of cases where the perpetrator has been charged or summonsed, particularly for rape cases. However given that South Yorkshire has a higher proportion of cases with evidential difficulties and a higher proportion where no suspect is identified compared to the national average, it would be useful for the South Yorkshire Criminal Justice Board to understand and monitor the differences, with a view of understanding why South Yorkshire outcomes differ to national trends and determining action to be taken.

The number of rape cases referred by the police to the Crime Prosecution Service

236 cases were referred in South Yorkshire to the CPS in 2015/16⁴⁰. Nationally the total was 6,855, an increase of 11% on the previous year. South Yorkshire referred a higher proportion of cases than in compared to the previous year (2014/15) when only 100 cases were referred.

The number of rape cases that the CPS decided to prosecute

106 cases referred to CPS by South Yorkshire Police in 2015/16⁴¹ resulted in a charge (the CPS decided to prosecute); this amounted to 45% of the 236 referrals. This was an increase of 35 cases compared to 2014/15 when 71 cases resulted in a charge by CPS.

Nationally the total charged was 3,910 and 57% of the 6,855 referred. Here the data shows that the CPS decided to prosecute a lower proportion of South Yorkshire cases than that observed nationally.

⁴⁰ HMIC Rape Monitoring Group – Local area data for 2015/16 – South Yorkshire, October 2016, page 49

⁴¹ Ibid, page 49



Prosecutions

Violence Against Women and Girls Crime Report, CPS 2015/16⁴² includes the latest CPS published data nationally on rape and sexual assault. The data is found in table XX below.

	Rape		Other sexual offences	
	England and Wales	South Yorkshire	England and Wales	South Yorkshire
Police referrals to CPS	6,855	236*		
Number of referrals resulting in a CPS charge	3,910	106*		
Number of prosecutions	4,643	115	11,995	230
Number of successful convictions	2,689	59	9,351	171
Number of unsuccessful convictions	1,954	56	2,644	59
% of prosecutions with a successful conviction	57.9%	51.3%	78.0%	74.3%
Data Source	Crime Prosecution Service (CPS), Violence Against Women and Girls Crime reports 2015/16 http://www.cps.gov.uk/publications/equality/vawg/			
Data with a (*) is found in HMIC Rape Monitoring Group – Local area data for 2015/16 – South Yorkshire, October 2016				

Rape

- 6,855 police referrals to the CPS in England and Wales. This was 236 for South Yorkshire.
- 3,910 perpetrators were charged in England and Wales and 106 in South Yorkshire. In 2014/15 it took an average of 55.1 days to charge the perpetrator in England and Wales.
- England and Wales had a total of 4,643 completed prosecutions and 115 were in South Yorkshire.
- In England and Wales there were 2,689 defendants convicted for rape of which 59 were in South Yorkshire.
- This was a successful conviction rate of 57.9% of all cases prosecuted in England and Wales compared with a lower 51.3% in South Yorkshire.
- The number of successful and proportion of successful cases in South Yorkshire is lower than it was in 2014/15 when there were 114 prosecutions for rape, 71 were successful which is 62.3% of the total and is higher than the national average of 56%⁴³. Local RaSSO data has monitored the overall conviction rate of rape cases by quarter in 2016/17 and has noted that the trend is decreasing on the 51.3% observed in 2015/16 and has been 51.3%, 47% and 49.6 in Q1, Q2 and Q3 2016/17.
- 60.4% of all successful outcomes in England and Wales had a guilty plea and 39.6% were due to convictions after trial⁴⁴.
- The main reasons for an unsuccessful prosecution in England and Wales were jury acquittal (61.4%) and there is evidence that jury acquittals are more likely in rape cases where the victim was in an intimate relationship with the perpetrator). Victim issues accounted for 17.1% and the majority of these are victim retraction (10.7%). The data is not detailed to provide South Yorkshire data on the reasons for unsuccessful conviction.
- 13.1% of cases in England and Wales were discontinued.
- The demographics of those prosecuted for rape in England and Wales 2015/16 was as follows:-
 - 98.6% of those prosecuted were men,
 - 59% were categorised as of white ethnicity, of which 52.1% were White British. 9.3% were Black and 7.3% were Asian (but ethnicity is only recorded 66% of the time).
 - 60.6% of all defendants were aged between 25 and 59 years old, 21.5% aged 18 to 24 and 1% aged 14-17 years old.
- The average custodial sentence for those convicted is 118 months or 9.8 years⁴⁵.

⁴² Crime Prosecution Service (CPS), Violence Against Women and Girls Crime reports 2015/16
<http://www.cps.gov.uk/publications/equality/vawg/>

⁴³ Crime Prosecution Service (CPS), Violence Against Women and Girls Crime reports 2014/15
<http://www.cps.gov.uk/publications/equality/vawg/>

⁴⁴ Crime Prosecution Service (CPS), Violence Against Women and Girls Crime reports 2015/16
<http://www.cps.gov.uk/publications/equality/vawg/>, page 49



- The time taken from being charged to being convicted 247 days⁴⁶.

Sexual offences (excluding rape)

- In England and Wales in 2015/16 there were a total of 11,995 prosecutions for other sexual offences (excluding rape), which was much higher than the 9,789 prosecutions in 2014/15.
- In 2015/16 there was a total of 9,351 successful convictions (the highest ever) which is 78% of all those prosecuted.
- 1.9% of all the CPS caseload was sexual offences in 2015/16 compared to the 1.2% in 2014/15.
- The demographics of those prosecuted for other sexual offences in England and Wales 2015/16 was as follows:-
 - 97.3% of those prosecuted were men,
 - 58.9% were categorised as of white ethnicity, of which 65.1% were White British. 5.6% were Black and 6.6% were Asian.
 - 67.1% of all defendants were aged between 25 and 59 years old, 15.5% aged 18 to 24 and 0.5% aged 14-17 years old.
- In 2015/16 South Yorkshire prosecuted 230 individuals for sexual offences excluding rape. This was higher than the 207 in 2014/15. Of the 230 prosecuted 171 (74.5%) were found guilty, which is lower than the 78% successfully prosecuted in England and Wales.

Action –Work with partners across South Yorkshire to promote the message that rape and sexual assault does take place in intimate relationships.

The court experience for victims

Local experts had a general agreement that *‘the CJS process is ‘shocking’ and not a very nice process for the victim to go through. There are issues about re-traumatisation, victims being ‘blamed’ by the defence solicitor and having to relive the incident again and again. It was stated that a victim’s history can be discussed whilst the perpetrator’s history cannot be and an overall agreement that the process is ‘not equal’.*

Local experts also described a *‘gap in the support available to victims of sexual abuse once they have disclosed and a criminal case is brought. For example, when a perpetrator is released on bail until a court hearing this can have a massive impact on the victim’s well-being’.*

Local experts also shared that they felt recent well known court cases impact on the public’s and victim’s perception of sexual abuse court cases. For example the recent case of the Sunderland footballer, presented the victim positively whereas the Ched Evan’s case presented the victim from a negative viewpoint.

Insight into local rape court cases has been explored by the PCC and a recent Court observation project in Newcastle rape cases substantiate the local expert’s feedback evidence.

Local investigations into rape cases⁴⁷⁴⁸

Two reviews of rape cases have been undertaken twice in 2016 by the PCC analysts, following an action agreed at the South Yorkshire Criminal Justice Board. The aim was to review a sample of rape trials (from the date of the reported offence to the end of the trial) and identify factors that may have ended the time period. The factors that impacted on time included:-

⁴⁵ HMIC Rape Monitoring Group – Local area data for 2015/16 – South Yorkshire, October 2016, page 60

⁴⁶ HMIC Rape Monitoring Group – Local area data for 2015/16 – South Yorkshire, October 2016, page 60 -61

⁴⁷ Review of rape cases files, Jamie Smith, Planning and Performance Officer, South Yorkshire Local Criminal Justice Board 10/6/16 paper discussed at the Rape And Serious Sexual Offending Steering Group, 22 June 2016 –

⁴⁸ Review of rape cases part 2, Jamie Smith, Planning and Performance Officer & Oliver Murphy, Planning and performance assistant, South Yorkshire Local Criminal Justice Board 19/1016 paper discussed at the Rape And Serious Sexual Offending Steering Group, 26 October 2016 – Review of rape cases part 2



- The perpetrator not being on remand
- A 'not guilty' plea (found to take an average of 260 days longer)
- Victims with Vulnerabilities (drugs, alcohol problems, learning disabilities).
- Multiple counts of rape
- Historic cases
- Multiple court hearings
- Lack of investigative resource

Other observations made includes:-

- Unsuccessful cases were found to fail due to lack of DNA evidence, being reliant on one account against the other, discrepancies were found or intimidation of victim.
- In all successful cases the victim's evidence was provided via recorded interviews, screens in court or video link.
- Those found guilty were sentenced to around 5 years in prison (although one outlier was much longer due to the circumstances of the case).

The issue relating to trials has been noted by the South Yorkshire Criminal Justice Board and actions will be taken in due course.

The issue of rape cases and the outcomes at trial are being explored further afield. **An investigative project by Dame Vera Baird in Newcastle**⁴⁹ wanted to understand the reasons why there is been a 6% increase in the conviction rate at court compared to an increase of 123% recorded rate of crimes since 2012, noting the two are very disparate.

