"MY WORLD WAS FALLING APART"

The nature and scale of harm experienced by missing adults in the UK

A lifeline when someone disappears

missing people

Information sheet 2: harm while missing

Almost 400 adults are reported missing in the UK each day, however very little is known about why adults go missing, how and why they come to harm while missing, and the impact being missing has on their life when they return. There is a substantial gap in understanding of the wider nature and scale of harm experienced while adults are missing.

This research aims to:

1. Identify why adults go missing and how this links to harm or threats of harm
2. Identify the nature and scale of harm being experienced by adults while they are missing and the impact of this harm after return
3. Identify how Missing People, the police and other agencies need to respond to missing adults to prevent and reduce harm.

A mixed methods approach has been used in this research. This included conducted a literature review, analysing 425 records held by the Missing People charity, analysing 125 police force records, and original research conducted with 64 adults who have been missing.

To read the full report please click here.

Key finding: over 3 in 4 adults completing the survey disclosed experiencing harm while missing

77% of adults completing the survey conducted for this research experienced harm while away (49 of 64). This compares to 10% in National Crime Agency statistics on missing.
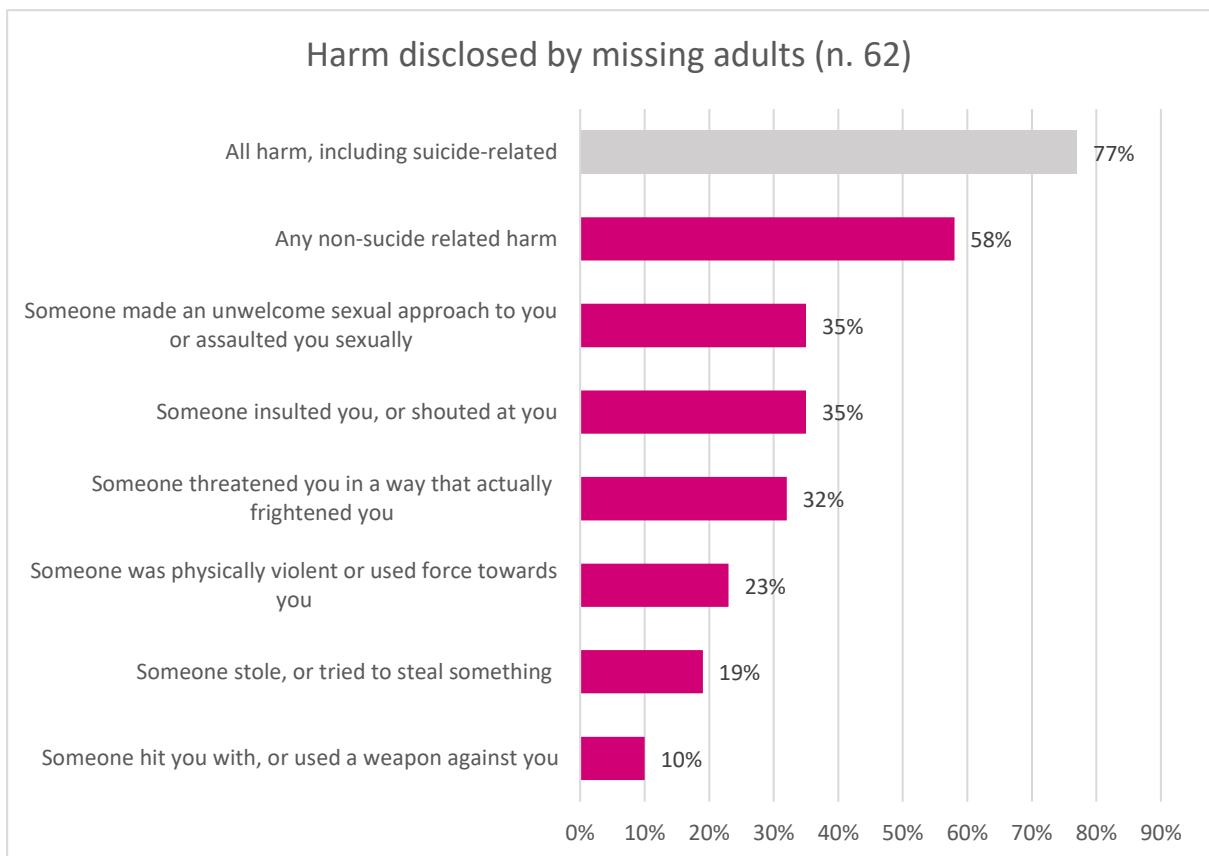
In terms of suicide and self-harm:

- Over half of missing adults said that they had *'thought about taking your life, but did not try to do so'* while missing; 51% (32 of 63)
- 4 in 10 had *'made an attempt or attempts to take your own life'* while missing; 41% (26 of 63)

- Almost half had *deliberately harmed yourself in any way but not with the intention of taking your own life'* while missing; 49% (31 of 63)

In terms of other type of harm, nearly 60% (36 of 62) of missing adults disclosed experiencing some other form of harm, including being threated, sexually assaulted or experiencing physical violence while away.

There was clear evidence of harm related to crime, with 1 in 3 disclosing that they had experienced an unwelcome sexual approach or were assaulted sexually while missing, and nearly 1 in 4 experiencing physical violence or force. Nearly 1 in 5 (12 of 62) had something stolen or an attempt at something being stolen, and 1 in 10 (6 of 62) had a weapon used against them. There are clear links here between going missing and being a victim of crime, particularly in terms of sexual harm and experiencing physical violence or force.

Harm disclosed by missing adults (n. 62)

Category	Percentage
All harm, including suicide-related	77%
Any non-sucide related harm	58%
Someone made an unwelcome sexual approach to you or assaulted you sexually	35%
Someone insulted you, or shouted at you	35%
Someone threatened you in a way that actually frightened you	32%
Someone was physically violent or used force towards you	23%
Someone stole, or tried to steal something	19%
Someone hit you with, or used a weapon against you	10%

"My world was falling apart": the nature and scale of harm experienced by missing adults, 2022
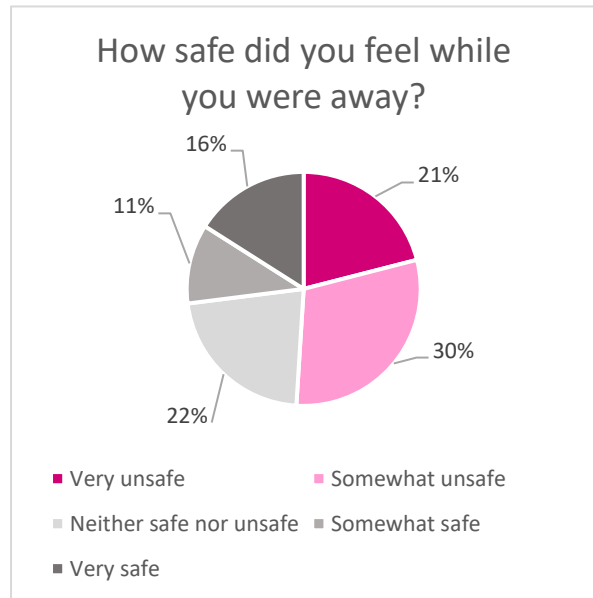Information sheet 2: harm while missing
© Missing People, 2022

