

Research Excellence for Innovation

Research into the Public Confidence of People with Mental Health Concerns in the Police Complaints System

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Executive summary

Aims

This report describes findings from a research project commissioned by the Independent Office for Police Conduct (IOPC) and conducted by the Institute of Mental Health from January to September 2018. The aim of the research was to explore the confidence that people with mental health concerns have in the police complaints system and their likelihood and ability to engage with it. Specific objectives were to gain an understanding of:

- Levels of awareness and understanding of the police complaints system
- Confidence in the system
- Accessibility of the complaints system
- Actual and perceived challenges around the police complaints system.

Methods

A mixed methods approach was taken to enable us to develop both a general picture of the perceptions and views of the target group but also generate more in-depth knowledge from individuals about their confidence in the police complaints system.

A survey of people with mental health concerns in England and Wales was distributed via third sector and community groups working with people with mental health conditions, and via Twitter. A total of 89 individuals completed the survey. In addition, six

focus groups were conducted with a total of 45 people with a range of mental health conditions and from a variety of geographical regions and demographics where possible. The survey results should be interpreted with caution due to the small sample size.

Key findings

Knowledge of the IOPC

- 42% of participants in the survey (n=37) had not heard of the IOPC or IPCC. Many focus group participants had also not heard of the IOPC, but more had heard of the IPCC¹.
- The operational relationship of the IOPC with the police was not seen as independent, with 54% (n=48) of survey respondents reporting that they were not confident that the IOPC deals with its work in an impartial way.
- Some understood that the IOPC was an organisation that could be used to make a complaint against the police if you wanted to, but most did not.
- Participants viewed the IOPC's focus as high profile media cases of alleged and actual police misconduct rather than complaints they might have based on less serious incidents.

Knowledge of the police complaints system

 60% of survey respondents reported that they were not confident in their knowledge of how to make a complaint against the police.

names were used in the survey and focus group questions.

¹ The IOPC changed its name on January 8th 2018, having previously been called the Independent Police Complaints Commission (IPCC), hence both

- Focus group participants' knowledge
 of the police complaints system was
 mixed, with varying levels of
 awareness and understanding of how
 to make a complaint against the
 police. This impacted on the likelihood
 of them making a complaint.
- Aspects of the complaints system
 were understood by some focus group
 participants: e.g. knowing that a
 complaint could be made to a police
 officer or at a police station; that
 police officers' identification numbers
 were helpful if a complaint was to be
 made against that officer; or that the
 IOPC/IPCC could be used for appeals.
- Some focus group participants reported not knowing that there was a complaints system or that they had a right to complain against the police.
- Local barriers were perceived by focus group participants, including the need for participants to remember and obtain police officers badge numbers, and no-one highlighting to them that they had a right to complain about the interactions with the police that they had experienced.
- Even when they were aware of their rights, some did not feel in a position to make a complaint due to the perceived power imbalance between participants and police and a lack of understanding as to what constituted grounds to make a complaint.
- There was a lack of clarity about the time limit on making a complaint.

- Participants felt it was counterintuitive and counterproductive to be making a complaint to the place where the problem was located due to perceived lack of neutrality.
- 67% of survey respondents were not confident that the police deal fairly with complaints made against the police. This compares with 32% of the general population².
- Many believed that there were negative consequences to bringing a complaint against a police officer or the police force; some were scared to make a complaint or get involved in a complaint against the police.
- 60% of survey respondents stated that they would be worried that they would be treated unfairly due to their mental health problem.
- Participants' experiences of the complaints system indicated concerns about the lack of outcome, including complaints being ignored.
- The process of making a complaint was seen as unclear, complicated and inexact. Uncertainty was perpetuated by not knowing who or which organisation would deal with the complaint.
- The complexity of the system was seen as being a challenge to participants' resilience. They perceived that they might not have the communication skills needed to make a complaint and that the process of making a complaint could lead to

https://www.policeconduct.gov.uk/sites/default/fi les/Documents/statistics/IPCC Public Confidence Survey 2016.pdf

Challenges in using the police complaints system

² Ipsos MORI. Public Confidence in the Police Complaints System. 2016 report prepared for the IPCC.

reliving a negative experience and have an adverse effect on an individual's mental health.

Summary

People with mental health problems find it particularly challenging to make a complaint against the police. This is due to a number of complex and interacting factors often based on a history of ongoing negative interactions with the police that leads to a lack of trust, combined with lower resilience and communication challenges. The participants in this research described a catalogue of negative experiences that could have formed grounds for complaints against

the police, but most of which were not brought forward as formal complaints. There were a number of reported reasons for this including a lack of awareness of a complaints system or the grounds for making a complaint, a view that their complaint did not match the high profile media cases they had seen the IOPC's name associated with, a lack of trust in the impartiality of the police complaints system (many saw the IOPC as supporting the police rather than being impartial), and the perception of a long, uncertain and complex process of making a complaint that would negatively affect the complainant's mental health and challenge their resilience.

1. Introduction

This report sets out findings from research to assess the confidence of people with mental health concerns in the police complaints system. The research was conducted by the Research Support and Consultancy Service, Institute of Mental Health (IMH), Nottingham and commissioned by the Independent Office for Police Conduct (IOPC). The research project ran from January to September 2018.

The evidence from existing research in this field suggests that the experiences of individuals with mental health concerns and who are in contact with justice agencies, including the police, differ from those of other members of the community. One in four people experience mental health concerns in any given year and many will come into contact with the Criminal Justice System (CJS) either as victims and survivors of crime, witnesses, offenders or when detained under mental health legislation (McManus et al., 2009). Mental ill health and related conditions add a layer of complexity and challenge for individuals in touch with the justice system and for those responsible for delivering justice services to them and planning and allocating the underpinning resources (Kane et al., 2013).

Recent research points to there being a differential experience for suspects flagged on police systems as potentially experiencing mental health problems. These individuals are statistically more likely to be charged and spend longer in police custody than individuals arrested

for similar offences who have no such system flag (Kane *et al.*, 2018).

Overall, individuals who are experiencing mental health problems often fare poorly in the CJS (Pettitt *et al.*, 2013). Individuals with mental health problems are more likely to be victims and survivors of crime than others (Pettitt *et al.*, 2013). It is estimated that worldwide there is an overall prevalence of 3.7% of male and female prisoners with a psychotic illness, and 11.4% with major depression; levels that have not materially changed since 2002 (Fazel *et al.*, 2012).

It is critical that in gauging public confidence in the police complaints system there is a clear understanding of the specific issues for people experiencing mental health concerns when in contact with the police and the police complaints procedures.

Aims and objectives

The aim of the research was to explore the confidence that people with mental health concerns have in the police complaints system and their likelihood and ability to engage with it. Specific objectives were to gain an understanding of:

- Levels of awareness and understanding of the police complaints system
- Confidence in the system
- Accessibility of the complaints system
- Actual and perceived challenges around the police complaints system.

2. Methodology

A mixed methods approach was taken, utilising a survey of people with mental health concerns in England and Wales alongside six focus groups within a variety of geographical regions. This approach was taken to enable us to develop both a general picture of the experiences of a larger sample of the target group but also generate more in-depth knowledge from individuals who may have recent experience of the police complaints system and the IOPC.

The evaluation research project was approved by the University of Nottingham Faculty of Medicine and Health Sciences Research Ethics Committee (ref. 184-1712). All participants gave informed consent and the interviews were audio recorded.

2.1 Qualitative focus groups

Design

The focus group topic schedule was based on a previous study commissioned by the IOPC and conducted by IPSOS MORI (Wake *et al.,* 2007). Questions were edited, and new questions and topics were added, discussed and agreed with the IOPC.

The full focus group schedule is presented in Appendix 1. The focus group was designed so that the facilitators could initially establish participants' levels of awareness and understanding of the police complaints system. Once this information was obtained, a basic description of the police complaints system was given at the start of the focus

group as levels of awareness of the system varied between participants.

Focus groups ran from February until April 2018 and were held at a convenient time and location for the participants.

Refreshments were provided by the research team and by some participating organisations. Participants were given a £20 high street voucher at the end of the focus group for participating. They were also provided with information about relevant services and an easy read version of how to make a complaint against the police.

The first focus group acted as a pilot, allowing the research team to test out the focus group schedule and procedure, as well as to collect data. Participants in this focus group provided feedback on how they experienced the process of the focus group and the questions asked. Subsequently some questions were reduced to avoid repetition and ensure that the focus group did not last more than 90 minutes. Also, a ten-minute break was offered, as per the feedback from the pilot. This was agreed in collaboration with each group individually, and two decided not to take a break. Focus groups lasted from 60-90 minutes and were audio recorded.

Sampling approach

Our principal approach was to identify potential participants by engaging with existing groups of mental health service users, third sector and community support groups and experts by experience (individuals who have experienced contact

with the police and the IOPC). We worked with a wide range of groups and organisations to invite potential participants to focus groups. Participating organisations were given a letter of invitation, participant information sheet and a consent form to invite participants to the focus group.

The primary inclusion criterion for participation was that individuals had experience of mental ill health in some form. We also wanted to include some participants who had experience of interactions with the police, although that was not necessary to participate. In fact, from participants' accounts, the vast majority had experience of some interaction with the police.

Sample characteristics

Six focus groups were conducted; five in England one in Wales, and one telephone interview was conducted with a participant from the north of England who was unable to attend a focus group. In total, 45 individuals took part. The sample included 23 females and 22 males, ranging in age from late teens to early 60s. The visible ethnicity³ of participants was White (n=38) and Black, Asian and Minority Ethnic – BAME (n=7). To ensure age diversity of our focus group sample, we specifically recruited one focus group for young people in their late teens and early twenties. This focus group consisted of participants who were part of a preexisting group for young people with mental health concerns. In order to increase the BAME number of

participants, we also arranged one focus group with a specific BAME group.

However, the five participants withdrew just prior to the focus group starting.

Telephone interviews have been offered with one conducted.

Focus group participants identified themselves as having a range of mental health conditions including schizophrenia, depression, personality disorder and anxiety.

Although participants were not asked for the reasons for any interactions that they had previously had with the police, many shared this as part of the focus group discussion. The reasons for their interaction with the police were varied and some had multiple interactions for different reasons. The two most common reasons that were shared by participants concerned detention for mental ill health and arrest after being suspected of a criminal act. Other reasons included being victims and survivors of a crime, witnesses to a crime, attending or speaking at police educational events and other interactions with the police.

Qualitative analysis

Audio recordings of each focus group were transcribed and anonymised. The data was managed in NVIVO 11 Pro Software. A thematic approach described by Braun and Clarke (2003) was taken to analysing the data. We adopted a pragmatic approach to thematic analysis and tailored the method to the data available. Framework analysis was used,

participation for this population. Reports of age, gender and ethnicity are based on researchers' observations alone.

³ Self-reported data on age, gender and ethnicity was not collected from focus group participants as this was considered to be a potential barrier to

which sits within the broad family of thematic analysis or qualitative content analysis. These approaches identify commonalities and differences in qualitative data, before focusing on relationships between different parts of the data, thereby seeking to draw descriptive and/or explanatory conclusions clustered around themes.