The project used trained observers. In pairs these observers attended and have observed (listened but were instructed not to take notes) at every rape case in Newcastle Crown Court since 2015. The findings from the 30 court hearings reveal the emotional 'rollercoaster' for the victim, the complexities in court hearings and the different variables that can each impact on a smooth hearing. The report found the following:-

- Court witness services separated the ISVA from the victim because they thought the ISVA was a friend, an ISVA was only present in 18 of 30 cases and 12 who did not have an ISVA were given court support but there was no relationship or trust between the victim and the advisor established as there is when an ISVA supports.
- Courts were still using the 'Twin myth' (where if the victim consents to one sexual act, then they must have consented to all)
- Barristers shared the victim's sexual history, explored troubled childhoods and used their background to discredit victims in 11 of the 30 cases. This links into another observation made about barristers' use of Section 41 of the Youth Justice and Criminal Evidence Act 1999, which lays out the context in which history and victim's background can be shared. There is a potential fine line between what can be and what cannot be shared.
- A third of cases did not have a pre-trial meeting with the barrister - 10/30.
- There are a few points on protecting the victim from the accused in court. This included poor protection screening which meant the alleged perpetrator saw the victim on the video link, and the video link technology did not work in 6 of 30 cases.
- The observers noted that they felt the complainant was 'mishandled' (6/30) – but no further explanation is given, and that the judge was aggressive in 12 cases.
- Time delays were often caused by changes in court schedules, cancelling or delaying hearings.
- Not all judges dispelled for the court the myths of rape (e.g. good looking man doesn't need to rape, victim did not complain at the first opportunity, therefore isn't rape etc.)

The full report is available here <https://www.northumbria-pcc.gov.uk/volunteers/court-observers/> and

⁴⁹ Input from Dame Vera Baird QC – PCC for Northumbria Police, shared via the PCC Office.



changes are already being made by the Courts and the Judiciary that it is hoped will be implemented nationally.

It appears the issue of rape cases and the emotional process victims are experiencing is not unique to Sheffield. It appears changes are being considered nationally, however there is a need for a local approach to address how court support can be changed, and adapted to better support victims in court cases.



Part 2.5 Support available for Victims of Sexual Abuse in Sheffield

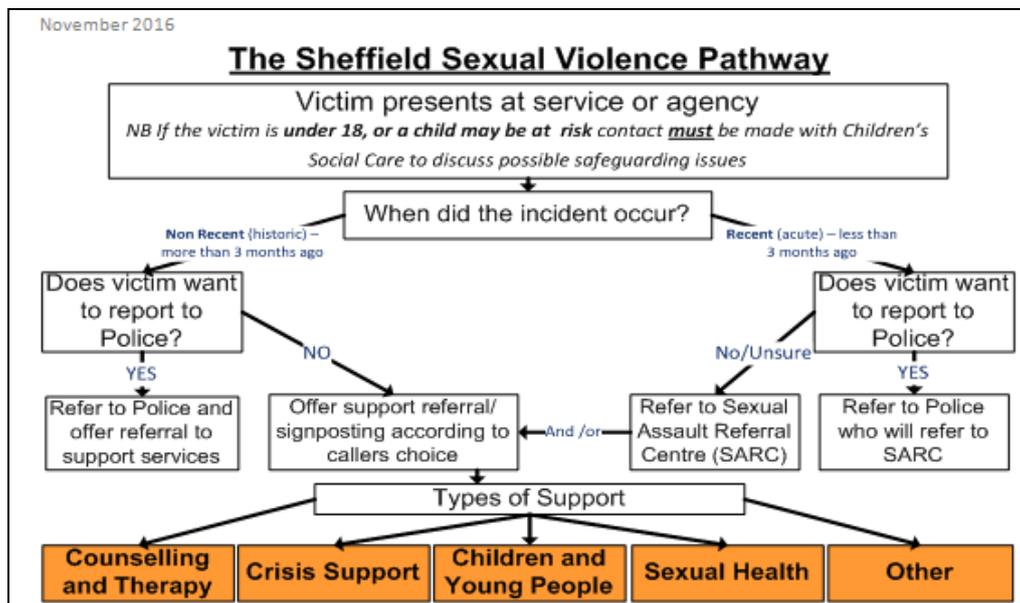
The strategic direction in relation to Sexual Abuse appears to be more fragmented than domestic abuse in Sheffield, this is in part due to there being more services supporting victims, at different parts of their journey, there are services for specific needs (e.g. CSE and prostitution) and the complex commissioning structure.

There is a need in the new strategy for sexual abuse to have a clear strategic focus; so all partners (commissioners, police, specialists providers and wider services) engaged with victims of sexual abuse understand their role in the citywide strategy.

In South Yorkshire there is a quarterly Criminal Justice Group - The RaSSO Steering Group. The Group is chaired by South Yorkshire Police and quarterly reports are produced showing the extent of sexual offences in South Yorkshire, focus is given to emerging areas of need and areas of concern. The group has DACT representation, attended by the Strategic Commissioning Manager for Domestic and Sexual Abuse.

The Sexual Violence Pathway⁵⁰

The pathway was developed in 2015 and published in September 2015. It has been updated in 2016 to reflect the new SARC and ISVA arrangements. The pathway (see the first image below) explains the different services and support available for victims of sexual abuse, based on when the incident occurred and whether the victim wants to report to the police.



The pathway <http://sheffielddact.org.uk/domestic-abuse/resources/pathways/> shows that there are a number of different support services for sexual abuse victims in Sheffield for victims at different stages (see image 2 on the next page) Not all services are directly commissioned by SCC, DACT, but all contribute to the support offer citywide, see figure xxx below.

⁵⁰ <http://sheffielddact.org.uk/domestic-abuse/resources/pathways/>

Counselling and Therapy	Crisis Support	Children and Young People	Sexual Health	Other
<p>Sheffield Rape and Sexual Abuse Centre 0808 802 0013 www.sheffieldrape.crisis.org.uk</p>	<p>Sexual Assault Referral Centre 0330 223 3193 www.hackenthorp.elodge.org</p>	<p>Children's SARC Police referrals only www.sheffieldchildrens.nhs.uk/our-services/child-assessment-unit/sarc.htm</p>	<p>Sexual Health Services 0114 271 1900 www.sth.nhs.uk/sexualhealth</p>	<p>Sheffield Working Women's Opportunities Project 0114 275 2040 www.swwop.org</p>
<p>Sheffield Women's Counselling & Therapy Service www.swcts.org.uk 0114 275 2157</p>	<p>SRASAC Helpline 0808 802 0013 www.sheffieldrape.crisis.org.uk</p>	<p>SRASAC Children's ISVA Service https://isva-referral.dracsacs.org.uk 0114 241 2791</p>		<p>Young Women's Housing Project 0114 268 0580 www.ywhp.org.uk</p>
<p>Sheffield MIND 0114 258 4489 www.sheffieldmind.org</p>	<p>SRASAC ISVA service ISVA@sheffieldrap.ecrisis.org.uk 0114 241 2791</p>	<p>Sexual Exploitation Service 0114 2012800 www.sheffieldofutures.org.uk</p>		<p>Housing Solutions 0114 273 6306 www.sheffield.gov.uk/housing</p>
<p>Rotherham Abuse Counselling Service Service offered to Sheffield men 01709 839238</p>	<p>Victim Support 0300 303 1971 www.victimsupport.org.uk/</p>	<p>NSPCC 35 George Street S1 2PF 0114 228 9200 www.nspcc.org.uk</p>		
<p>Eva Therapy Service 0114 275 0101 www.vidasheffield.org.uk</p>				
<p>DOMESTIC ABUSE For cases of sexual assault within a domestic relationship complete ACPO DASH. If High Risk, refer to MARAC and IDVAs - 0114 249 3920 www.sheffielddact.org.uk/domestic-abuse/resources/marac-information-and-forms If medium/standard risk refer to Domestic Abuse Helpline 0808 808 2241</p>				
		<p>Sexual Assault Referral Centre (SARC) Offer for Adults: - SELF REFERRALS WELCOME - Crisis worker support - Counselling and emotional support - Clinical forensic examination if consented - Immediate clinical care - Risk and needs assessment - HIV risk assessed and PEPSE (Post Exposure Prophylaxis after Sexual Emergency) contraception - Care plan devised and follow up support offered</p>		
			<p>Male and Female Service Female only Male only Children and Young people</p>	
			<p>OPENING TIMES SRASAC Helpline Monday 10am - 12noon, Tuesday & Thursday 1pm-3pm and 6pm - 8pm Office Mon-Fri 9am-5pm 0114 241 2766 SWWOP - Mon-Fri 9.30am-4.30pm SARC - 24 hours, appointment only Children's SARC - see website Sexual Exploitation Service - Mon-Fri 9am-5pm SWCTS - Mon-Fri 9am-5pm PITSTOP - Mon-Fri 9.30am-4.30pm MIND - Mon-Fri 9am-5pm VICTIM SUPPORT - Victim Care Unit 8am-8pm Mon - Fri 9am-5pm Sat</p>	

Sexual Assault Referral Centres (SARC)

The SARC is a regional hub that provides a safe environment for victims of sexual assault or rape. The service includes a health care service, forensic examination, assistance with the criminal justice system and crisis support.