The survey of missing adults also asked whether they had experienced a range of things that may be linked to harm while away. The chart below shows the prevalence of experiences.
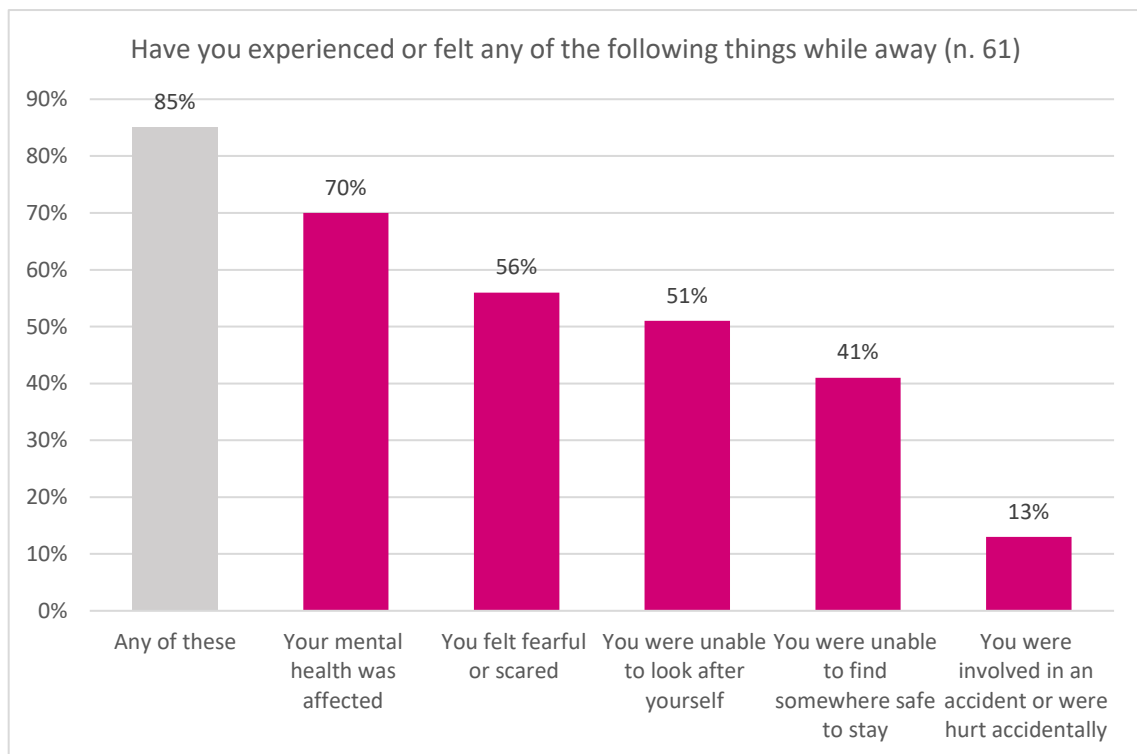
The vast majority of people who responded to the survey had experienced at least one of these things, with 40% of respondents experiencing three or more. Only 15% of those completing the survey had experienced none of these things while they were missing.

The nature and scale of harms being experienced by adults, as disclosed by adults completing the survey, and as demonstrated in the records review, is much higher than that currently evidenced through the NCA statistics. And while suicide and self-harm are the most commonly being experienced in both the survey and the record review, the range of harms, and the fact that many people are experiencing more than one of these things demonstrates the often harmful, dangerous and scary situations adults often experience while away.

Adults who had been missing were asked about their safety, and how safe or unsafe they felt while they were missing or away:

How safe did you feel while you were away?

- Very unsafe — 21%
- Somewhat unsafe — 30%
- Neither safe nor unsafe — 22%
- Somewhat safe — 11%
- Very safe — 16%

Slightly over half said that they felt either 'very' or 'somewhat' unsafe: 32 of 63. Slightly more than a quarter said they felt either 'very' or 'somewhat' safe (17 of 63), with the remainder saying they felt neither safe nor unsafe.

Have you experienced or felt any of the following things while away (n. 61)

Category	Percentage
Any of these	85%
Your mental health was affected	70%
You felt fearful or scared	56%
You were unable to look after yourself	51%
You were unable to find somewhere safe to stay	41%
You were involved in an accident or were hurt accidentally	13%