2.2 Quantitative survey methods

Survey design

Bristol Online Surveys (BOS) was used to host an online survey which aimed to capture the experience and perceptions of a broad sample of people with mental health problems. The survey content was discussed and agreed with the IOPC and covered the following topics:

- Contact with the police over the last 12 months
- Satisfaction with the interaction with the police
- Levels of awareness and understanding of the police complaints system
- Accessibility of the police complaints system
- Confidence in the police complaints system
- Actual and perceived challenges around the police complaints system.

The survey was piloted with patient and public involvement (PPI) representatives within IMH. This is a standing and experienced consultative group who have

worked on a wide range of research and development projects across the mental health and justice interface. The majority of recommended changes related to emphasising the confidentiality of the survey and the use of more easily understandable language. However, much of the final wording used was based on that from the general population survey⁴ (Ipsos MORI, 2016) to enable comparison of the results between the two surveys.

Demographic details were also collected to allow sub-group analysis and checking of the sample data against population data to check for representativeness. The full list of survey questions is presented in Appendix 2.

We ensured that the online survey was mobile friendly, so that people could complete the survey on their own mobile phone devices if they did not have access to computers. In addition, we used a QR code as well as web links to share the online survey. This allowed participants to scan the QR code from a poster or an email using their phone, and instantly link to the online survey using their phone.

The survey was opened in February and closed in May 2018. There were two versions of the survey that were distributed. Both versions had the same questions; however, one version was only distributed through Twitter. This was to allow the demographic results from the two distribution methods to be compared to see if there were any differences in the

times since 2004. Findings from the most recent survey were published in 2016.

⁴ This is a survey of the perceptions of the IOPC (formerly IPCC) held by members of the general population. The survey has been conducted seven

samples responding via Twitter and email/posters. No differences were found.

Quantitative sampling method

The survey was distributed widely through third sector and community groups working with people with mental health conditions. We asked the key individuals within these groups and networks to distribute the online survey link through their networks of service users, to place posters advertising the survey in their organisations, and to tweet about the survey via their organisations' Twitter accounts. There were several organisations contacted about distributing the survey that did not want to be involved because of the project's association with the IOPC and/or policing. This added further challenges to engaging with potential participants from this hard to reach target group.

Quantitative analysis

The survey data was analysed descriptively using Excel. Data was checked and cleaned for missing data and for any responses that were not from the population of interest. Survey responses were analysed to identify any differences in responses between sub-groups (region, gender, ethnicity, contact with police or not) where sample size would allow.

Response rate of survey

While 129 individuals initiated the online survey, 89 valid, complete responses remained for analysis. There were a number of reasons why responses were excluded:

 18 participants did not fully complete the consenting process

- four participants were screened out on the first question of the survey as they did not self-identify as having experienced a mental health problem
- 15 participants exited the survey before completing it (the BOS online survey system does not save partial completions so their data was not able to be used)
- three respondents said they lived outside of England and Wales, so their responses were removed.

This left 89 valid responses for the analysis.

BOS analytics shows that 2,618 people clicked on the link to the survey, but closed it on the first page. This is likely to be due to the specific focus of the survey, which was outlined on the first page of the survey.

Profile of respondents

30% of survey participants were male, 67% were female and 3% did not identify as a specific gender. All respondents reported that they had either had a mental health problem currently or in the past, and this had been diagnosed by a healthcare professional in 95% of cases. The age profile of the survey respondents was quite evenly spread between the ages of 25 to 54, with 27% aged 35-44 years, 20% aged 45-54, 20% aged 25-34, 14% aged 18-24, 11% aged 55-64 and 8% older than 65 years. The majority described their ethnic background as White British (84%). The survey was completed by respondents across England and Wales, but the largest sub-groups by location were from the North West (25%), London (18%) and South East (11%). This

distribution was influenced by the location of the organisations that distributed the survey and the locations where the focus groups took place.

The key survey results are described in Section 3 below alongside the focus group data. Appendix 2 contains the full list of tables showing the frequencies for each of the survey questions, with comparisons by whether the participant had been in contact with the police over the last 12

months. 54% of the current survey participants had been in contact with the police in the last 12 months, which compares to 19% of the general population from the most recent survey results (Ipsos MORI, 2016). The main reasons for being in contact with the police were to report something (29%), as a victim of crime (25%) or being suspected of committing a crime (15%).

The following section considers the findings from the data and is described under three main areas as outlined below. The results relating to each of these areas bring together those from the survey and the focus groups.

Within the third area of 'Challenges around the police complaints system' the sub-themes are organised into two categories to respond to the project objectives relating to confidence in and the accessibility of the complaints system.

- 1. Knowledge of the IOPC
- 2. Knowledge of the complaints system
- 3. Challenges around the police complaints system
 - a. Confidence in the complaints system:
 - Neutrality of the system
 - Fear
 - Lack of outcome
 - b. Accessibility of the system
 - Capabilities needed to make a complaint
 - The process of making a complaint: long and uncertain
 - Response to, and recognition of, mental health in the complaints system

3. Knowledge of the IOPC

This chapter outlines participants' knowledge and understanding of the IOPC. Participants were asked if they knew about the IOPC or IPCC (to take account of the name change during the project).

Key messages:

- The IOPC, while recognised as structurally independent, is not perceived to function independently of the police.
- The public knowledge of the IOPC's role, function and relationship to the police, and in particular with vulnerable groups, is not well known.
- The IOPC's role in investigating complaints, beyond high profile cases, is not clear.

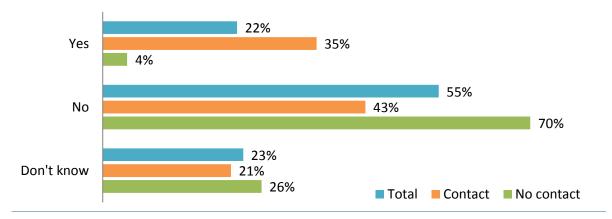
Survey findings

42% of participants in the survey had not heard of the IOPC or IPCC, which is similar to the proportion within the general population (38%). The majority of respondents (46%) had heard about the IOPC on the television, which is similar for the general population survey (55%) (Ipsos MORI, 2016).

One in five thought that the IOPC was part of the police (22%), and this was higher for survey respondents who had been in contact with the police in the last 12 months (35%) and for men (27%) (Table

1). This was reflected in responses to questions about the impartiality of the IOPC, for which 54% felt that they were not confident that the IOPC deals with its work in an impartial way. Those who had been in contact with the police in the last 12 months reported considerably lower confidence in the impartiality of the IOPC (71% not confident) compared to those who had not been in contact with the police (33% not confident). This compares to only 16% of the general population who were not confident that the IOPC (then IPCC) deals with its work in an impartial way (Ipsos MORI, 2016).

Table 1. Survey question: Do you think that the IOPC, previously known as the IPCC, is part of the police? (n=89)



Focus group findings

The IOPC was not well known amongst participants. Although the name of the IOPC implies independence, many participants believed this meant that all complaints made to IOPC were handled completely separately and independently from the police force about which the complaint had been made. While others believed that, although it had independence in its title, it was made up of ex-police officers; therefore, it was police investigating police.

There was a commonly held perception that that the IOPC/IPCC was an organisation that only got involved in cases with high public interest. This was particularly common among those who did not know the IOPC could be used for appeals⁵.

"It just seems like sort of something that is more for like big Police complaints where there has been like massive you know news worthy, you know not something that you know Joe Bloggs on the street could just write to and say I've got a problem with this local Officer

and it doesn't seem like something that is easy to reach or get in contact with or anything". Focus group B

For one participant, knowledge of the IOPC had come from trying to resolve a problem with the police locally that had not been satisfactorily addressed. This person had used Google to find out further information and located the IOPC/IPCC, but spoke of the challenges in doing this. Eventually, the situation was resolved, and she received an apology, but not without cost to her mental health:

"I started googling the complaints ... and it come up IPCC on the internet. So I've rang them, I have explained the situation [where property had been confiscated]... and they tried to tell me it was [not recoverable], ... it was all the headache and the stress of them not being bothered to look at the case ... I kept phoning IPCC and they actually dealt with it and the sergeant rang me back [and the items were recovered] ... So then eventually after all that explanation ... they've sent a letter of apology". Focus group A

⁵ Appeals are an application made by a complainant for a review of a police decision relating to their complaint.

4. Knowledge of the complaints system

The chapter outlines participants' knowledge and understanding of the police complaints system, the process of making a complaint, experiences of making a complaint and their knowledge of their rights to complain.

Key messages:

- Aspects of the police complaints system might be understood, but not enough to challenge local barriers that participants face to formalise a complaint against the police.
- Timescales to access the complaint system (including the IOPC) are seen as unclear.
- People in many instances are unaware of their right to complain.
- Local police actions and behaviours are reported as preventing complaints from being made, or dismissing requests to make a complaint.

Survey findings

The majority of respondents to the survey (60%) were not confident in their knowledge of how to make a complaint. Confidence was slightly higher among those who had been in contact with the police in the last 12 months (41% confident), compared to those who had not had police contact (31% confident). When asked who they would be most likely to contact if they were going to make a complaint, 32% said the police force they were unhappy with (Table 3). 14% reported that they would contact a mental health professional if they were going to make a complaint, suggesting the desire for advocacy support from someone who understands their mental health condition. However, nearly half of the respondents (46%) said they were unlikely to complain even if they were really unhappy with how a police officer behaved towards them or handled a matter they were involved with,

compared with 24% in the general population survey (Ipsos MORI, 2016).

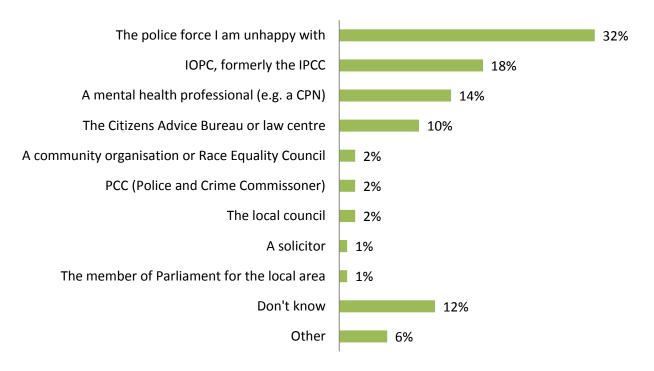
Focus group findings

The majority of participants did not understand how to make a complaint. Those who were aware of the different ways to complain were more likely to have made a complaint themselves, to have been supported to complain or had education or volunteering experiences related to the police.

For those who had made a complaint, the ways in which the complaint had been made were different, such as: calling the police station directly, writing a letter and speaking to an officer in person. For others, complaints had been made on their behalf via their solicitor. In some cases, participants had reported that their solicitor had made a complaint directly to the IOPC/IPCC because of something they had witnessed. However, this did not

mean that participants had a good understanding of the complaints

Table 2. Survey question: If you were going to make a complaint about the police choose ONE place from the list below that you would be most likely to contact (n=89)



procedure, but they had someone to make the complaint on their behalf who knew the system.