The contract for the South Yorkshire SARC was competitively tendered in 2015/16 by the Police and Crime Commissioner and NHS England and a new provider, Mountain Healthcare was awarded the contract. The new provider has been located in Sheffield since April 2016. This may mean more Sheffield victims are willing to approach the SARC given that the RaSSO Q3 report⁵¹ observed that when the SARC was based in Rotherham there were a higher proportion of Rotherham victims attending. E.g. 31% of the adult victims accessing SARC were from Rotherham, whereas Rotherham accounted for only 18% of total rape victims. Conversely Sheffield accounted for approximately 40% of rape volumes in SY but only 25% of victims from the adult SARC were from Sheffield.

Action – Continue to monitor the proportion and volume of victims accessing SARC from Sheffield in the RaSSO report to understand if Sheffield victims are more likely to be supported by SARC now the SARC is located in Sheffield. Further analysis is required to understand the reasons why victim chose not to attend, with a view of increasing uptake.

In 2015/16 a total of 134 Sheffield residents attended SARC which is 36%⁵² of all those attending SARC in South Yorkshire (Rotherham had 161, Doncaster 83 and Barnsley 68 victims and 60 were not known). The most recent SARC data shows that a total of 55 Sheffield victims have attended the SARC (40% of the South Yorkshire total) between June to December 2016.

⁵¹ RaSSO Steering Group Report Q3 2016 produced by Oliver David Murphy

⁵² The percentage is based on the total for Sheffield, Rotherham, Doncaster and Rother and removes the not known from the cohort.



The SARC has around one Sheffield victim attending every third day of the year; this is the same ratio in 2016/17 as it was in 2015/16.

The SARC data shows that not all sexual abuse victims attend SARC. The 134 Sheffield victims who went to SARC equates to 13.7% of the 974 sexual assault victims who reported to the police in 2015/16, and 2% of the estimated 6,000 victims in the last 12 months.

It is expected that not all would attend SARC. ISVAs have explained that they always offer SARC support to sexual abuse victims but often the victim does not want to go. It certainly reasonable to suggest there is scope to increase victim take up of SARC support in Sheffield.

SARC Demographics and risk factors of sexual assault and rape victims

Of the 134 Sheffield sexual abuse victims who attended in SARC in 2015/16, 83% or 111 were aged 18 years old or above and 17% or 23 victims were aged 17 years old or younger⁵³. The lower age limit for the Adult SARC is 16.

In 2015/16 South Yorkshire the gender breakdown of victims was 75% female and 25% male⁵⁴. The proportions are interesting as they show that male victims are more likely to present to SARC than female victims (84% of all reported sexual assaults in Sheffield were female and 90% of rapes are female in 2015/16⁵⁵).

This suggests females are less likely to present to the SARC, therefore suggesting further work is required to engage more female victims in the SARC process.

Action – Review how the proportion of male and female victims of sexual abuse attending SARC can become more in line with the percentages observed for reported sexual abuse, as currently there is a suggestion that females are proportionately less likely to attend than male victims.

Risk factors observed in the sexual abuse victims accessing SARC

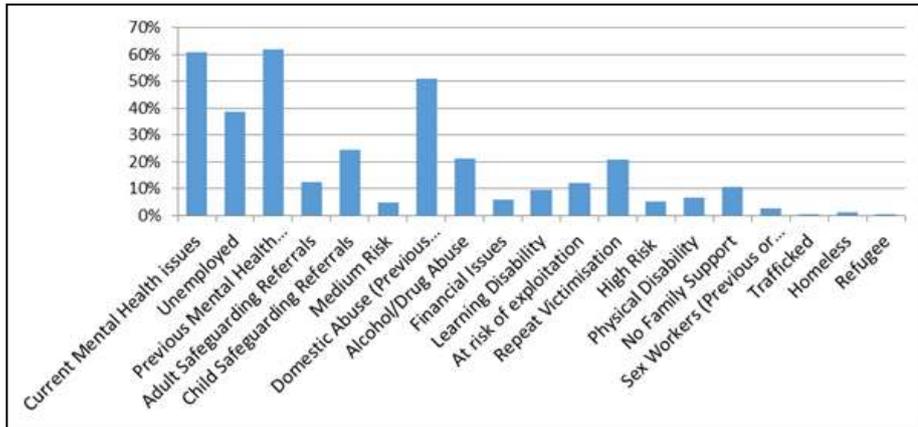
Victims in 2014/15 were observed to have a number of different risk factors. Mental health was a prominent factor in the majority of cases with over 60% of victims either having a current and/or a current mental health diagnosis. The second most frequently observed factor was that over 50% had experienced previous domestic abuse. Other factors included being unemployed (just under 40%), having a history of drug and/or alcohol abuse (around 20%) and having a child referred to safeguarding. See the table below for full details⁵⁶.

⁵³ Jamie Smith, Planning and Performance Officer, South Yorkshire Police and Crime Commissioner & Local Criminal Justice Board. Email dated 28th August 2016

⁵⁴ Jamie Smith, Planning and Performance Officer, South Yorkshire Police and Crime Commissioner & Local Criminal Justice Board. Email dated 28th August 2016

⁵⁵ Police recorded crime open data Community Safety Partnership tables from year ending March 2012 onwards
<https://www.gov.uk/government/statistics/police-recorded-crime-open-data-tables>

⁵⁶ Data provided in the Quarter 4 RaSSO report for 2014/15, by Bex Brady.



The IDVA service reported via the expert group that they are often not informed that a rape incident was within a domestic abuse situation when the victim attends SARC. This is an area for further investigation and action.

Action – Review what information should be shared with IDVAs when a domestic abuse case goes to SARC and rape is the primary offence.

ISVA and ChISVA support for victims of rape and serious sexual offences

ISVAs are the independent advocates acting on behalf of the victim following accessing SARC. They act as an advocate in the time leading up to the court cases; offering one to one support and telephone support. The commissioning of ISVA and ChISVAs has changed in 2016/17, responding to the previously identified need for more ISVAs to meet an increasing caseload. Local experts observed a number of needs that ISVAs help to meet including the need for practical (including personal and criminal justice) support and that it was a great link for victims with other agencies.

Following additional Home Office Police and Crime Commissioner investment, there are now three ISVAs in Sheffield. Previously, one was commissioned of SRASAC and one was centrally based at the SARC. In 2016/17 there are two adult ISVAs and one Children’s ISVA (known as a ChISVA). All are commissioned via a hub model from Doncaster Rape and Sexual Abuse Counselling Service and based at SRASAC and the contract award for 1718 has been awarded to the same consortium.

The ChISVA (commissioned by the OPPC) provides a child sexual abuse advocacy service which is commissioned of SRASAC. Local experts suggest the ChISVA will be a positive impact on the offer of support to young victims⁵⁷.

See the Figure below for a summary of the ISVA service for South Yorkshire⁵⁸.

⁵⁷ Expert group feedback 2016

⁵⁸ Provided to Alison Higgins via email from Linda Mayhew, Business Manager, South Yorkshire Criminal Justice Board and Office of the Police & Crime Commissioner

Independent Sexual Violence Advocacy - South Yorkshire

Independent Sexual Violence Advocacy (ISVA - Adults & CHISVA - Young People and Children) is available across South Yorkshire from a central referral hub, funded by South Yorkshire Police and Crime Commissioner

What can an ISVA do?

An ISVA advocates on behalf of someone who has been a victim of sexual violence. They hold the needs of the client & help them to access support and services from a range of statutory & non-statutory services such as:

- Health Services
- Housing Support
- Benefits advice
- Counselling

They will advocate and support a client through reporting to the Police to Court including:

- Liaising with the police, courts, Criminal Prosecution Service (CPS) and other public agencies
- Keeping the victim informed of developments in the case
- Advocating on victim's behalf
- Supporting victim before and during any court case

The service is managed centrally by DRASACS and delivered locally in Barnsley, Doncaster, Rotherham and Sheffield through:

- Barnsley Sexual Abuse & Rape Crisis Services
- Doncaster Rape & Sexual Abuse Counselling Service (Doncaster & Rotherham)
- Sheffield Rape & Sexual Abuse Centre





<http://www.drasacs.org.uk/top-page-regional-isva-service>

The service is available to adult females & males (ISVA), children & young people (CHISVA) who have been a victim of sexual violence.

The ISVA worker will give information to help a victim decide whether they want to report the incident(s) to the police.

If they decide not to report the matter, they can still access the services.

If a victim does decide to report the matter, the ISVA worker will support them through the whole process, including working with the police and the rest of the criminal justice system.

You can refer someone into the ISVA service by completing the secure form at :

<https://isva-referral.drasacs.org.uk>



The service is managed centrally by DRASACS who can be contacted on:

Telephone : 01302 341672 e-mail: admin@drasacs.org.uk website: www.drasacs.org.uk

ISVA referrals

The RaSSO data for 2014/15 shows that Sheffield and Rotherham had a total of 260 ISVA referrals (142 Sheffield and 108 for Rotherham). Data for 2015/16 shows a lower 154 ISVA referrals⁵⁹. The reduction is explained by a change in ISVA and SARC commissioning and the end of one contract and the start of a new provider with a new SARC contract.