Prevalence of harm in Missing People and police records

In the 199 cases reviewed from Missing People records, 1 in 3 people experienced harm while missing (65 of 199; 33%).
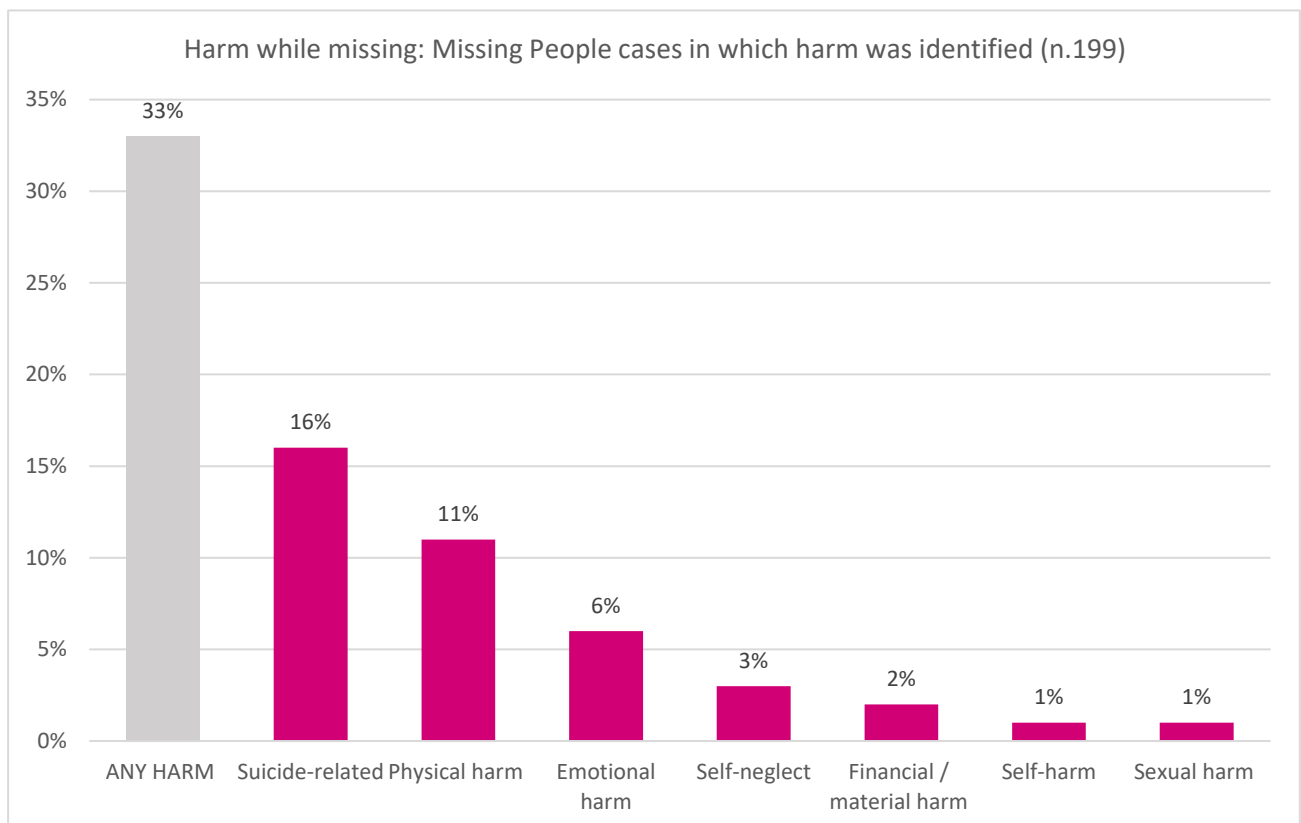
Records held by Missing People and those shared by the police force were analysed to determine how prevalent different harms were for missing adults who had returned from being missing:

- 199 Missing People records were reviewed
- 82 police records were reviewed – which is all of the cases where the police had recorded that the person had come to harm while missing and had returned. This is 7% of all incidents in the police force that year and represented 8% of missing adults.[1]

Case study

Maggie* had been reported missing after getting lost after an appointment. She has Alzheimer's as well as mobility concerns due to other ill health.

She was found after being seen by a friend of the family. When she was found she had some injuries and told the police that she had fallen over a couple of times when she was lost. She was taken to hospital to be checked over.