Some participants also demonstrated prior knowledge of the complaints system by reporting how they had told an officer directly that they wanted to complain. In some instances, information thought to be needed to make a complaint had been withheld from them. One participant had been told that the officer they had wanted to make a complaint against had left the force, another reported that a police officer covered their badge number and refused to give it to them. Participants spoke about the challenges of remembering and obtaining the badge number, while others did not realise this information was helpful when making a complaint:

"I was literally thrown down the steps, I got up and straight away I looked up and I was ("Right where is that officer, I want to make a complaint what's happened to us".) I was basically told "gone", gone!"" Focus group A

"I said "But I want to put a complaint in, I said "Them two for a start, they refused to give me their numbers as well. They won't give me their numbers."" Focus group A

Detention without medical help was experienced by a number of participants, some of whom were aware that this could be grounds for making a complaint:

"I have actually been detained in the cell for fifteen hours because of my mental health...! was refused my medication, the police wouldn't give me my medication because it wasn't prescribed by a police doctor so yes I was just left, I was more suicidal by the time I come out than what I was before I went in there. I asked to make a complaint and all I got told was "Well you were kept somewhere for a place of safety." Focus group A

Although these accounts illustrate some of the challenges in complaining, they also highlight how participants had some knowledge of a complaints system, even if they lacked confidence in knowing how to make a formal complaint, or to pursue it when faced with local barriers. Other participants spoke about needing the officers' number, revealing partial knowledge about making a complaint; however, while having an officer's number is helpful, it is not essential to making a complaint.

Other participants believed they had a good knowledge of the police complaints system and understood that a complaint could not go to the IOPC/IPCC unless it had first been made to the police force where the incident had taken place.

A few participants had detailed knowledge, including one who thought that the time limit on making a complaint was 12 months. They did believe this time limit was fixed regardless of the context⁶.

Participants who wanted to know more information about the system raised the question of whether there was a time limit on when to make a complaint after an event had occurred. A lack of awareness of this detail could influence decisions around making a complaint, as some of the experiences they had cause to complain about were not recent events.

Uncertainty over the grounds for making a complaint deterred participants from investing their time and energy in what they felt could be an unproductive exercise. One participant described how they were researching what constituted police misconduct before starting a complaints procedure, as they did not want to devote emotional resources into a process if there was no hope of resolution. The lack of clarity about whether the police had broken a 'rule' often delayed a complaint being made.

Other participants did not know how to complain or that they had a right to complain. Participants described some of the interactions they had experienced with the police to highlight and demonstrate that they had many reasons to complain:

"...people don't know how to complain
... they don't want to and they don't
know how to." Focus group F

months after the incident. If you are complaining more than 12 months after an incident, you should explain why your complaint has been delayed. The police force will need to consider your explanation when they decide whether to deal with the complaint.'

https://www.policeconduct.gov.uk/complaintsand-appeals/make-complaint

⁶ The IOPC website states that: 'There is no time limit for making a complaint, although you should try to do it as quickly as possible. This is because when complaints are made a long time after the incident, it can be more difficult to obtain evidence and accurate witness statements. The police force or relevant organisation can decide not to deal with a complaint if they receive it more than 12

"I didn't have enough information of how to..." Focus group A

"I don't know, not only that I have been frightened to complain against the police because once you have got an enemy in the police." Focus group B

"I always wanted to complain about the treatment that I received but because I was so unwell at the time, it kind of just spiralled that I just was so disgusted that I couldn't make a complaint and how would I make that complaint, so I wasn't really sure how to complain and it wasn't the first time it had happened." Focus group C

Incidents that might be considered police misconduct or where police had failed in their duty of care, were disclosed by participants in each focus group and not as the exception. The interactions suggested that the behaviour of the police might have been normalised for participants with frequent police contact and that they were not aware that there was a minimum standard of conduct expected from officers or of their right to make a complaint.

From the discussions it appeared that the first time some had realised that they might be able to make a complaint against the police was during the focus groups. This was highlighted in a discussion between participants who said that no one had asked them how they felt about a situation. This included solicitors or the police not informing them that they could make a complaint. Therefore, they had not had an opportunity to realise they were able to complain. For some, the

focus groups acted as a place where hearing about each other's shared experiences demonstrated that complaints could be made:

"Speaker1: Because that person kept intimidating me ... I would have to call the police out and they all knew how I felt about that officer, but not one of them turned around and said do you realise you can put a complaint in against her. ...

Speaker 2: Like if you needed to put a complaint against someone.

Speaker 1: A Solicitor don't ask you how do you feel.

Speaker 2: No they don't ask you do they? They don't ask you how you feels and all that like you know." Focus group B

"I've found like [other participants name] was saying nobody guides you to where you can actually go to make a complaint." Focus group A

"Well do you know what, what none of us really know is what our rights are." Focus group C

Having the confidence or knowledge that they have a right to complain was further demonstrated in how one participant believed the police's behaviour towards him came with his status in the criminal justice system:

"Just sort of took it as you know like I was saying criminality or you know ... stuff I just took it as part of the treatment." Focus group D

For one participant it was not until years later, when a solicitor explained to him that police could not behave in a certain manner, that he realised he could have done something about how he had been treated:

"...they [police officers] can't just tell you 10 minutes and you'll be arrested, [the solicitor said] you should have asked for his warrant number, you should have asked for the detective sergeant's number'...I had no clue...I lost so much...expensive things, things of sentimental value, books, clothes...I think two years later... [when I'd] seen a solicitor...[the solicitor said] they are not allowed to do this." Focus group C

This non-recent interaction with the police still brought up feelings of loss and mistreatment and that not knowing their rights had impacted on how they behaved at the time:

".... I felt helpless, also being timid I'm ashamed to say the last thing you think is that I can stand up for my rights, you'll always be either arrested or something bad ..."

A lack of knowledge of the system or how to make a complaint should not be seen as the main issue preventing access to the complaints system, but one of a number of features contributing to it.

Some participants who had access to a solicitor could make a complaint without knowing the system. For example, one participant was in the process of appealing a complaints investigation with the IOPC, but did not know how to begin making a complaint:

"How do you actually know that in the beginning? I wouldn't even know how to start that process." Focus group D

The lack of knowledge around making a complaint in the first instance and how complainants should be treated highlights that knowing about the mechanisms of the complaints system is secondary to knowing that you have a right to complain in the first place.

5. Challenges around the police complaints system

The section below outlines participants' perception of the challenges associated with making a complaint.

Key messages:

- The current complaints system is not viewed as impartial or neutral.
- Participants reported incidents where they believed the police had treated them badly; this made them scared of the police and therefore prevented a complaint from being made.
- The complaints system was viewed as long, uncertain and complicated and requiring a level of resilience many did not have.
- Participants believed that they would not be taken seriously when making a complaint. This included those who had made a complaint.
- Participants with mental health concerns require practical support to make a complaint including help and assistance with communication.
- Participants believed that the police did not receive adequate training around mental health awareness.
- Participants were keen to see complaints result in lessons learnt by the police and a change in police attitudes.

Survey findings

A number of challenges were identified through the survey. The first of these was the neutrality of the system, particularly concerns about making complaints to the local police force. 67% of survey respondents were not confident that the police deal fairly with complaints made against the police, twice the proportion reporting this perception in the general population survey (32%) (Ipsos MORI, 2016). This is despite one in three reporting that they would be most likely to contact the police force they were unhappy with to make a complaint (Table 2).

Table 3 shows some of the challenges perceived by the survey respondents if

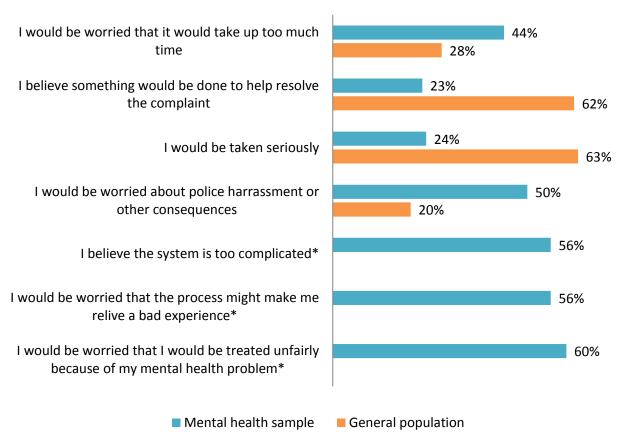
they were thinking of making a complaint against the police. It also includes comparative figures from the general population survey (Ipsos MORI, 2016), where available. Over half felt that their mental health problem would exacerbate the challenges experienced, with 60% stating that they would be worried that they would be treated unfairly due to their mental health problem. Around half of the individuals surveyed (49%) said that they would be worried about negative consequences (e.g. harassment by the police) if they made a complaint. Over half of respondents (58%) believed that they would not be taken seriously if they made a complaint.

Respondents were also concerned about aspects of the complaints process and the likelihood of a resolution to the complaint. Over half of respondents (56%) felt that the complaints system was too complicated. 44% said that they would be worried that making a complaint would take up too much of their time, while 23% believed that something would be done to help to resolve the complaint. The barriers to making a complaint were further increased by the perceived likely impact on the individual. Over half (56%) were

worried that the process might cause them to relive a bad experience.

The overall negative experience of interactions with the police was echoed in the focus groups, in addition to the survey, and was seen as a barrier to making a complaint. Of survey respondents who had been in contact with the police during the last 12 months, 48% reported that they were unhappy with the way that the police treated them.

Table 3. Survey question: If you were thinking of making a complaint, to what extent would you agree with the following statements? (n=89)

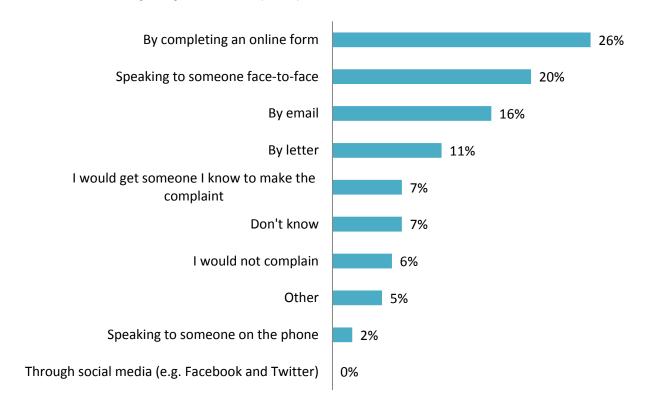


^{*}These statements were not asked in the general population survey.

In terms of making the complaints system more accessible, respondents were quite divided about what they thought would be the best way to make a complaint, with 26% saying that they would prefer to complete an online form, while another 20% preferred to speak to someone face-

to-face (Table 4). This is in contrast to the general population survey, which showed that more direct communication is preferable, with 42% preferring to speak to someone face-to-face, while 22% preferred to speak to someone on the phone.

Table 4. Survey question: If you were going to make a complaint about the police, what would be the best way for you to do it? (n=89)



Suggestions for what would help the survey respondents to make a complaint showed that a step-by-step guide to the complaints system (51%), a person to act on their behalf (43%) and support from a mental health support service or organisation (42%) were all rated highly (Table 5).