ISVA activity for the first nine months of 2016/17 has increased significantly on the last two financial years. It appears more victims are accessing the support of an ISVA. For example a total of 886 victims in South Yorkshire have received the support of an ISVA, of which 249 (28%) were Sheffield victims. If the activity continues as it has and given that during the same period a total of 627 rape and other sexual offences were recorded for Sheffield⁶⁰, it means around 39% of victims reporting an incident to the police were seen by an ISVA.

The caseload and number of people supported by an ISVA is increasing. Of the 249 Sheffield victims who saw an ISVA, Q1 had only 36 victims whilst Q2 and Q3 both had 106 and 107 victims respectively. If this continues, than around 400 plus victims from Sheffield may be supported by an ISVA in the next 12 month period, which means more victims are accepting the offer of support. SRASAC has reported that the Sheffield ISVA continues to have an increasing caseload, mostly of acute rape and sexual assault cases⁶¹ and feedback from local experts indicated that the ISVA helps with the reporting of incidents to the police.

ISVA Demographical data from the latest South Yorkshire ISVA data (n=886)⁶² finds that the gender of the majority of victims is female (87% of victims) and 12% of victims are male. This demonstrates that female victims are more likely to present to ISVA support. This is because when the prevalence rates are observed the prevalence rate is 0.7% in the last 12 months which when

⁵⁹ Data is combined for Sheffield and Rotherham until quarter 3, and then separated for quarter 4.

⁶⁰ RaSSO 15 February 2017, Jamie Smith, South Yorkshire Criminal Justice Board

⁶¹ SRASAC PMF Q4 2015/16

⁶² Monitoring report – SY ISVA service, presented to the South Yorkshire Criminal Justice Board in February 2017



factored into 1,000 men would mean 7 male victims in 1,000 males would have been sexually assaulted. If the 2.7% prevalence estimated of female victims is applied to 1,000, then 27 female victims would be sexually abused in the last 12 months. This would mean a total of 34 (7 male and 27 female) victims in the last 12 months or 20% male and 80% female. The male ratio for those accessing ISVA support is only 12% of the total, which is lower than the 20% of the total estimated victims.

The age range is wide, with 35% (306) of victims supported being aged 17 years or younger. 580 victims were aged 18 years or older. Of these victims 76% were aged between 18 and 44 years old. The age range with the highest number of victims was 18 to 24 years, and had 169 victims, this aligns with the CSEW prevalence data that estimates that the prevalence of sexual assault is higher for those who are younger (e.g. 16 to 19 years old and female has a 9% prevalence rate compared with the average for all age groups of 2.7%).

The **relationship to the victim** provides more insight into the victimisation and shows some emerging trends. The relationship status for the most number of offences seen by ISVA was close relative (153 or 24%). The second and third highest were acquaintance (19%, 120 victims) and stranger (15%, 99 victims). Current or ex-partner at the time of the offence totalled 122 victims (19% or 8% partner and 11% ex).

Interestingly new data has started to record online relationships, gang related sexual assault, multiple perpetrators and repeat victimisation. Data here is limited, and therefore full data is not shared in this document. However it is point worthy to note that 9% of the victims were abused by a perpetrator who was classified in one of these categories.

The **referral source into the ISVA service** provides insight into how these victims respond to the support offered. Police (PPU, SAT and CID) refer 30%, SARC (adult and child) refer 19% and 28% are referred by the regional pathway. Only 7% self-refer, and 11% are referred by children's/ family services or domestic abuse services.

Action - Given the year on year increase in reported sexual abuse activity there is a need to ensure that the commissioned ISVA model can respond to the expected growth in SARC referrals

The Sheffield Children's Hospital (SCH) Child Assessment Unit for young sexual abuse victims

SCH Child Assessment Unit is the Children's SARC for South Yorkshire and undertakes forensic examination by specially trained doctors. The caseload is for child victims up to aged 16 years who have been sexually abused including FGM (either currently, 78% or historically, 12%). Where required the service provides STI screening, psychological support, hepatitis B vaccination and HIV prophylaxis (prevention). Services users have a number of needs which include emotional and psychological needs, emergency contraception, infection screening and sexual health advice.

The service reports that it provides sexual abuse and domestic abuse training for front line workers as part of the mandatory training but not all workers have been trained in the DASH assessment tool.

In the last 12 months (January 2016 to December 2016) the children's SARC have examined a total of 65 cases, the majority were female victims and 17 of the victims were from Sheffield⁶³.

Specialist Sexual Assault Counselling Service provision in Sheffield

⁶³ Information provided by Kara, Children's SARC to Jamie Smith OPCC, February 2017



The service providing specific sexual abuse support in Sheffield is SRASAC - Sheffield Rape and Sexual Abuse Counselling. The service is funded by MoJ, and Sheffield City Council, with both holding a contract with the provider and they are part of the ISVA consortium commissioned by the OPCC. They also receive charitable funding.

The commissioning requirement of the service with SCC is to provide *'counselling and therapeutic support on a one to one or group basis using a recognised theoretical approach and in line with NICE guidelines⁶⁴ where appropriate e.g. if the presenting issue is Post Traumatic Stress Disorder⁶⁵'*.

The capacity commissioned by SCC is as follows: - 90 individuals to be referred to the service and from the referrals 60 historic victims and eight new acute victims will start support.

Victims will receive (on average) 19.5 hours of assessment, counselling and support. It is expected (based on previous data and experience that victims will have to wait for the counselling service) therefore the service is also commissioned to offer support during the waiting process, which includes offering 80% of all individuals group work and/or helpline support.

In 2015/16 DACT has specifically funded spaces for male victims (9% of the total capacity). This is a first for Sheffield and goes some way to starting to meet the identified specialist support need of male victims.

Other funding into the service is from the Ministry of Justice which provides additional counselling places and a telephone helpline service, and the ISVA service which is funded by OPCC (outlined in the previous pages). The helpline is usually available for 10 hours per week, the website states the hours are Mondays: 10am - 12noon, Tuesdays: 1pm - 3pm and 6pm - 8pm, Thursdays: 1pm – 3pm and 6pm – 8pm⁶⁶. In 2015/16 there were 1,123 calls made from or to the helpline (around 21 per week⁶⁷) and all telephone messages to the helpline (message left on non-working hours) were responded to⁶⁸.

⁶⁴ Nice Guidelines G26 Post-traumatic stress disorder

⁶⁵ Sexual Abuse Service Specification.

⁶⁶ <http://www.sheffieldrapecrisis.org.uk/helpline-support/>

⁶⁷ Based on a 52 weeks

⁶⁸ PMF 2015/16



Part 2.6 - Sexual Abuse Support Data

Data from the commissioned specialist sexual abuse support service provides an insight into the demographics and personal situation of sexual abuse victims in Sheffield.

Number of victims supported in Sheffield for Sexual Abuse

- SRASAC had a total of **438 referrals** for support in 2015/16.
- Victims of sexual abuse are also accessing other support services. For example respondents to the provider needs assessment questionnaire found that between them, **over 500 individuals** had been referred to their services⁶⁹ and had been a victim of sexual abuse domestic abuse support services and **around 100 had been a victim of sexual exploitation**⁷⁰.
- Sheffield Children's Hospital (SCH) Child Assessment Unit for young sexual abuse victims) reported via the provider needs assessment questionnaire that in 2015/16 126 child victims were referred to the centre and a total of 466 were on the caseload.
- The GP questionnaire found that 47.6% of respondents had seen patients in the last year who disclosed that they were a victim of sexual abuse.
- **297 victims**⁷¹⁷² supported in a domestic abuse support service (minimum dataset) had been sexually assaulted, which means around 24% of the total minimum dataset includes victims who have been sexually abused. Around half of these victims were current/acute (**152**) and half (**145**) were historic victims.

Victim Profile Bases on Support Service Data

- The majority are female (commissioned in 2015/16 as a female only service)
- 12% are from a BME background⁷³. DACT commission for 19% of all individuals to be BME. This was achieved in Quarter 1 2016/17 but will be closely monitored for the rest of the year, given the difference between the total referral figure and the total who engage with the service.

Action - There is a need to closely monitor the engagement of BME individuals with sexual abuse support services to ensure that the service meets its BME target for the proportion of victims in support.

- 6.7% of those asked are LGBT⁷⁴. DACT commission for 1% of the caseload.
- 79% are aged between 18 and 44 years old, with 3% aged 17 years or younger. The service also has some individuals who are aged 65 years or older.

The details on the nature of the sexual abuse, risk factors and relationship to the perpetrator

- The presenting incidents were as follows - rape (39%), child sexual abuse (40%), sexual violence (17.8%), domestic abuse (1%) and sexual exploitation (1.8%).
- The proportion of referrals accessing support due to sexual abuse that happened only during childhood is unknown.
- 28% of cases in 2016/17 have victims who are related to the perpetrator (current/ex-partner, relative, and therefore fit the definition of the domestic abuse⁷⁵. This was more likely to be the case for victims who reported the incident had been in the last two years (e.g. 87% had a perpetrator who was related to them).
- In addition to sexual abuse, victims disclose a number of additional risk factors. The full list is

⁶⁹ Action, Ashiana, VIDA, YWHP, STH Children's assessment unit for sexual abuse victims, Roundabout, Shelter.