Harm while missing: Missing People cases in which harm was identified (n.199)

Category	Percentage
ANY HARM	33%
Suicide-related	16%
Physical harm	11%
Emotional harm	6%
Self-neglect	3%
Financial / material harm	2%
Self-harm	1%
Sexual harm	1%

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[1] There were 1,148 missing incidents relating to 978 missing adults. 25 records were also shared with us where the police record did not specifically record that the person had come to harm. Of those 25, we found no evidence of harm having been experienced in those episodes.

In terms of the types of harm identified in those records where harm was known or suspected to have occurred, the two most commonly identified types of harm were related to suicide and physical harm, as can be seen in the chart below.

Physical harm suggests that the person may have been a victim of crime, and suicide-related harm demonstrates a clear risk to life. Therefore, in the majority of cases where someone comes to harm while away there is a need for police intervention, either linked to crime or the protection of the person who has gone missing.
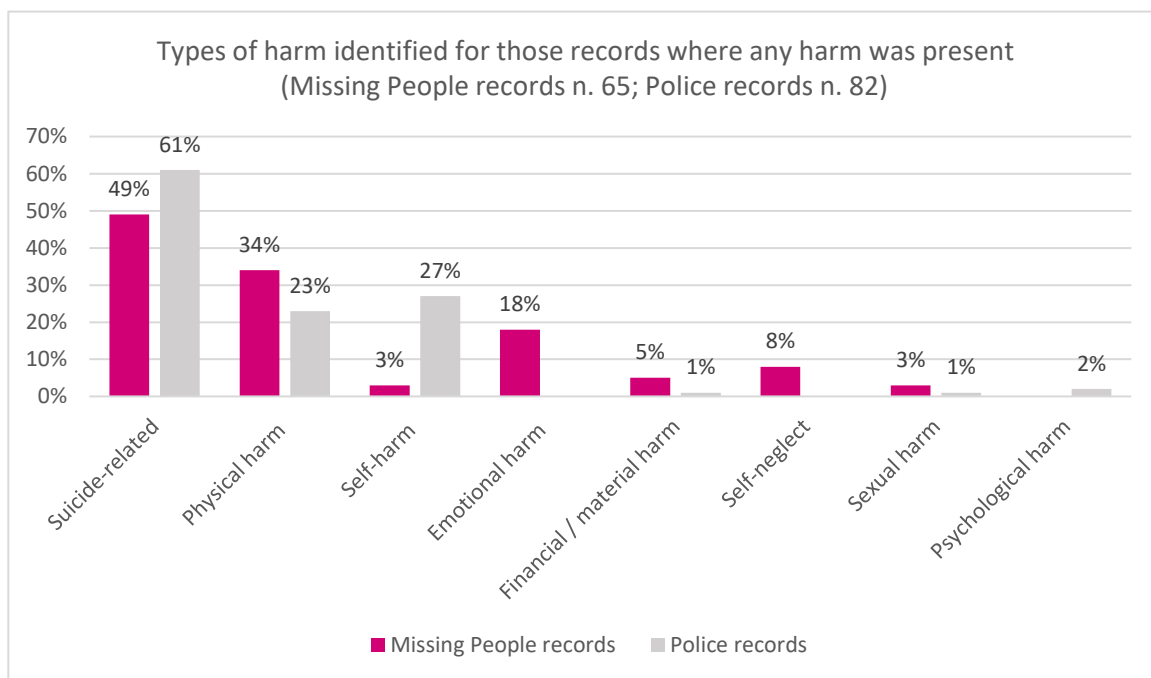
Suicide-related harm

Suicide-related harm was the most commonly identified harm in both Missing People and police records. This harm covers attempts made by people to take their own life as well as suicidal intentions or thoughts while away.

In Missing People records the most common suicide related harm was experiencing suicidal thoughts or intention while away (32 of 65 records), whereas in police records over half of those known to have come to harm while away had actually tried to take their own life (44 of 82 records). This discrepancy may be due to the higher level of detail contained in police records, including details shared in Safe and Well checks when the person returns.