Those who answered 'Other' said they would contact a lawyer, a special service that supports people with mental health problems, that it depended on the situation, and that they would complain in multiple ways.

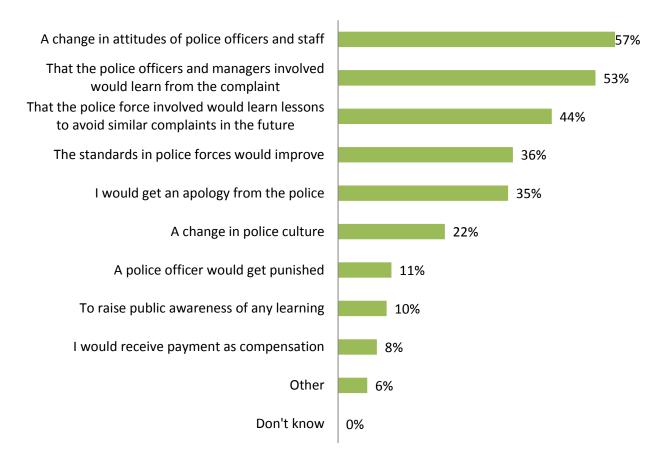
Table 5. Survey question: If you wanted to make a complaint, what would help you the most to do this? (Choose up to three answers) (n=89)



Participants' responses also showed a genuine desire for learning and improvements to emerge as a result of a complaint being made against the police (Table 6). Over half of respondents said they would like to see a change in police

attitudes (57%) and for police officers and managers to learn from a complaint (53%). Over one third (44%) reported the desire to avoid similar complaints through learning lessons and improving standards in the police force (36%).

Table 6. Survey question: If you made a complaint about the police, what do you hope would happen? Choose up to three answers. (n=89)



Focus group findings

Participants discussed multiple issues around why they would not access the police complaints system, even though many did not actually know how to access it. Regardless of knowledge and awareness of the system, they believed that there were negative consequences to bringing a complaint against a police officer or the police force. These included fearing reprisal, not being taken seriously, issues around having the capabilities to make a complaint, the uncertainty of the complaints process and the need for resilience.

a. Challenges relating to confidence in the complaints system

Three sub-themes emerged relating to participants' confidence in the system:

- Neutrality of the system
- Fear
- Lack of outcome

Neutrality of the system

A major challenge for the police complaints system is the perception that there was no specific body believed to be independent and impartial. For participants, it was felt to be counterproductive to be making a complaint to the place where the problem was located. It was believed that a

colleague of the person the complaint was being made against would be dealing with the complaint and that officers would protect each other and cover up:

"... because they'd be altogether ... cover each other up, working with each other." Focus group C

"They would say he's making a complaint against my mate." Focus group E

One participant described how even if they did not intend to side with their colleagues, they would do so unconsciously because they were connected and already known to each other. Others argued that complaining about the police, in the current structure of the police complaints system, would result in a cover up unless the complaint was something so extreme or serious that it could not be ignored. Others were concerned and believed that the officer whom they were making a complaint against, could find out and, as outlined in the sub-theme on Fear below, this could result in repercussions for the complainant. Participants were worried that the information about their complaint would not be kept confidential. Because of a perceived lack of independence, participants believed that the system was biased against them:

"Because basically the police seem to investigate the police which seems you know, if anything is put against the police and the police makes the ultimate, like one sided it's as if you might as well have not bothered." Focus group B

Complaining to the IOPC was not seen as any different from complaining to the police, as the complaint would get sent back to that police force. This contributed to their view that the IOPC was not an independent organisation:

"The key word on the IPCC is independent, they didn't give me the impression it was independent, they gave me the impression that that they were peeing in the same bucket." Focus group E

Some participants were more forgiving about the system, relating it to other complaints procedures such as the press complaints system.

A lack of confidence in the system was very much focused on the perception that the police complaints system was not independent, and may be a deterrent for some to make a complaint to the police either directly or via the IOPC.

Fear

Participants described being scared to complain or be involved in a complaint against the police. This was because they believed complaining could result in being targeted by the police, or that knowledge of their complaint could be held against them in the future. This prevented some participants from complaining about situations where they had direct access to the complaints system, for example, when they were asked if they would like to make a complaint or had found out information on how to complain. The participant's account below demonstrates both a fear of the police, but also that he was scared of the consequences, even

though he was asked if he wanted to make a complaint:

"He asked me if I wanted to make a complaint, I just no I just wanted him to leave me alone to be honest, I don't want to make a complaint because if you make a complaint they think oh yeah he's a daft one, I am scared I am going to be victimised by the police."

Focus group C

Participants' feelings towards this were based on past interactions with the police where they felt they had been victimised due to having a mental health condition. These experiences contributed to fear of the police and a wish to not have contact with them. The focus group participants overwhelmingly described negative experiences in relation to their interactions with the police; whether as victims, witnesses or suspects. These included: poor verbal conduct, perceived unreasonable force, denial of medication and/or medical support, perceived unjustified use of restraint, feelings of fear and victimisation.

Others articulated how it requires a lot of confidence for someone to go into the police station to complain about an officer who worked there.

For others, their fear was further heightened by ongoing interactions with the police. One participant, who had got as far as finding out the details of how to make a complaint, decided not to go through with it because they feared that information would not be kept confidential. This, with a perceived continued harassment from the target of

the complaint, resulted in the participant concluding:

"I don't want to do it, I want [the police officer] to leave me alone."

The fear of getting involved in a complaint also stretched to being a witness. One participant who had witnessed an incident feared involvement with the police complaints system because of the perceived consequences:

"I've seen an incident a couple of weeks ago, yeah. ... asked me if I'd be witness yeah and you know I'll be totally honest with you I bottled out because I thought to myself. ... I thought if I go there and make a statement they're going to be on my back." Focus group D

This complainant indicated that his previous criminal record contributed to why he did not want involvement in a complaints procedure, as there were certain conditions attached to his release. This resonated with other participants in this focus group, who shared the same position.

A participant highlighted how having a mental health condition could be made worse from fearing what the police officer would do if a complaint was made:

"...and most of them felt quite intimidated by that knowing that if they did get found out that they were the ones that reported that certain officer, even though he shouldn't but he may take it upon himself to harass that individual and if that individual's got mental health, he or she has depression, anxiety, anything like that, he could

potentially make that worse." Focus group F

Lack of satisfactory outcome

While discussing participants' experiences of the complaints system, some spoke about a lack of satisfactory outcome. This included complaints being ignored, the case not being taken up by the IOPC, the outcome not being favoured by the complainant. This contributed to an expressed lack of confidence in the system. Participants reported experiences of being ignored that varied from making a complaint and this not being resolved, or getting an outcome that they did not want such as not having a complaint investigated by the IOPC, or an appeal upheld. This is represented in the below discussion between two participants, one of whom had a complaint against a police officer but did not get the outcome wished for, and another whose complaint was not investigated by the IPPC/IOPC:

"Speaker1: I have rang them and it's gotten worse because just they weren't interested so the complaints system as far as I am concerned is a waste of time... Because I went from the police complaining and getting nowhere I escalated it or I attempted to escalate it to IPCC and the IPCC weren't interested so it just basically says to me that they are all into their own group they are all, nobody cares.

Speaker 2: "And that reinforces the lack of confidence." Focus group E

Participants' discussions about the effectiveness of the police complaints system included whether or not they

believed an officer had been held to account for their behaviour. Some had direct experiences of an IOPC/IPCC decision that they did not agree with, including not agreeing with the decision made or that the complaint would not be investigated by them, others spoke about cases they had witnessed in the news that had shaped their views.

Participants felt that having someone make a complaint on their behalf would be favourable, because the police would not ignore someone official in the same way that they would be ignored:

"They've got more power than the actual police station ... more effective to go to someone like that than just the normal police station because might just get shoved under the carpet." Focus group F

"It's just like what's the word, like I was saying like if you know with complaints and that, you can't really put a complaint in because you won't get nowhere with them really, it's like let's just say I was telling you to do things like that really, isn't it, your brief needs to do things like that for you and help you with putting in complaints, you know what I mean." Focus group B

b. Challenges relating to accessibility

The following challenges reported by participants broadly relate to the accessibility of the system:

- Length and uncertainty of the process of making a complaint;
- Capability to make a complaint;
- Recognition of mental health within the complaints system.

Length and uncertainty of the process of making a complaint

When given a description of the police complaints system, a key theme that arose in response to making a complaint was the length of time it could take. The process of how complaints were dealt with was believed to be 'unclear' and complicated, it was also perceived as inexact. Uncertainty was exacerbated by not knowing who or which organisation would deal with the complaint and that the likely outcome of the complaint was unknown.

Due to their perceptions of the complaint system, participants questioned if starting the process would be worth it in the end. The expected length of time for the complaint to be resolved, combined with the uncertainty and potential for no satisfactory outcome, meant the participants judged that they would require resilience to see a complaint through to the end. Some were unsure if they would have enough resilience to continue or even start a complaint:

"It's like well if you sent it there they might send it back there and then they might go back there, but you know it's like a balancing, like they are making it as difficult as possible for people to complain and bouncing it around and you know and then like you have to have such a massive amount of resilience to keep going because they go back to your own police force that you have complained about and they go, no there's nothing here and like how disheartening that must feel for you and especially if you are on your own and trying to do it and then having to sort of

pick up after and say no I'm going to appeal it, there's all these procedures and it's not a very clear you know why can't you go straight there and say I am going to complain these, I don't want them to deal with my complaint, because I am complaining about them."

Focus group B

This response summarised many of the features of the system that contributed to the perception that it was inaccessible and challenging, including complaining to those who they were making a complaint about. However, the relevance here is that it added an extra barrier to a system that was already perceived as difficult.

Young people articulated more than others that they did not want to communicate with several different people and wanted to only have contact with someone at one stage to make their complaint in full. They also said the longer the process took, the more likely that they would be to experience increased anxiety, resulting in doubting themselves and withdrawing their complaint. When asked what they believed to be a reasonable time to have a complaint resolved, two to four weeks was the time given.

This view was evident in other focus groups too but was articulated more in terms of resilience and needing the willpower and mental strength to keep going. It was suggested that having someone present supporting them through the process, to keep them motivated, would be required due to the complex and uncertain nature of the system. Resilience was required not just

because of the process described, but also because of perception of the system:

"I agree ... every stage you're questioning what you're doing, is this what ...do it that way or maybe I might just lose the plot again, that kind of thing, so if it's stages it's just more opportunity to question yourself and doubt yourself and probably by the end of it you're just sat there ... is it really worth it." Focus group F

Participants raised concerns that after the lengthy unsuccessful complaints process, they could be left without closure not knowing what to do next. One participant had felt rejected when the IOPC/IPCC had ruled that they would not be investigating a complaint that had been made directly to the organisation.

A participant summarised that not everyone would be motivated or confident enough to make a complaint because of how the system was structured:

"I think if you've got enough anger or enough something in your body, passion, drive, something to push you forward to do something, you can but I think everybody's personalities are very different and I think some people would feel very intimidated." Focus group C

Some suggested that being made aware of each stage and the possible outcomes could help reduce anxiety about making a complaint. Others suggested having statistics on success rates and showing positive outcomes to encourage others

who are unsure about making a complaint.