⁷⁰ It is unknown the number referred who had been a victim of both sexual abuse and sexual exploitation, this reads as the two are separate.

⁷¹ There is overlap in activity with that reported on the needs assessment questionnaire, but this shows the number accessing specialist domestic abuse services.

⁷² Minimum dataset 2015/16

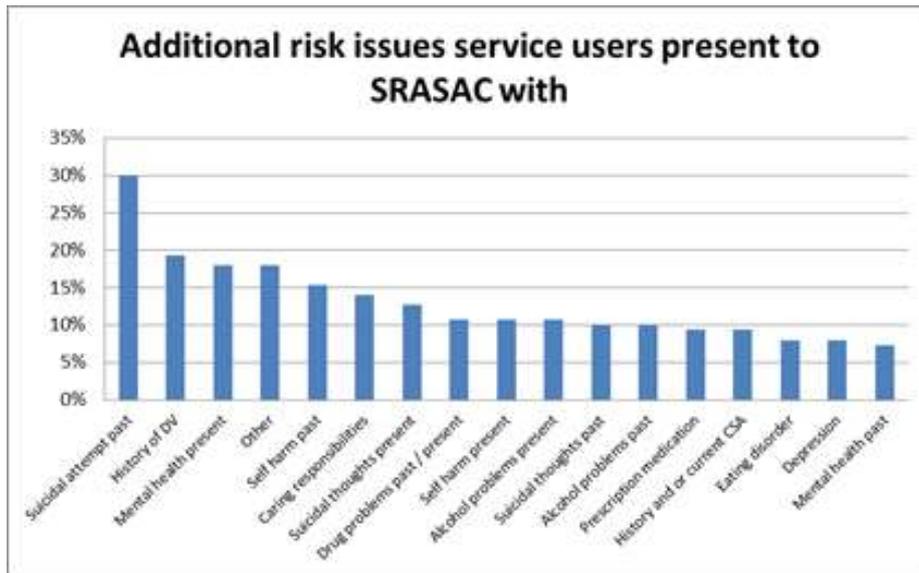
⁷³ Of those with an ethnicity recorded (34/281)

⁷⁴ PMF 2015/16

⁷⁵ PMF 2016/17



found in the graph below.



- Of the 150 victims with additional risk factors listed, one third had attempted suicide in the past, 19% had a history of being a victim of domestic abuse, and 18% had a current mental health condition. Other factors including self-harming (past and present) and substance misuse problems (drugs and or alcohol, past and present). The majority of individuals with a risk factor listed, had multiple factors listed. This shows that SRASAC are working with a significant number of people who have very complex needs.
- The minimum dataset provides some additional information about the nature of the abuse suffered in a domestic abuse relationship. It also provides insight into the support required within these services for victims of sexual abuse. The MDS reveals that the majority of those also experiencing domestic abuse (80%) were accessing support from the domestic abuse high risk or medium and standard risk service provider, commissioned by DACT. 51% were high risk domestic abuse and 40% medium risk. For current victims the perpetrator was most likely (84%) to be the current/ex-partner/spouse, 54% reported severe sexual abuse and 33% reported moderate sexual abuse. A third (29%) reported that the sexual abuse was escalating and was increasing in frequency.

Victim Engagement with SRASAC

The current status of the 438 individuals (as of 31st March 2016 using the SRASAC dataset) was that 62% or 272 (three out of every five referrals) are either on the waiting list, receiving support or had a successful exit. It also means that 38% disengaged with the service (stopped attending, inappropriate referral, dropped out or declined the service). The data for those who dis-engage with the service does not provide any insight into the amount of work undertaken with the service user prior to dis-engagement.

Forecast - It is expected that the demand for specialist sexual abuse counselling will increase over the next two years. This is because in the last five years there has been an increase in the number of victims reporting incidents, there is an increase in the number supported by an ISVA and an increase in more acute victims presenting for specialist support.

Outcomes – SRASAC performance data for the DACT contract shows that the service is expected to have 75% of all victims who start support to have a successful exit, and this is currently being achieved in 2016/17, which is extremely encouraging as this is an improvement on the 54% experienced in 2015/16.



The DACT contract with SRASAC does not include measures of 'softer outcomes' e.g. how safe did the service user feel at the end of the support? How has the service user's confidence changed? Softer outcome measures are included in contracts shared by other Local Authorities and in other contracts in Sheffield LA.

The service has a locally produced feedback from which is sent to service users at the end of their time in support. There is a need to receive the 'softer' feedback into the service and for this to be shared with DACT so commissioners build a more comprehensive understanding of service user outcomes and experience of the service.

Action – DACT and SRASAC to work together to build a profile of outcomes using 'softer measures' and consider including 'softer outcome measures' based on service user feedback in new contracts going forward.

Acute to Historic Ratios of Victims in Support

The local experts⁷⁶ explained that often acute victims are not ready for counselling support immediately after the incident, and that they can't receive counselling if they are going through the criminal justice process⁷⁷. Therefore most cases for counselling are historic. This is indeed the case; with SRASAC data showing that for 70% of victims the incident took place two years or more prior to presenting at the service of the victims. The issue about ratios between acute / historic victims is significant because it affects commissioning as outlined previously, the current commissioning is eight acute and 60 historic new cases per annum, which means 11% of cases are likely to be acute.

SRASAC data however suggests there might be a greater need for acute places. For example their 'current' status of victims at the end of 2015/16 showed that 15% of victims presented within one month of the incident and a review of the most current performance data (Q3 2016/17 YTD) shows that acute victims account for 15% of those in support⁷⁸. This contradicts the view shared by local experts, where the suggestion was that acute victims were less likely to present for support due to the criminal justice process or would drop out as the process started. Interestingly when the date of the incident is viewed compared with the drop out data⁷⁹, 43% of all drop outs experienced the incident two or more years prior to receiving counselling.

The service has explained that significant change impacting on an increase in acute numbers is the changes to the ISVA commissioning in 2016/17, with more service provision based in Sheffield and provided by the same service. This is supported by the service stating that *'Our ISVA continues to have an increasing caseload, mostly of acute rape and sexual assault cases. Some of her clients are being referred into our counselling service and we have more clients receiving pre-trial therapy than before'*.

SRASAC have also noted that *'over recent months it has become apparent that there are far more survivors choosing to report than previously'*, they explain that *'recent media coverage of CSA and high profile rape cases may be a contributing factor, as survivors have increased confidence of being believed and taken seriously by the Police and CPS'*⁸⁰.

Action – Work with SRASAC to monitor the proportion of acute cases presenting for support, to determine if there is a change, to ensure sufficient acute capacity is available and service provision is appropriate.

⁷⁶ Expert group feedback 2016

⁷⁷ Counselling can be received but the incident cannot be discussed due to court proceeding. This makes it difficult to provide counselling support, therefore often the counselling stops but is re-started after the court hearing.

⁷⁸ Data did not track acute as '3 months or less' in 2015/16; this has changed in 2016/17. In 2015/16 the 5% is the total of all those who accessed the service six months or less after the incident, data from SRASAC.

⁷⁹ Drop out criteria include Declined service, Deferred, Did not engage, Disengaged, Full Group only, Inappropriate Referral, Infrequent, New referral, Not brought to service, Planned Closure, Referred on and Unplanned Closure.

⁸⁰ SRASAC Q4 performance meeting – the summary of provider feedback



Developments of the SRASAC service

The SCC contract with SRASAC specifically commissions the service to develop to meet the changing needs of the service user group. The contract states that the provider should continually and routinely ask for service user feedback, to ensure individuals' needs are met as part of the service and respond accordingly to ensure an improved service user experience.

CPS rules prohibit clients from attending groups in the period leading up to the court hearing⁸¹ and this has negatively impacted on number of victims attended the group work following referral and prior to one to one support starting. Therefore based on service user's feedback about their need post counselling group, commissioners have agreed to use the capacity for pre group work, as post group work capacity. *'Our first user group will take place in the third week of July 2016. The outcomes of that group work will inform the development and delivery of the post counselling groups that will be delivered later in the year'*. Activity will be monitored and the outcomes of this work reviewed by commissioners.

In February 2016 SRASAC ran a 10-week Helpline Volunteer training course, and had 23 new volunteers attend.

The SURG was not consulted on sexual abuse and consultations with users of sexual abuse services did not take place as part of the needs assessment process. Service user consultation is required when future commissioning of sexual abuse services takes place, to ensure commissioning factors in the needs of service users at the time.

- **For details on mental health and sexual abuse see the Therapeutic service provision section 18**

'Ask for Angela' Campaign

'Ask for Angela' is a new campaign that is being launched in Sheffield during 2017. The aim of the campaign is to protect victims in a bar who are feeling vulnerable on a date. This might be feeling threatened, they may be meeting someone they've met online and feel uncertain, unsafe, 'weird', or feel threatened. The project is to advertise how these individuals can go to the bar and 'Ask for Angela' which acts as a code to the bar staff. The member of staff can arrange for a safe exit or a taxi.

This is an initiative that has been run in Lincolnshire and has had some success. Sheffield launched the campaign at the recent 2017 Best Bar None (BBN) Awards ceremony.