Physical harm

In Missing People records, nearly 1 in 3 of those who had suffered harm were known or suspected of suffering physical harm. [2]

This is also seen in police records, where almost 1 in 4 of those who came to harm suffered from physical harm while they were away.[3]

Types of harm identified for those records where any harm was present
(Missing People records n. 65; Police records n. 82)

Suicide-related: Missing People records 49%, Police records 61%
Physical harm: Missing People records 34%, Police records 23%
Self-harm: Missing People records 3%, Police records 27%
Emotional harm: Missing People records 18%
Financial / material harm: Missing People records 5%, Police records 1%
Self-neglect: Missing People records 8%
Sexual harm: Missing People records 3%, Police records 1%
Psychological harm: Police records 2%

■ Missing People records ■ Police records

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[2] In terms of other types of harm; in Missing People records (n. 199) 12 people were known or suspected to have suffered emotional harm; 5 suffered harm through self-neglect; 3 suffered financial or material harm; and 2 from sexual harm. For police records (n. 82); 2 people came to or were suspected of coming to psychological harm; 1 was suspected of coming to sexual harm, and 1 came to financial / material harm.

[3] 19 of 82; 23%.

In some cases the record specified some detail about the physical harm but not about how it happened. For example, records referenced people returning with injuries thought to be from assaults, bleeding noses, a black eye, cuts, and bruises.

In other cases the reason for the physical harm was specified. Examples of these cases included people falling over, people experiencing assaults, and a case in which someone was hit by a car. While these records often did not include enough detail to say whether the person was a victim of crime, any physical harm inflicted by someone else should be treated as such.

Recommendations

Before missing / prevention

This research shows that people go missing in a myriad of different situations, experiencing a wide range of risks and vulnerabilities. And while it can be difficult to identify when someone is at risk of going missing, some groups have been identified as being at increased risk. This particularly includes people experiencing mental health issues, who may have come into contact with mental health professionals.

- Mental health professionals should be equipped with protocols to use when supporting someone who may be at risk of going missing. With similar aims to the Philomena Protocol and the Herbert Protocol, this should include talking to people about the risks of going missing, what would happen if they do go missing, where they might go if they do go missing, and what support they might need to prevent them from going missing.[4]

- Missing People should review how the charity's services are delivered and marketed, to ensure they are meeting the needs of adults who are thinking about going missing, especially adults with mental health issues

Risk assessments

The identification of risk for each missing episode is critical in determining the steps to be taken when someone is reported missing. Risk assessment processes should enable consideration to be made of each individual's circumstances as well as standard questions around risk, recognising the complex nature of missing episodes. This research has found that most missing adults are at risk while missing, from mental health, to risks around suicide, to being a victim of assault or other crime. The police should try to understand as fully as possible the risks each adult faces when they are missing through detailed, effective risk assessment processes. They should therefore include:

- Using professional curiosity when assessing risk, including exploring risks around diagnosed and undiagnosed mental health, suicide, previous missing episodes, and previous harm experienced[5]

- Seeking information from other professionals, relatives and friends, particularly where the reporting person is not able to share a full picture of risk. This is in line with existing College of Policing Authorised Professional Practice guidance.[6]

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[4] For more information about both the Herbert and Philomena Protocols, please see Missing People's website: https://www.missingpeople.org.uk/for-professionals/services-for-professionals/welcome-to-the-national-missing-persons-framework-toolkit-for-professionals-in-scotland/prevent-introduce-preventative-measures-to-reduce-the-number-of-missing-persons-episodes/the-herbert-protocol-purple-alert-and-the-philomena-protocol

[5] The College of Policing's Curiosity guidelines: https://www.college.police.uk/guidance/vulnerability-related-risks/curiosity

[6][6] College of Policing Authorised Professional Practice, Missing Persons: https://www.app.college.police.uk/app-content/major-investigation-and-public-protection/missing-persons/

During missing

An accurate identification of risk is crucial in determining what happens when someone is reported missing, meaning that the police can appropriately allocate resourcing based on each individual missing incident. Missing adults may need additional support while missing, particularly where they have gone missing in high-risk situations. Those offering this type of support should ensure that it is reaching missing adults and that it is meeting their needs:

- Missing People should review their support offer to missing adults, including rolling out the provision of Suicide Risk TextSafe® across the country

- Police forces should maximise the use of TextSafe® and Suicide Risk TextSafe® to ensure missing adults are aware of Missing People's confidential, anonymous, free to access support

Return

This research has found that very few adults will seek help while missing. It also shows that rates of disclosures of harm are higher when disclosed directly from adults who have been missing than were made on return to the police in the records reviewed for this research. Rates of harm experienced were significantly higher than is currently evidenced in national statistics on missing.