Capability needed to make a complaint

Individual challenges in making a complaint included completing forms and having to write down the complaint details. In one case, a participant said that they had found the process of making a complaint stressful as their spelling was poor and this distracted from communicating the complaint. Others spoke about struggling to effectively communicate and express their feelings to the police when they were experiencing mental ill health. This was made worse when they believed that the police were not listening to them or deliberately trying to provoke them. When experiencing mental ill health, finding or looking for information about the complaints system was also more challenging:

"...people with different abilities as well, let's not forget mental health might be the key issue ... stress and all that comes from inability to do things and if I can't read or write properly but I'm definitely going to develop some kind of stress having to cope with these procedures."

Focus group F

"We can't do big words so rather, if I have a problem I come to [member of staff] and say, [Member of staff] this is the problem, blah blah blah and he can put in words that I can't." Focus group E

"I think the only thing that prevented me was the fact that I was so unwell and I spent 7 months in hospital under a section. I didn't really feel capable, I didn't feel confident to do anything about it..." Focus group C

"It's made it difficult and that's why I would use a solicitor. Because for me to communicate, do you know what I mean, like verbally or by writing to the police I mean I wouldn't know where to begin, you know to communicate in writing. So it would mean communicating with the verbal and me verbally communicating you know, trying to make a complaint. I'd end up getting arrested in that process do you know what I mean because you know the way they speak to you, the way they respond to you, you know I would start getting aroused and I'd start going up and up and up do you know what I mean and then I would start shouting and saying things a bit inappropriate, that type of stuff. So for me, like that would put me at more risk of getting arrested for a further offence..." Focus group D

It was expressed in one group that they felt it would be hard to make a complaint because after having a negative incident their mental health is a lot worse and they are not in the right frame of mind to be able to make a complaint. Having a mental health condition was recognised more generally by some participants as making the process of complaining more challenging and adding barriers. They felt more vulnerable and anxious about the process of making a complaint.

Having a third-party individual or someone to support them or make the complaint on their behalf was a way in which participants believed the police complaints system could be improved, or a step that could be made to taken to encourage those with mental ill health to make a complaint against the police.

"Somebody like an independent person that comes around spends a bit more time with you and asking how you were dealt with and the way you were treated and everything." Focus group B

It was felt that having the support of a service they were already accessing would encourage those with mental health concerns to make a complaint. This was because they were already being helped by this service.

Response and recognition of mental health in the complaints system

Participants recognised that engaging in the complaints system could act as a further challenge to their mental health, vulnerability and be a negative experience.

Young people articulated quite specifically how their mental health condition might interact with the police complaints system. Experiencing symptoms of anxiety could result in a withdrawal of a complaint because of self-doubt. However, they were also clear that they did not want to be asked about their mental health, and that having it brought up would make them not want to discuss their mental health. They also felt that if their mental health was brought up when making a complaint, this would make them feel that their complaint was not being taken seriously as this was not the reason for their complaint and should be kept separate. They believed that if police

were aware of their mental health condition, they might be patronised.

Participants spoke of the need to increase training around mental health for police officers. Although this is not directly related to the complaints system, it would perhaps prevent incidents that warranted a complaint. Some participants genuinely believed that the police would not behave as they had if they could hear about how an interaction had felt, or the consequences of their actions. There was a genuine wish amongst some participants to see change and improvements as they believed things could not carry on as they were:

"They need to come and listen to people with mental health it's what it's all about the Police to speak at those meetings if they would like." Focus group E

Some participants did recognise the challenges that someone with mental ill

health might bring to the police. For example, there was understanding that when mental health services closed, police were often the only service to help. One participant also spoke of how he had behaved in a way that scared a police officer. Participants expressed that the police did not know how to manage those with mental health concerns and were not provided with enough training. However, when asked about having their mental health recognised within the complaints system, this was rejected because participants believed that all people should be treated with care and caution, not just those with mental health conditions:

"It's not about mental health, it's about them having an understanding of people, it's there ... the problem's not with us mental health people because we can't help what condition we're born with..." Focus group A

6. Summary and recommendations

The IOPC has a statutory duty to 'secure and maintain public confidence in the police complaints system in England and Wales'; aiming to help local policing bodies and forces to comply with their legal obligations and achieve high standards in the handling of complaints, conduct and death and serious injury (DSI) matters.

The IOPC's guidance for police forces in handling complaints stresses areas of good practice that should underpin local and national complaints handling. These include:

- Getting it right
- Being customer focused
- Being open and accountable
- Acting fairly and proportionately
- · Putting things right
- Seeking continuous improvement.

This report examines the views and experiences of people in contact with the police when they have mental health problems and their confidence in the police complaints system. A summary of the main findings is provided below, followed by a discussion of these in relation to existing evidence and initial recommendations.

5.1 Summary of findings

People with mental health problems find it particularly challenging to make a complaint against the police. This is due to a number of complex and interacting reasons often based on a history of ongoing negative interactions with the police leading to a lack of trust, combined with lower resilience and communication

challenges. The participants in this research described a catalogue of negative experiences that could have formed grounds for complaints against the police, but most of which were not brought forward as formal complaints. There were a number of reported reasons for this, including: a lack of awareness of a complaints system or the grounds for complaining, a view that their complaint did not match the high profile media cases they had seen the IOPC's name associated with, a lack of trust in the impartiality of the police complaints system (many saw the IOPC as supporting the police rather than being impartial), and the perception of a long, uncertain and complex process of making a complaint, that would negatively affect the complainant's mental health and challenge their resilience.

Knowledge of the IOPC and police complaints system

People with mental health concerns had little knowledge of the IOPC's role, function and relationship to the police. There was a widely held perception that the IOPC's role was focused on high profile and serious cases. The IOPC was not perceived to function independently of the police, and confidence in the impartiality of the IOPC was much lower for those who had been in contact with the police, than for those who had not (see Table 22).

People who participated in this research did not have a clear understanding of how to make a complaint. When asked how they would go about making a complaint and where they would go to find information, many reported going on the internet and using Google.

Misconceptions about the timescale for making a complaint and the evidence required (e.g. police officer's badge number) were common.

Although we heard many examples of police interactions which suggested that individuals had the grounds to make a complaint, many participants were unaware of their right to complain. Others described how the behaviour of local police officers had prevented individuals making a complaint as they felt that they had insufficient grounds and evidence. Nearly half of the respondents (46%) said they were unlikely to complain even if they had grounds to complain.

Challenges around the police complaints system

Accessibility of the system

The complaints system was viewed as long, uncertain and complicated and requiring a level of resilience many did not have. People with mental health conditions were concerned about the length of time that a complaint was likely to take and the impact it could have on their mental health.

When people with a mental health condition do want to bring a complaint against the police, they are likely to need support in doing so. This includes help with communicating effectively and completing forms, as well as guiding them through the complaints system. Our research identified sources of support

that this group of people would like including an advocate who could act on their behalf and support from a mental health support service or organisation. Furthermore, people showed a genuine desire for any complaints raised to bring about improvements to police standards, conduct and attitudes. Many spoke of the need to increase mental health awareness amongst police officers as this could prevent incidents that warranted a complaint.

Confidence in and experience of the police complaints system

People who took part in our research who had experience of the complaints system, described a number of unsatisfactory experiences which contributed to a lack of confidence in the system.

For those who have not had experience of the complaints system, it is clear from this research that the current perception of the complexity, uncertainty and length of the process is acting as a deterrent to making a complaint.

People with mental health conditions perceive that the police do not deal fairly with complaints made against them.

Furthermore, the majority worry that they would not be dealt with fairly or taken seriously because of their mental health problems. Many were also fearful of the consequences of making a complaint and believed that it could lead to harassment, victimisation and other negative repercussions. This fear was further enhanced by the perceived lack of confidentiality if a complaint was made against an officer in a local police force.

Findings in the context of the wider evidence

These findings are supported by wider research focused on the interactions between police and individuals experiencing mental health problems. For example they were very conscious of how having a mental health problem might be used as a basis for discrediting and disbelieving them (At Risk Yet Dismissed). Studies have found that suspects who are perceived by the police as having mental health issues are more likely to be arrested, are charged more often and spend longer in police custody (Charette et al., 2014 & Kane et al., 2018). Given that an individual experiencing mental health problems may well be differentially treated by the police whether they are victims, witnesses or suspects (or at times all three), it would be reasonable to hypothesise that more complaints from this source would be forthcoming and followed through. This does not appear to be the case. In fact, those in our survey and focus group sample report a distinct reticence to complain because of past negative experiences, compounded by a lack of knowledge of the complaints system and the resilience to follow what is seen as a complex and often unsatisfactory process.

The reasons for this are complex. The present system assumes that individuals have: knowledge of what they can reasonably make a complaint about, who to complain to, how to make the complaint, what information they need, knowledge of what to do if they have made a complaint (but are not satisfied with the outcome), and an awareness of

the time limits involved. Many individuals experiencing mental health issues when they interact with the police do not have this knowledge, a finding borne out in our evaluation and in other studies. The challenge for the IOPC is how to provide this knowledge, related support and the streamlined systems required to address the current position and deliver on their statutory duties.

There is a well-established body of evidence, including recent papers by the authors of this report, that training police staff in how to manage and support people with mental health conditions when they engage with them as witnesses, victims or suspects of a crime would reduce the number of negative interactions giving grounds for a complaint (Kane et al.,2018). While this would probably be the most effective way to support this vulnerable group during their interactions with the police, it lies outside the remit of the IOPC to directly influence. However, there are actions that the IOPC could take to improve the experience for these individuals by providing more accessible information, support and improved feedback during and after the complaint process.

Critically, people need to be aware that they have a right to complain, and more specifically, about what they can complain about, to whom, how and how to follow up if they are not satisfied. For many people in society, making a complaint about their experiences of interaction with the police is challenging enough. When this is overlaid by debilitating mental health problems, complex lives and low resilience, the challenge becomes

magnified and often defeating. The key area of change the IOPC should focus on is to acknowledge this reality and begin to redesign its processes within the statutory responsibilities, in such a way that these

individuals no longer feel excluded and unsupported.

5.2 Initial recommendations

Below we make a number of initial recommendations for the IOPC to consider, in the context of this research and the wider evidence available. They are made by the authors and designed as a starting point for future discussion and consideration by the IOPC with stakeholders, and focus on three broad areas for action:

1. Improving knowledge of the IOPC and complaints system

- A campaign to increase awareness of the right to complain including case studies of people with mental health challenges who have used the system – this should follow stakeholder consultation and should also be planned in conjunction with national and local mental health campaign and advice bodies and all mental health service commissioners and provider networks.
- Clarity on the process of making a complaint, including roles and responsibilities, the
 relationship of the IOPC to the police, expected timelines and a list of sources of support
 available when making a complaint this should be developed with stakeholder
 consultation and in conjunction with national and local MH campaign and advice bodies
 and MH commissioners and provider networks.
- Targeted engagement with a wide range of stakeholders, including voluntary and advocacy organisations, to further educate about the IOPC and police complaints system, with discussion around the appropriate ways to further disseminate these messages.