Bar staff will be briefed in the process, bars are being encouraged to take up the initiative and Sheffield is considering making 'Ask for Angela' one of the BBN safety criteria in the 2018 assessment process. The local sexual abuse service has involved in the development of the campaign, and they will provide the briefings for licensed premises.

Action – Launch the 'Ask for Angela' project in Sheffield and monitor the outcomes.

Local experts group were asked a series of questions on sexual abuse and fed back the following -

- Support is almost impossible to receive during ongoing court proceedings because the case cannot be mentioned. Therefore the service finds a number of individuals have to stop support once the prosecution of the perpetrator starts. This was seen by experts supporting the victim as very difficult because at the time when the victim needs support themselves, they are put in a position where the therapeutic support received must be limited.
- Most children / young people are sexually abused by a person known to the victim – a parent or

⁸¹ SRASAC Q1 performance meeting – the summary of provider feedback



relative.

- Increasing victim and worker awareness of sexual abuse is needed because:-
 - A number of victims do not acknowledge that rape can happen in marriages; therefore this is often not reported to the police or disclosed to support workers. This was raised as being a particular issue in some BME community groups.
 - Additional work is required to increase awareness of sexual abuse of those working in a school setting.
 - Stranger sexual abuse is more likely to be reported – more social acceptance and less shame to admit / acknowledge?
- Increased awareness and reporting of child sexual exploitation has been observed following recent media and news exposure, and this has increased young people's awareness.
- The STH representative suggested there is work to be done in STH, as the Safeguarding team does not/ has not received sexual abuse referrals.
- Generic services often have generic IT case management systems making it difficult to record sexual abuse activity (e.g. SystemOne used by GPs); therefore it is likely that the abuse will be recorded in free text and not easily accessed as a dataset.

Action – Start monitoring the SRASAC activity for the age of the service user at the time of the incident/ abuse period to determine the proportion on the caseload that are seeking support for incidents of child sex abuse and continue to monitor the waiting time for assessment.

Action – Consider how to work with SRASAC to increase service user engagement in the needs assessment and commissioning process.



Part 2.7 Health and Sexual Abuse

National guidance

There is no specific Department of Health guidance on sexual abuse / violence. The guidance available incorporates sexual abuse in the term 'abuse'. The following guidance is applicable and details sexual abuse commissioning, specialist support and treatment.

NICE National guidance - Domestic violence and abuse: multi-agency working

<https://www.nice.org.uk/guidance/ph50> guidance specifically states recommendations for sexual violence commissioning, service user and professional consultation, training of professionals and service provision. NICE recommends level 4 training for those working directly with victims of sexual abuse.

Latest Department of Health Domestic Abuse guidance – Responding to domestic abuse: a resource for health professionals, comprehensive guide for all health professionals including NHS staff including staff working in NHS commissioned services and staff in partnerships working with adults and children. The guidance has links to NICE PH50.

The guidance recognises that *'health services through GPs, health visitors, midwives, emergency departments, ambulance and sexual health clinical staff who are the first point of contact for people suffering from abuse'*⁸².

Health professionals are likely to see victims presenting with the following symptoms⁸³

Indicators are presenting problems or conditions that are associated with domestic violence and abuse	
symptoms of depression, anxiety, post-traumatic stress disorder, sleep disorders	vaginal bleeding or sexually transmitted infections
suicidal tendencies or self-harming	chronic pain (unexplained)
alcohol or other substance use	traumatic injury, particularly if repeated and with vague or implausible explanations
unexplained chronic gastrointestinal symptoms	problems with the central nervous system – headaches, cognitive problems, hearing loss
unexplained reproductive symptoms, including pelvic pain and sexual dysfunction	repeated health consultations with no clear diagnosis
adverse reproductive outcomes, including multiple unintended pregnancies or terminations,	intrusive 'other person' in consultations including partner or husband, parent, grandparent or
delayed pregnancy care, miscarriage, premature labour and stillbirth	an adult child (for elder abuse).
unexplained genitourinary symptoms, including frequent bladder or kidney infections	
Source - NICE PH50	

The guidance⁸⁴ description of the health role response is found in the figure below:-

⁸² Department of Health Domestic Abuse guidance Responding to domestic abuse: a resource for health professionals, March 2017

⁸³ NICE National guidance - Domestic violence and abuse: multi-agency working <https://www.nice.org.uk/guidance/ph50>

⁸⁴ Department of Health Domestic Abuse guidance Responding to domestic abuse: a resource for health professionals, March 2017



Health
Acknowledge the disclosure. Being believed is very important.
Address presenting physical injuries and refer for more serious injuries.
Undertake a comprehensive physical and mental health assessment.
Refer to appropriate health services as relevant, for example:
<ul style="list-style-type: none">• maternity services• Sexual Assault Referral Centre (SARC) in the case of sexual abuse.⁶³• substance misuse services• trauma-focused mental health treatment.
If you are not the GP, refer to a GP for a psychological or mental health assessment for a decision on suitable therapy.
NHS psychological therapy, physical or mental health treatment.

- A recent Questionnaire completed by 117 GPs in Sheffield reveals that 48% of GPs had seen a patient in the last year when sexual abuse was disclosed.

Forecasts –

- It is expected that more people will present to health services with sexual assault symptoms,
 - general confidence is growing in victims reporting incidents which may also mean that victims are becoming more open to disclosing incidents to other professionals
 - Health practitioners are trained in sexual abuse identification, disclosures and effective response.

Action - Given that 48% of GPs consulted had seen a sexual abuse victim in the last 12 months there is scope to explore with GPs what further training and support they need to provide these victims with a confident and effective health response and onward referral to specialist support as per the Responding to domestic abuse: a resource for health professionals guide.



Part 2.8 – Vulnerabilities and Risk Factors

Sexual Exploitation

The Sexual Exploitation Transitions Project in Sheffield and the Sheffield Sexual Exploitation Strategy are currently using the following definition “*Sexual exploitation involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive ‘something’ (e.g. food, accommodation, drugs or alcohol, cigarettes, affection, gifts or money) as a result of them performing, and /or another or others performing on them, sexual activities. Sexual exploitation can occur through the use of technology without immediate recognition...In all cases, those exploiting 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 limited availability of choice resulting from Social/ economic and or emotional vulnerability....*” (DCSF, 2009, pg. 9)

The statutory definition of ‘*child sexual exploitation*’ was updated in February 2017 (see Part 2 Children and Young People). ‘*Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology*’⁸⁵.

Some, but not all sexual exploitation takes the form of trafficking and modern day slavery. There are also links between prostitution and sexual exploitation (by pimps), and gangs.

Estimated number of victims and those vulnerable to sexual exploitation in Sheffield

The data in Sheffield is very limited (as it is nationwide). The reasons for this include it being an emerging issue, lack of data collection tools, sporadic reporting and the identification of victims is challenging. For example a prostitute may be a victim of sexual exploitation but not recorded or dealt with by a service as sexual exploitation.

One of the aims of The Sexual Exploitation Transitions Research Project is to introduce a local dataset to build an understanding of the issue in Sheffield, alongside building on data from other areas (e.g. Newcastle have identified 500 potential victims and have 80 in support) with the aim of projecting the support need for Sheffield victims in Sheffield.

Sheffield Futures are the service commissioned by SCC to provide direct support to children and young people who are victims of sexual exploitation. <https://www.sheffieldfutures.org.uk/about-us/sheffield-sexual-exploitation-service/>

Details relating to sexual exploitation have been extracted from the Needs Assessment services questionnaire which revealed that in 2015/16 around 100 victims were on caseloads for sexual exploitation at the following services – Ashiana, YWHP, IDVAS, SARAS, Vida, Roundabout and Roshni. Of these services only Ashiana is commissioned to support victims of sexual exploitation (where they are victims of trafficking), however IDVAs are commissioned to support high risk victims of all forms of domestic abuse which can also include sexual exploitation. The same number of victims were also reported as being victims of trafficking. It is not known how many of these victims can to Sheffield as a result of trafficking or in order to receive support.

Victims appear to be more likely to be present at housing services – refuge, supported accommodation and particularly those services who work with young people (YWHP and

⁸⁵ *Child sexual exploitation - Definition and a guide for practitioners, local leaders and decision makers working to protect children from child sexual exploitation*, February 2017 <https://www.gov.uk/government/publications/child-sexual-exploitation-definition-and-guide-for-practitioners>



Roundabout). The questionnaire did not focus on sexual exploitation in any further detail (and therefore was limiting in terms of needs observed by these services) but it does provide some insight into where victims are being supported or presenting for support.

The Sexual Exploitation Transitions Research Project remit includes having a better local understanding of the needs and risks of sexual exploitation victims aged 18 and over, those vulnerable to sexual exploitation and child victims of sexual exploitation who are now adults.

The Sexual Exploitation Transitions Research Project⁸⁶⁸⁷

The Sexual Exploitation Strategy is for victims of sexual exploitation aged up to the age of 25 years. Transition describes where victims are moving from been classified under law as a young person and therefore part of the safeguarding children's statutory regulations to becoming an adult and being under adult statutory regulations which are not as robust and relate primarily to adults with care and support needs. There is a potential gap for supporting victims of sexual exploitation who are transitioning from child to adult and ensuring adult victims are supported.