While this research did not examine the effectiveness of police Safe & Well checks / prevention interviews, they are a key opportunity to identify harm suffered and any support needed for returned missing adults. To encourage disclosures from returned adults, Safe & Well checks should be delivered in a way that enables returned missing adults to share why they went missing, what happened while away, and what help they need to prevent them going missing again.[7] The police should be able to direct them to further support if needed.

Prevention interview / Safe & Well check delivery should include:

- Ensuring that returned missing adults are given a safe and supportive space and enough time to talk about their missing episode, including any harm they may have come to while missing

- Having access to referral routes for further support for issues including mental health, personal safety and financial support. This could include details of charities like Missing People and Citizens Advice Bureau, and established referral routes to local support services and to community mental health teams

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[7] This is in line with the College of Policing's Curiosity guidelines: https://www.college.police.uk/guidance/vulnerability-related-risks/curiosity

- Local authorities and Health and Wellbeing Boards should consider piloting return discussions for returned missing adults. These could be delivered by independent providers, giving adults an opportunity to disclose more about their experiences and access support from a non-police partner

The evidence in this report suggests that harm is often not disclosed in safe and well checks and is much more common than the figures in current national statistics. This suggests that people are left dealing with experiences of harm including suicide attempts, abuse, assaults and worsening mental health without support.

The complexity of people's experiences, both in what drove them to go missing and in what they experienced while they were away, show that there is not a single existing pathway into support for this group: the support needed will hugely vary depending on the individual and the police will not be the right agency to support many returned people, including those with financial issues and mental health issues. While police have a central role to play when someone returns from being missing, responding to missing adults should be understood to be a multi-agency responsibility. All areas should have a local protocol in place to outline how local agencies will work together to safeguard and support missing and returned people:

- Local authorities and multi-agency partners in England, including the police and the NHS, should review their responses to missing adults in light of the 2020 'multi-agency response for adults missing from health and care settings: A national framework for England'[8]

- Local authorities and multi-agency partners in Scotland should review their responses to missing adults in light of the 2017 National Missing Persons Framework for Scotland[9]

- Missing People should work with partners in Wales to develop a multi-agency framework outlining how local agencies will work together to safeguard and support missing and returned adults, similar to that developed in England

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[8] Home Office & Missing People, *The multi-agency response for adults missing from health and social care settings: A national framework for England,* October 2020, https://www.missingpeople.org.uk/wp-content/uploads/2021/08/The_multi-agency_response_for_adults_missing_from_health_and_care_settings_A_national_framework_for_England_Web_Oct_2020.pdf.

[9] National Missing Persons Framework for Scotland, May 2017: https://www.gov.scot/publications/national-missing-persons-framework-scotland/

Prevalence of harm in Missing People and police records: Harm while missing			
Type of harm	Fatal outcome cases (Missing People): n. 89	Fatal outcome cases (police records): n. 18	Found / returned (Missing People): n. 199
ANY HARM	100% (89)	100% (18)	33% (65)
Confirmed or suspected death by suicide	58% (52)	67% (12)	
Other fatal harm	42% (37)	33% (6)	
Suicide-related			16% (32)
Self-harm			1% (2)
Physical harm	1% (1)	6% (1)	11% (22)
Emotional harm	4% (4)		6% (12)
Self-neglect	4% (4)		3% (5)
Financial / material harm	3% (3)		2% (3)
Sexual harm			1% (2)
Psychological harm		6% (1)	