2. Improving access and support in the complaints system

IOPC and Professional Standard Departments (PSDs) to work closely with other
organisations that could provide advocacy and support through the complaints system,
developing a directory/network in each IOPC area that individuals could be referred to
for support.

3. Improving the experience of the complaints system

- MH awareness training for all IOPC staff in order to recognise the complexities in making a complaint when experiencing a mental health condition.
- Actively seek to employ more investigation staff with mental health knowledge and expertise.
- Appoint at least one specialist case worker for the most complex and challenging cases in each IOPC office.
- Any approach to a complainant experiencing a mental health condition should be bespoke, considered and respectful to their individual needs. It should be recognised by the IOPC and other partners within the police complaints system that this particular group should have a tailored, informed experience that is reflective of their needs.

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Appendix 1: Focus group protocol

Notes for facilitators:

Aims of focus group are to explore:

- Levels of awareness and understanding of the police complaints system
- Description of participants level of contact with of the IPCC/IOPC
- Accessibility of the complaints system
- Confidence in the system including the extent to which participants feel their mental health problems may have affected the way they did/did not make a complaint or the way they and their complaint was dealt with throughout the process
- Actual and perceived challenges around the police complaints system
- Improvements that could be made

All Focus Group participants will have self-identified as experiencing MH problems in order to be included.

Ensure Participants have read the information sheet and completed the consent form. Give a copy of the consent form to the participant.

IPCC replaced the Police Complaints Authority (PCA) in 2004 but it is possible that a participant may have used the PCA or still use that acronym for any police complaints option. The IPCC changed its name to Independent Office for Police Conduct (IOPC) on 8 January 2018 and before the date of the focus group, so any/all of these acronyms may be used by participants.

| INTRODUCTION | Reason |
|--|--------|
| 1. Thank them for participating | |
| 2. Introduce facilitators, and briefly where they are from | |
| 3. Explain relationship between Unit and IPCC/IOPC and reasons for | |
| evaluation overall (NB refer back to the information sheet and | |
| the consent form where this is also set out for reference) | |
| 4. Explain the aims and purpose of the study and give a brief | |
| description of the focus group structure, timing: | |
| The reason we want to talk to you is that we want to evalore | |
| I. The reason we want to talk to you is that we want to explore | |
| the confidence in the police complaints system for those | |
| people who have experienced mental health problems, including those who have had contact with the Police and | |
| used the complaints procedure, but it doesn't matter if you | |
| have not made a complaint about the police or have ever | |
| wanted to | |
| II. The Focus Group will last for around 1.5 hour time. We will | |
| have a break around 30 minutes in if we feel we need it. | |
| III. You do not need to answer questions that you don't want to, | |
| but we are here today to hear your views and experience, | |
| there are no right or wrong answers and do not worry if you | |
| do not know much about the IPCC/IOPC, there are no right or | |
| wrong answers. | |
| IV. We are going to make a digital recording of the interview, | |
| this is for data analysis purposes so we can focus on the | |
| discussion today. We will not identify you by name | |

- V. In terms of the discussion today, I'd like to discuss some group rules, can we agree not to share what we discuss today out of the group in terms of respecting others confidentiality, we are okay to disagree with each other as we all have different opinions and experiences, but please respect each other and try not to talk over each other
- VI. There are no right or wrong answers, it is your views we are interested in
- 5. Ask if they have they have any questions about the project.

TOPIC 1 Contact with police via complaining

QUESTION 1.1 I'm interested in your experience of the police complaints system. Have you ever made a complaint against the police/or wanted to make a complaint?

TO THOSE WHO HAVE MADE A COMPLAINT:

1.2 Where did you complain?

PROBE: local police force where incident took place? -Or somewhere else?

1.3 Were you happy with the way your complaint was handled and the outcome?

PROMPT: Did you have any further contact with police about this matter?

TO THOSE WHO WANTED TO, BUT DID NOT MAKE A COMPLAINT:

1.4 What were your experiences?

Why didn't you take the matter any further?/what were the reasons for you not making a complaint?

TOPIC 2 Awareness of police complaints system

Asked to identify if the participant has made a complaint/wanted to make a complaint about the police and their experiences of this

QUESTION 2 Where or who would you go to complain about the police?

PROBE: local police force where incident took place? – IPCC/IOPC? PROMPT: How would you go about making a complaint about the police?

I'm going to ask you about the Independent Police Complaints Commission (IPCC), or the Independent Office for Police Conduct (IOPC), as it is now known. Don't worry if you haven't heard of it — I'm going to ask you some questions about it and there are no right or wrong answers. I will give you a description in a bit and give you a leaflet to take away about it but first I would like to know what you already do or do not know about the Independent Office for Police Conduct, as it is now called.

QUESTION 2.2: Have you heard of the Independent Police Complaints Commission (IPCC) or the Independent Office for Police Conduct (IOPC)?

- clarify with participants what they would like it to be called e.g. which would be easier for the rest of the focus group.

2.2.1 If yes, ask: What do you know about it and how do you know about it?

2.2.2 if No,

- PROMPT: What kind of an organisation do you think it is?
- PROMPT: What does the name, Independent Office for Police Conduct (IOPC) mean to you?
- PROMPT: Where would you go to get in touch with or find out information?

Facilitators Note:

1. I'm now going to give an explanation of what/who the IPCC/IOPC are:

"The Independent Police Complaints Commission, or as it is now known, the Independent Office for Police Conduct, the IOPC for short, is an independent organisation. This means they make decisions themselves and are not part of the police.

If something very serious has happened the Independent Office for Police Conduct will usually look into it.

Some examples of the things they look at are:

• If someone has died after having contact with the police

To establish if the participants know the process of complaining about the police e.g level of awareness of complaining protocol

To assess if participants have heard of the IOPC and if they understand the relationship to complaining about the police

Nb* you can say that you will ask those who know about it some more questions later on the topic If someone has been seriously hurt after having contact with the police

The people dealing with your complaint must tell you how it will be dealt with and what is going to happen next.

The IPCC/IOPC deals with the most serious and sensitive complaints. Their aim is to make sure that if something bad has happened, it does not happen again.

Most complaints are less serious than this and the police deal with most complaints themselves and if you complain directly to the IPCC/IOPC they will send the complaint to the police force you are complaining about so they can see if they can help sort the complaint out for you. But if you have made a complaint about the police and you are not happy about the way that the police dealt with it, you can appeal. Appealing means someone will look at whether the complaint was dealt with in the right way. Sometimes the police deal with appeals. Sometimes the IPCC/IOPC deal with appeals. If the IPCC/IOPC deals with your appeal, they will tell the police what to do next

TOPIC 3 Access and other challenges to complaining about the police

QUESTION 3.1: Do you have any thoughts on how easy or hard it is to complain about the police?

- PROBE: Why?

3.1.1 Would anything prevent you from complaining about the police about something you had experienced or seen?

QUESTION 3.2 Do you think having a mental health condition would impact on how easy or hard it is to bring a complaint against the police?

Can probe: is this the same for you?

3.2 Would anything make you feel more confident/comfortable?

FOR THOSE WHO KNOW WHAT THE IOPC IS:

- **3.4** What about the IPCC/IOPC, would anything prevent you from complaining to them about something you had experienced or seen?
- **3.5** When you are experiencing mental health difficulties are there any specific challenges that make it harder to access the complaints system?

FOR EVERYONE

QUESTION 3.6: Are there any advantages of complaining about the police?

PROMPT: Would anything motivate you to make a complaint?

To understand accessibility of complaining about the police

To explore barriers of complaining To understand if having a mental health condition impacts on this view

To understand individual experience

To ask understand how MH intersects with the above feelings

- To get a problem rectified?
- To receive compensation?
- To receive an apology?
- For an officer to be disciplined?
- Other reasons?
- Those involved would learn from the complaint?
 Probe: police officer/local police force / national police organisation

To understand if there is a barrier that can be changed

To explore challenges of complaining about the police

To explore how mental health impacts on the reasons given

QUESTION 3.7: -Are there any disadvantages of complaining about the police?

- PROMPT: Would anything put you off making a complaint about the police?

QUESTION 3.8 Does having a mental health condition change anything we've discussed, for example creating additional challenges?

TOPIC 4 Confidence (fairness, impartiality, respect professionalism)

QUESTION 4.1 If you had a complaint about the police do you think your complaint would be treated fairly and impartial? (Impartial means fair and neutral)

- Why?

PROMPT:

- 4.1 Do you think you would be treated fairly and impartial to your mental health? Why?
- 4.2. Would anything make you feel more confident that you and your complaint would be treated fairly?

Note to facilitator: you might need to explain what impartial means and what feeling more confident means.

You can explain confidence by meaning that you can rely on, or believe in more or 'feel better'

PROMPT:

4.2.1 If you had a complaint about the police do you think you would be treated with respect and professionalism? Why?

THOSE WHO HAVE HAD CONTACT WITH THE IPCC/IOPC QUESTION 4.3 If you have had contact with the IPCC/IOPC has your confidence in the complaints system changed because of this? If so, how?

- 4.3.1 Were your mental health issues recognised or discussed during the complaints procedure?
- did this change your experience?
- 4.3.2 where there any examples of positive or good practise that you experienced when making a complaint?

TO EVERYONE

QUESTION 4.4 If you were experiencing Mental Health problems when you made a 'complaint about the police', do you think this would have an effect on how your complaint was dealt with? **TOPIC 5 Improvements that could be made** QUESTION 5.1: What would encourage you or other people with mental health conditions to complain about the police? PROMPT: What would make it easier to complain? To understand **5.1.1** What additional support could be provided? how those who PROMPT: Who do you think people would prefer to complain have experienced mental ill health to? And how? confidence in the PROBE: police organisation? Independent body? Someone complaining else? Medical professional? about the system FOR THOSE WHO HAVE COMPLAINED QUESTION 5.2: If you have complained, is there anything about the process that you would like to have changed/seen improved? PROMPT: What would you change about the complaints process? Actual and QUESTION 5.3 Would you prefer to complain somewhere else or perceived would you contact anyone else if you had a complaint about the challenges around police? the police PROBE: Why/why not? complaints system Who? MP? Citizens Advice Bureau? Local Council? Other? CONCLUSION Thank you very much for sharing your experiences with us today, before we conclude I would like to ask is there anything else that you would like to add about the Independent Office for Police Conduct (IOPC) that we haven't already discussed about mental health and complaining about the police? Summary and thank you: • Summarise events and ask if this is an accurate description Thank them for coming Hand out vouchers Offer a 10-minute feedback session on the process to those who want to stay

Appendix 2: Survey questions and responses

Statistical note:

Some percentages may add up to more or less than 100% due to rounding Results displaying 0% are not rounded down, and represent no responses to this response option

Table 1. Do you have a mental health problem at the moment and/or have you had a mental health problem in the past? (N=89)



Table 2. Was your mental health problem diagnosed by a professional? (N=89)