Initial recommendations of the project have been:-

- to introduce data collection in health and social care and police settings using it (to build a better understanding of victims in these settings),
- have an agreed definition of sexual exploitation,
- to promote a simple message to educate those who may be affected and inform them on how they can contact support and advice (based on the fact many do not realise they are being sexually exploited)
- to continue to gather and share soft intelligence
- Consider support options to meet the identified need
- To use MARAC to discuss the high risk cases of sexual exploitation with regard to 18 year olds and over

The second part of the project is to create a process to meet the needs identified. The project aims to deliver a model from the point of referral to exit from the service, a referral pathway, create definitions of standard, medium and high risk sexual exploitation, provide screening tools for staff, introduce data collection and provide workforce development for staff. Consideration of the specialist support required is also being taken.

The report explains that any future sexual exploitation service will need to be effective at partnership working with health service, the police, social care and the NGO as well as having strong links with agencies working with victims of modern slavery, those working with gangs in Sheffield, IDVAS, ISVAS, CHISVAS and the domestic abuse services.

The project is scheduled to end in November 2017.

Human Trafficking and Modern Day Slavery

Forms of sexual exploitation include Human Trafficking and Modern Slavery. UK Legislation on sexual exploitation and trafficking is found in The Sexual Offences Act (2003) (sections 57-62) and the Modern Day Slavery Act (2015). The legislation provides the legal framework to protect victims and persecute offenders.

The International definition of Human Trafficking was agreed at the Palermo Conference in 2000 and is found in Article 3 of the *Palermo protocol to prevent, suppress and punish trafficking in persons*,

⁸⁶ Sexual Exploitation Transitions Project, Jo Pass, 24th February 2017

⁸⁷ Sexual Exploitation Transitions Research Project, Jo Pass, 8th February 2017, Project Steering Group Update



especially women and children, supplementing the United Nations Convention Against Transnational Organized Crime⁸⁸.

“Trafficking in persons” shall mean:-

(ACT⁸⁹) the recruitment, transportation, transfer, harbouring or receipt of persons,

(MEANS) by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception,

(PURPOSE) of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs

For adults all three (Act, Means and Purpose) have to have taken place but additional conditions⁹⁰ to the definition (see footnote below for the full text) explain that a child is aged 18 years or younger and for a child only the Act and the Purpose and not the Means has to have taken place.

Estimates on the number of people trafficked, with particular reference to sexual exploitation in the UK each year are limited and at this time are unavailable. The same applies to local data.

Data from the NRM – referrals to The National Crime Agency⁹¹ National Referral Mechanism (NRM)

The NRM records four forms of abuse - sexual exploitation, domestic servitude, labour exploitation and other exploitation. It provides some insight into the number of referrals made for potential victims of these crimes and the number who have been found to be a victim. The report explains that this is not an indication of prevalence of these crimes in the UK.

The National Referral Mechanism process - is a framework for identifying potential victims of human trafficking and ensuring they receive the appropriate protection and support. A five day review follows each referral and if there is reason to take the case further then the individual is placed in a Ministry of Justice safe house (if required) for 45 days. During this 45 days period further investigative work is undertaken to review the case. Following a positive outcome discretionary leave to remain in the UK may be granted to the victim or individuals returning to their country of origin may receive assistance to return (if outside the European Economic Area (EEA) or be given details of the embassy if in the EEA national). In cases where the referred person is determined not to be a victim, then assistance is provided to return to their country.

NRM data

- In 2015 the NRM received a total of 3,266 referrals encountered in the UK.
- Total UK referrals have increased annually in the last three years, with an increase of 40% between 2014 and 2015 (from 2,340 to 3,266).
- Of the UK total, 90% or 2,934 were encountered in England.
- 50% of the total NRM referrals are by a Government agency e.g. Home office. 23% (or nearly one in four) were Police referrals, 17% third sector and 9% LA.
- The NRM records four forms of abuse - sexual exploitation, domestic servitude, labour exploitation and other exploitation.

⁸⁸ A Guide to the UN Palermo Protocol, www.no-trafficking.org/.../guide_to_the_new_un_trafficking_protocol.pdf

⁸⁹ Defining Human Trafficking (August 2014) www.hopeforjustice.org

⁹⁰ Additional conditions of the protocol definition are as follows:- Additional conditions (b) The consent of a victim of trafficking in persons to the intended exploitation set forth in subparagraph (a) of this article shall be irrelevant where any of the means set forth in subparagraph (a) have been used; (c) The recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation shall be considered “trafficking in persons” even if this does not involve any of the means set forth in subparagraph (a) of this article; d) “Child” shall mean any person under eighteen years of age. A Guide to the UN Palermo Protocol, www.no-trafficking.org/.../guide_to_the_new_un_trafficking_protocol.pdf

⁹¹ <http://www.nationalcrimeagency.gov.uk/publications/national-referral-mechanism-statistics>



- Sexual exploitation is second to Labour Exploitation as the most frequent form of exploitation in trafficked adult victims referred to the NRM. 36% or 215 of 599 cases referred July to September 2015 was for **sexual exploitation** which accounts for just over one in three referrals.

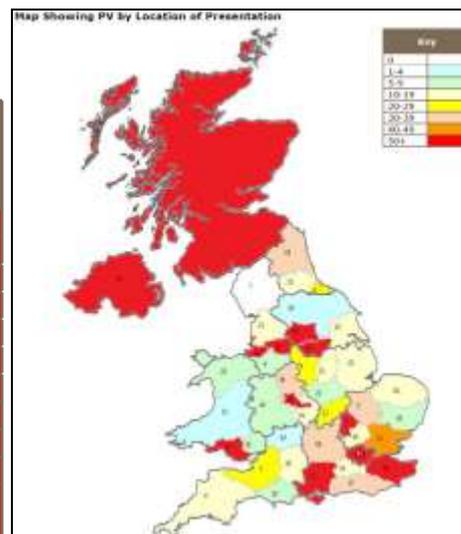
Of those who were referred due to alleged sexual exploitation the following details are provided:-

- 93% or 200 female victims
- 46% (100) were aged 21 to 30 years and 28% (61) were aged 31-40 years. 27 were aged 18-20 years. But when positive outcomes are observed, there were more confirmed trafficking cases for individuals aged 21 to 30 (15) and aged 18-20 years (11).
- 60 were 'minors'. 27 were aged 16 or 17 years old, 20 aged 12 to 15 years and 10 were 18 years old.
- 48 sexual exploitation conclusive decisions were made in Q3 and 70% of these (35) were positive. This suggests around 140 victims were found to have been sexually exploited in 2015 by the NRM.

Local NRM referrals

- 63 potential victims were referred to the NRM in the South Yorkshire Police Force Area (see table below which shows the top 12 police force areas in the UK for referrals which all have more than 50 referrals).
- South Yorkshire is in the top ten for police force areas where individuals are identified and referred to the NRM.

Location of Presentation (Police Force Area)	Total
Metropolitan	1104
West Midlands	314
West Yorkshire	235
Greater Manchester	144
Police Scotland	144
Merseyside	128
South Wales	107
Kent	88
Bedfordshire	83
South Yorkshire	64
Hampshire	54
PSNI	52



Referrals to the NRM for Sheffield victims were as follows:-

- 79% (50 of the 63) were Home Office which is significantly greater in proportion to the 50% observed nationally from Government agencies.
- Eight (8) referrals were made by South Yorkshire Police⁹²; two were made by the local authority, two by other police forces and the remaining by third party agencies.
- Of the eight SY police referrals, three were for sexual exploitation. Total police referrals account for 16% of all referrals, which is significantly less than the national average of 23%.
- South Yorkshire Police ranked 23 out of 42 for referral to NRM but South Yorkshire is in the top 10 for total referrals.

Outcome following referral

- 1,224 cases (44%) of the 3,266 referrals in 2015 reached a conclusive decision.

⁹² National Crime Agency, *National Referral Mechanism Statistics – End Of Year Summary 2015*
<http://www.nationalcrimeagency.gov.uk/publications>



- 674 (or 47%) received a positive conclusive decision, which means that the individual was determined to have been a victim of human trafficking.
- 768 (53%) had a negative outcome (Negative decision or not enough evidence to reasonably confirm the individual was a victim of trafficking).
- The table below shows the data for 2013, 2014 and 2015. The number of referrals is increasing year on year, but the case outcomes remains stable, between 47% and 51% have been confirmed as trafficked, but due to the increase in referrals the actual number of individuals confirmed as being trafficked is increasing (674 in 2013 compared with the 819 in 2015).

Year	Total number of NRM referrals	Positive conclusive decisions (A)	Negative (RG or CD) (B)	Total outcomes (A+B)	% of positive out of the total positive and negative (RG or CD) decisions	Pending decision (RG or CD)	Suspended cases	Cases Withdrawn from process	Total withdrawn or suspended
2015	3,266	674	768	1,442	47%	1,662	87	75	162
2014	2,340	834	924	1,758	47%	470	54	58	112
2013	1,745	819	776	1,595	51%	19	64	67	131
RG = reasonable grounds									
CD = conclusive decision									

An increase in activity year on year to the NRM means there is a greater likelihood of social care, health care services, third party services, the police and specialist domestic and sexual abuse services in Sheffield being in contact with victims in the future, if not currently, as more cases are referred to the NRM and more cases come to a positive conclusion.