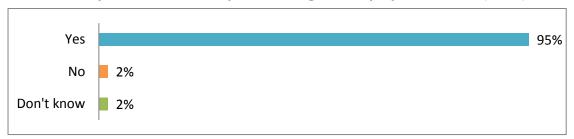
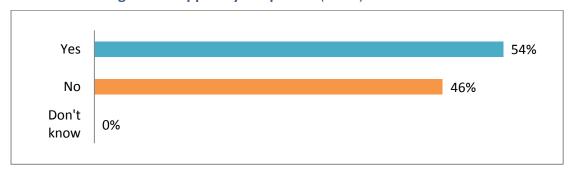


Table 3. In the last year, have you had any contact with the police, for example, to report a crime or having been stopped by the police? (N=89)





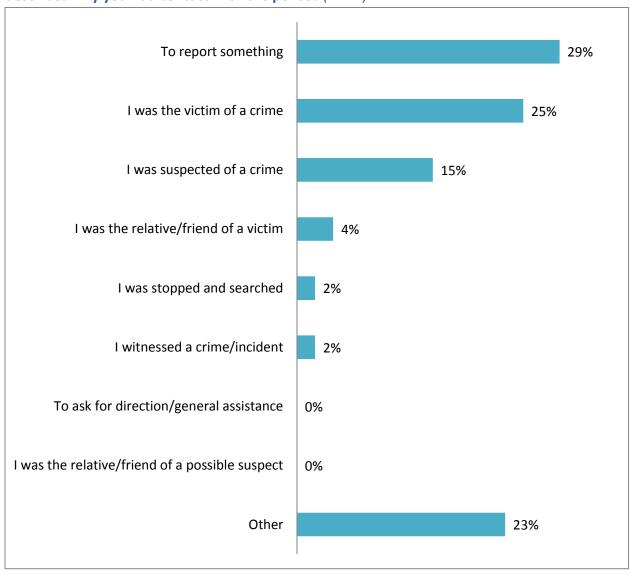


Table 5. To those who have had police contact in the last year: How did you feel about the way the police treated you during this contact? (N=47)

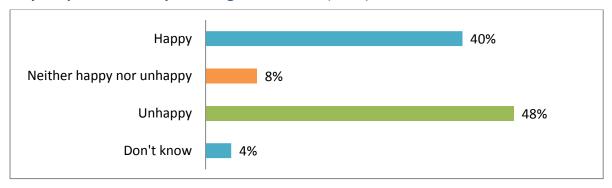


Table 6. If you were really unhappy about how a police officer behaved towards you, OR handled a matter in which you were involved, how likely would you be to complain? (N=89)

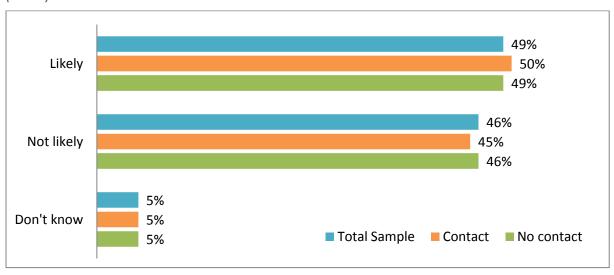
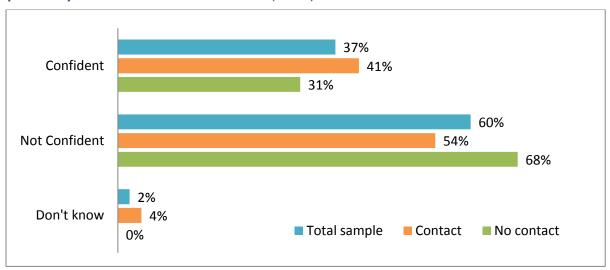
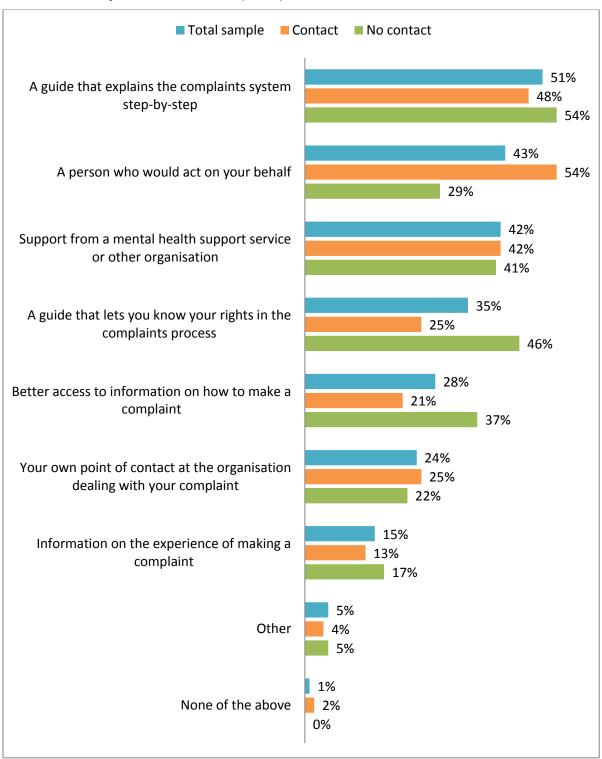


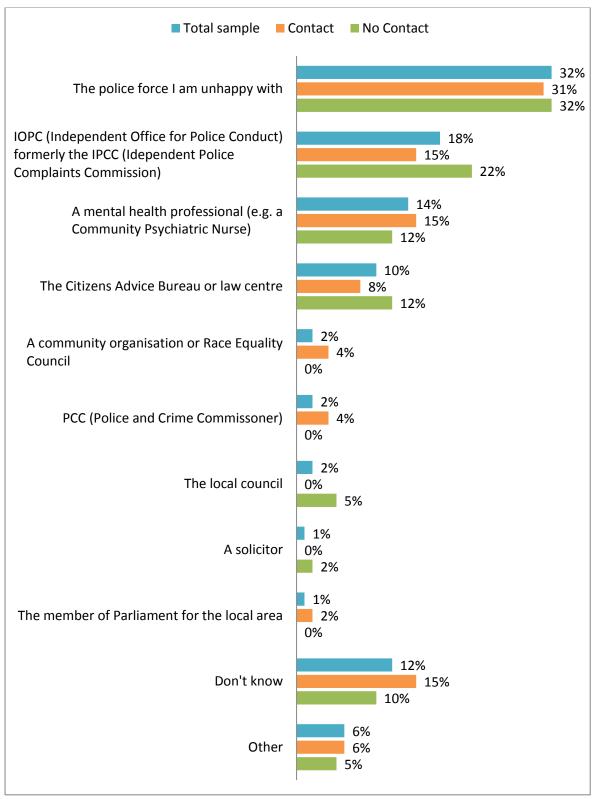
Table 7. If you wanted to make a complaint about the police, how confident, if at all, are you that you would know how to do it? (N=89)













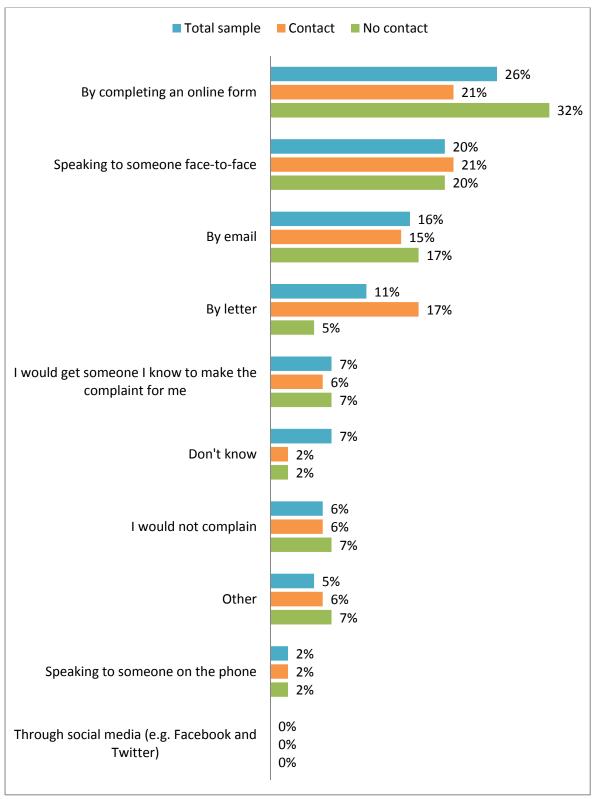


Table 11. If you were thinking of making a complaint, to what extent would you agree or disagree with the statement 'I would be worried that it would take up too much of my time' (N=89)

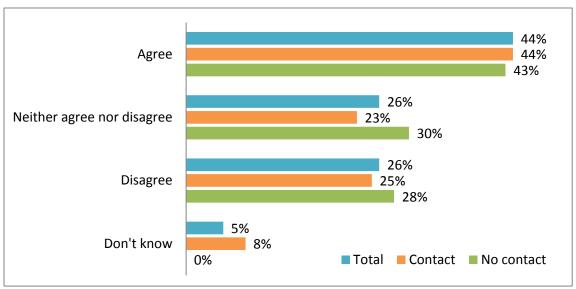


Table 12. If you were thinking of making a complaint, to what extent do agree or disagree with the statement 'I believe something would be done to help resolve the complaint' (N=89)

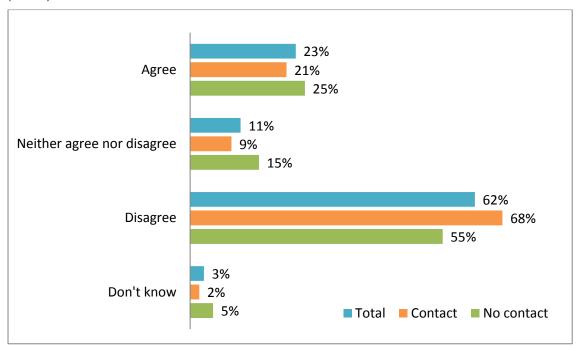


Table 13. If you were thinking of making a complaint, to what extent would you agree or disagree with the statement 'I would be taken seriously' (N=89)

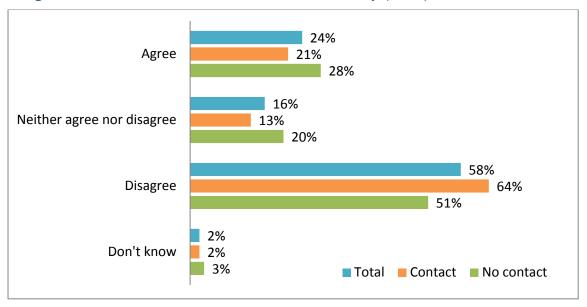


Table 14. If you were thinking of making a complaint, to what extent would you agree or disagree with the statement 'I would be worried about police harassment or other consequences' (N=89)

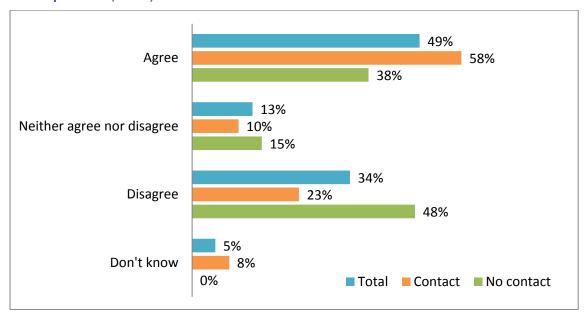


Table 15. If you were thinking of making a complaint, to what extent would you agree or disagree with the statement 'I believe the system is too complicated' (N=89)