Support for victims of human trafficking is available in a number of services in Sheffield, Sheffield Futures, Ashiana and Hope for Justice, the Snowdrop project and City Hearts.

Action - Domestic abuse and sexual abuse workers need to be trained in identifying potential victims of sexual exploitation, including those who have been trafficked, understanding how to refer to the NRM and how to work with victims.

Prostitution / Sex Work

Research undertaken into prostitution and violence⁹³ has observed that the majority of women working as prostitutes will have experienced sexual abuse and domestic abuse, including being raped and seriously sexually assaulted.

The table below shows the data in four studies into this area. Each is a relatively small study but together they build a picture that women working as prostitutes are particularly vulnerable to being a victim of sexual assault.

⁹³ Toyne Hall, *Statistics on prostitution in London and the UK*, June 2009
http://www.toynehall.org.uk/data/files/Statistics_on_prostitution.pdf



Finding	Study	Details
At least three-quarters of UK women in prostitution have been physically assaulted. More than half have been raped and/or seriously sexually assaulted. (See Table 2a)	Hester & Westmarland Home Office 2004b	Based on 140 women in Hackney, Hull, Kirklees, Manchester, Stoke-on-Trent in July 2004
73% of women said they had been attacked by punters in the previous 12 months, 60% had been badly beaten or raped. 42% had been attacked on more than three occasions, in the past 12 months.	Dodd (2002)	Multi-centre survey of 110 street workers, in 18 towns and cities (for Channel 4 TV)
81% of women involved in street prostitution had experienced client violence (compared to 48% of indoor workers) (See Table 2b)	Church et al, 2001	115 women, Leeds, Edinburgh & Glasgow,
Three quarters of women in street prostitution report being subjected by clients to physical, sexual or other forms of violence.	May et al, Home Office 1999	67 women working in three cities in the UK

Sheffield Working Women’s Opportunities Project (SWWOP) <http://www.swwop.org/> was consulted as part of this needs assessment process. Sali Harwood, the manager of the service confirms the findings about sex workers being vulnerable not just sexual and domestic but abuse in general too. ‘The majority of our service users are involved in some form of abuse from partners, punters, sometimes the other women on the street and the public’. It was explained that the frequency of abuse was daily for some women (those who lived with an abusive partner) but for others it was more sporadic by some punter on the streets.

In terms of the support offered to sex workers, the service said that services users were ‘open to sharing their experiences with workers’ and that the majority had support needs for TLC, drug & alcohol treatment and to be able to speak freely about their lives (which is what usually happens). For service users who they know suffer frequently from domestic abuse these are supported and referred to the help-line, MARAC & the police etc.

An issue raised by SWWOP was that ‘Many need counselling but cannot access counselling while ever they are using drugs & alcohol’. Which is perhaps becoming more problematic as the service has noted an increase in sex workers using ‘legal highs’ & other substances.

SWWOP provide advice and support for sex workers to access specialist domestic and sexual abuse support services. They refer to MARAC, the helpline, refuge support etc. One to one counselling has been offered at their premises and they have referred women to SWCT Service <http://www.swcts.org.uk/> and to SRASAC.

SWWOP is currently involved with Ugly Mugs (a national initiative) and work with the sexual exploitation project. They regularly attend MAPPAs meetings regarding violent men known to abuse ‘sex workers’.

Performance data for commissioned domestic abuse support services has been updated in 2016/17 and for the first time in the monitoring process the number of sex workers engaged with support services is being recorded. In the nine months between April 2016 and December 2016 the number of sex workers engaged in the support process is less than 10. This will continue to be monitored.



The use of technology in abuse including revenge porn, harassment and grooming– see Part 2 on sexual abuse where it is discussed in-depth

The VAWG strategy has five actions (28-32) that aim to reduce the use of technology as a form of abuse by perpetrators. These actions are for technology users and victims of any age but cited in the children and young people’s section as they are one of the main cohorts at risk to these forms of abuse.

Action 32 also recognises that technology can be used positively, and can be used by support services to raise awareness to and support victims.

PREVENTING ONLINE ABUSE AND EXPLOITATION			
REF	ACTION	LEAD	DELIVERY DATE
28	Establish an official Government working group to map out current issues, prevalence, initiatives and barriers to addressing gendered online abuse to improve understanding and co-ordinate the response to online manifestations of VAWG.	GEO / HO	December 2016
29	Publish the Government response to our consultation on age verification mechanisms to restrict access to pornographic websites by those under 18 and set out next steps.	DCMS	Summer 2016
30	Continue to ensure victims of revenge pornography have access to bespoke support and advice about their right to have the images removed from website.	GEO	Review April 2017
31	Work with law enforcement and online safety forums to analyse and understand the risks posed to women by online dating services and ensure appropriate safety advice is provided.	HO	September 2016
32	Explore options for using new technology to support victims, for example promoting the development of mobile phone Apps to help victims of forced marriage and stalking.	HO	December 2016

Local experts explained that there is a growing emerging issue on the use of technology in domestic and sexual abuse, particularly as technology is used as a main form of communication between young people via the use of social media.

SafeLives⁹⁴ explains that those causing harm use technology as a controlling form ‘*Social networking sites provide perpetrators with opportunities for control and online tracking, and can limit a victim’s ability to protect themselves. They also explained that ‘Young people’s use of new technologies makes (them) more vulnerable to being controlled’.*

SafeLives describe a number of forms of coercive abuse that is used by those causing harm on social media:-

- *repeated text messages/ contact via social media to find out where someone is and/or requests for photo evidence,*
- *abusive texts / messages/ postings,*
- *being forced to share passwords to the person causing harm so they can access all the victim’s social media content,*
- *‘Being encouraged to send compromising and/or illegal explicit sexual images of themselves, or to ‘talk’ in an explicit sexual manner, often with threats or blackmail that this will be sent to others’⁹⁵.*
- *‘Contact from adults pretending to be younger, which can lead to grooming’.*

In-depth focus

- ‘Revenge porn’ – South Yorkshire police T/Detective Inspector Richard Wallis’s presentation⁹⁶ on revenge porn explains that Section 33 of the Criminal and Justice Courts Act 2015 has made

⁹⁴ Practice briefing, Working with young people experiencing relationship abuse, www.safelives.org.uk

⁹⁵ Young people at risk: online intimate abuse and coercive control www.safelives.org.uk



revenge porn an offence. The offence is described in the act as '*It is an offence for a person to disclose a private, sexual photograph or film if the disclosure is made – a) without the consent of an individual who appears in the photograph or film, and b) with the intention of causing that individual distress*'.

The definitions:-

Disclosure – when it is given or shown to or made available to the person (victim in the image) regardless of whether it has previously been given

Private - something that would not ordinarily be shown in public

Sexual - if it shows 'any part of the person's genital or pubic area', it shows something a reasonable person would consider sexual because of its nature or the whole content would be considered sexual by a reasonable person.

Photograph or film – is found in one or more photographs or filmed images (not photo-shopped or completely computer generated images)

Intent – the disclosure must have been made with the deliberate intention to cause the person in the image distress (extreme anxiety, sorrow or pain'.

T/Detective Inspector Richard Wallis explained it had been introduced following an increase in the number of incidents of revenge porn.

In England and Wales during 2015/16 there were 206⁹⁷ perpetrators charged and successfully prosecuted under the Criminal Justice and Courts Act 2015 section 33 - 33(1) and (9) } - Disclose private sexual photographs and films with intent to cause distress.

- *'Internet and social media relationships with adults pretending to be younger.*

There have been a couple of domestic homicides where the young victim who died had met the person causing harm online. The victim perceived themselves to be in a 'relationship' with the person and the death occurred on one of the first physical face to face meetings.

Social media abuse may limit support options for some victims - SafeLives explain that social media and technology forms of abuse described are most prominent in young people's relationships however adult service users in Sheffield also explained how technology was used by their adult perpetrator. These forms of abuse are therefore also relevant to older victims of abuse and therefore need to be also considered by adult services too, as the use of technology develops and as society uses it more and more.

The coercion abuse of limiting the victim's access to social media and the internet can also impact on their ability to seek advice and support. For example Comic Relief explains that *'Many women and girls in abusive relationships are unable to use technology safely or proactively to access support'*⁹⁸.

Using social media for support - Sheffield has a number of support recourses that can be accessed remotely and via the website. The website is accessible to victims of all ages which is well used (see section 12 'referrals into domestic abuse support for full website data), however the website does not have a section for young people specifically.

Support in the commissioned adult support services (which also support young victims) is not currently provided via social media, however Comic Relief and SafeLives have both in 2017 suggested the using social media to engage with young victims could be an effective form of support, given that this is their preferred choice of communication. This would be an option for young victims who were not victims of social media and the internet abuse.

⁹⁶ Sheffield and Rotherham Safeguarding Adults Team (SAT), T/Detective Inspector Richard Wallis

⁹⁷ Pornography - obscenity offences 2009-2016

⁹⁸ <http://www.comicrelief.com/grants/initiatives/tech-vs-abuse>



Action – The use of social media as a form of support needs to be explored further with young people and victims who use social media and would like it either to enhance the one to one specialist support available or instead of the one to one support. The domestic and sexual abuse website needs to be reviewed by young people to see if it is user friendly for young people.