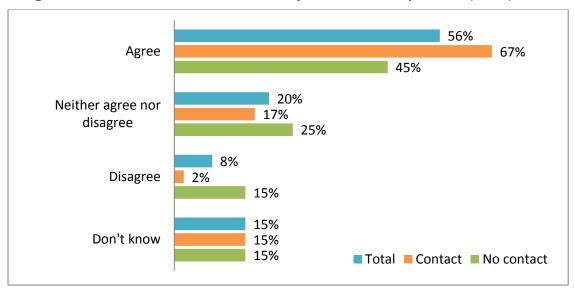


Table 16. If you were thinking of making a complaint, to what extent would you agree or disagree with the statement 'I would be worried that the process might make me relive a bad experience' (N=89)

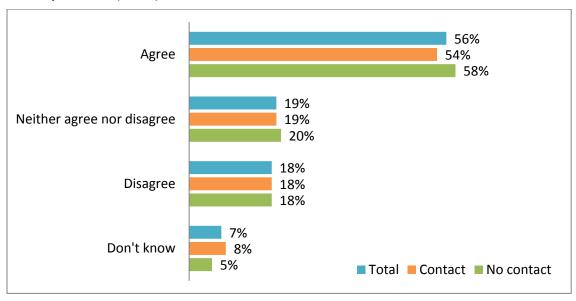


Table 17. If you were thinking of making a complaint, to what extent would you agree or disagree with the statement 'I would be worried that I would be treated unfairly because of my mental health problem' (N=89)

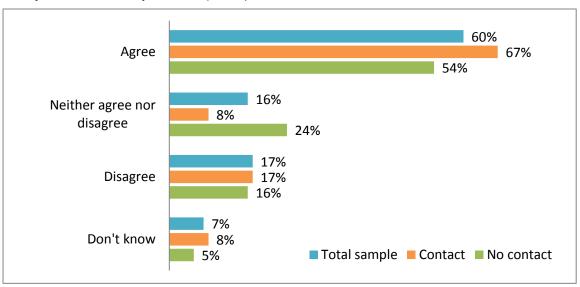


Table 18. How confident, if at all, are you that the police deal fairly with complaints made against the police? (N=89)

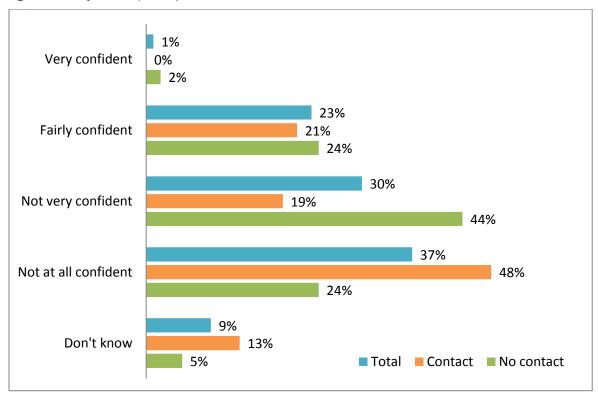


Table 19. Before today had you heard of the Independent Office for Police Conduct (IOPC), or the Independent Police Complaints Commission (IPCC), as it used to be known? (N=89)

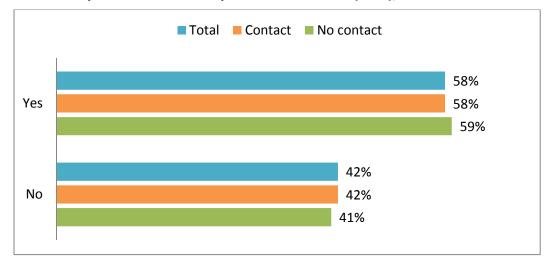


Table 20. To those who had heard of the IOPC/IPCC: In which of the following ways have you heard about the Independent Office for Police Conduct (IOPC), previously known as the Independent Complaints Commission (IPCC)? Please select all that apply (N=54)

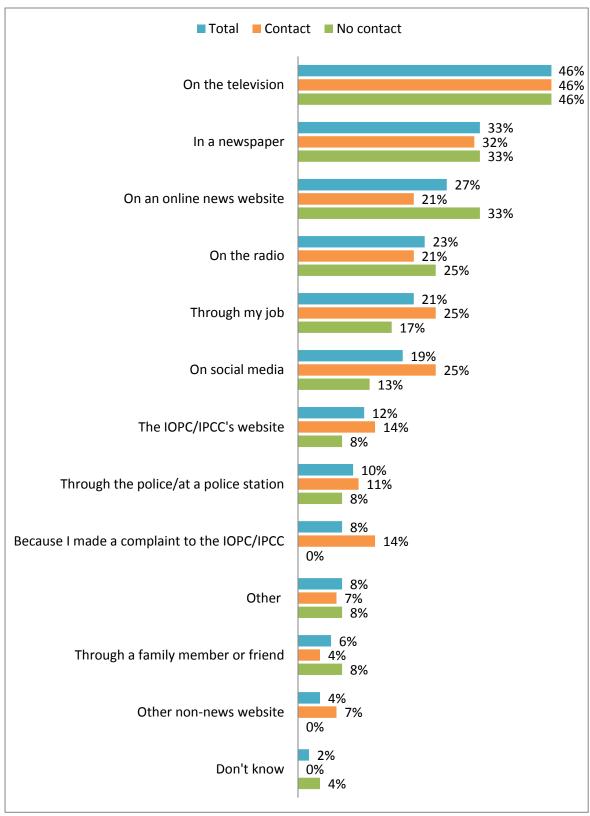


Table 21. To those who had heard of the IOPC/IPCC: Do you think that the Independent Office for Police Conduct (IOPC), previously known as the Independent Police Complaints Commission (IPCC), is part of the police? (N=54)

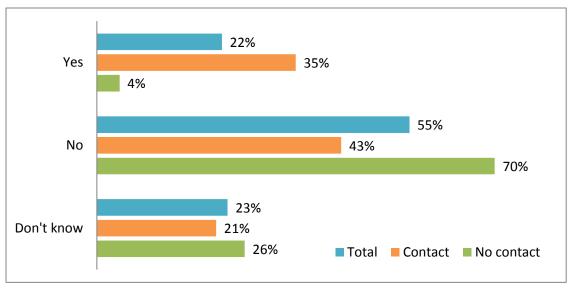
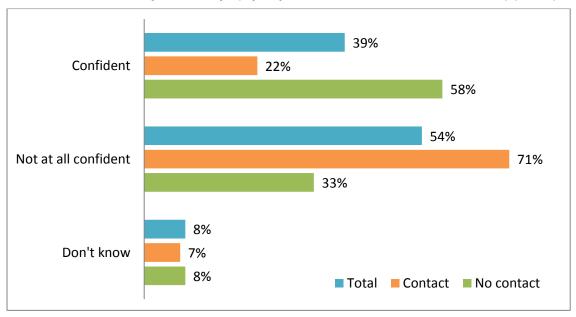


Table 22. To those who had heard of the IOPC/IPCC: How confident, if at all, are you that the Independent Office for Police Conduct (IOPC), previously known as the IPCC, deals with its work in an impartial way? (By impartial this means fair and neutral) (N=54)





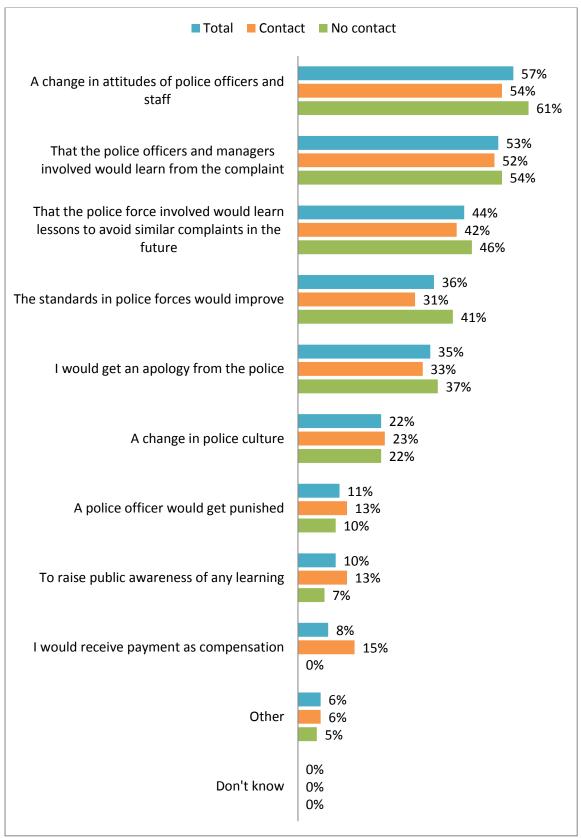


Table 24. How old are you? (N=89)

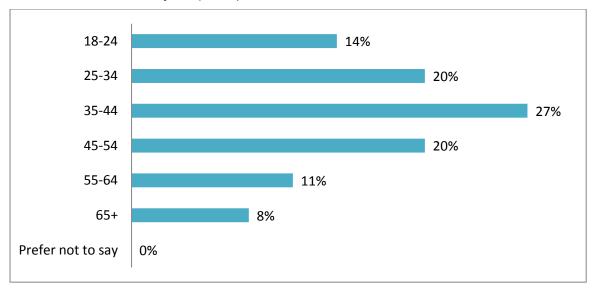


Table 25. What gender are you? (N=89)

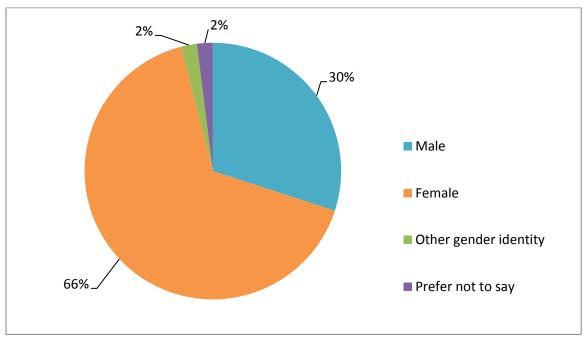


Table 26. Please choose one option below that best describes your ethnic group or background (n=89)

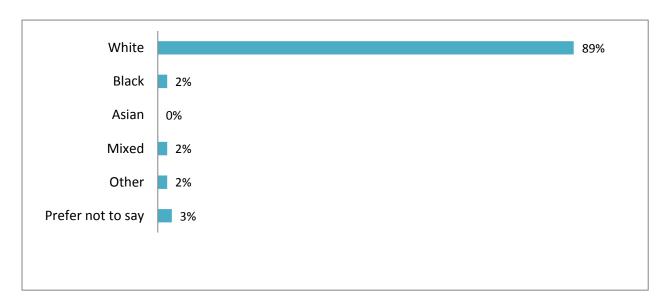


Table 27. Where do you live? (N=89)

