"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 8: Findings related to suicide

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.

Why do adults go missing? Findings related to suicide

> *"I felt like I was going to lose everything, like my world was falling apart, like I was stuck in the same old cycle."*

The most common influence for going missing provided by those completing a survey conducted for this research was their own feelings / mental health: 94% (60 of 64) reported that their own feelings / mental health had definitely or possibly influenced their decision to leave. For those adults, almost 2 in 3 were feeling suicidal when they went away: 64% (38 of 59).

In the case records review, suicide risk was the second most commonly known or suspected risk being experienced by missing adults. This was the case across all types of case:

Percentage of cases where suicide risk was known or suspected

- Missing people fatal outcome cases
- Missing People found / returned cases
- Missing people still missing cases
- Police fatal outcome cases
- Police found / returned cases (harm while away)
- Police found / returned cases (no harm while away)

In NCA statistics suicide was an identified reason for adults going missing, but at a much lower rate than disclosed in this survey: in 5.9% of cases the reason was a suicide attempt. The NCA statistics are considered to be under-estimates due to limitations linked to disclosures to police and limitations around recording quality.

Harm experienced while missing: cases in which the person returned / was found

In the survey with missing adults, many people disclosed that they had experienced suicide-related harm while missing:

- 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)

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 the 199 cases reviewed from Missing People records, 1 in 3 people experienced some form of harm while missing. The most prevalent type of harm was linked to suicide, with 16% of missing adults coming to suicide-related harm while away (32 of 199). And where any harm was present in records, 49% (32 of 65) of Missing People records showed suicide-related harm, as did 61% (50 of 82) of Police records.

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.

In many of the cases reviewed the person had gone missing in circumstances that clearly suggested that they might take their own life, and this was reported to the police when the person was reported missing.

This might have been because the person went away having left a note, told someone something suggesting they were going to try to take their own life, or sent a text, or posted something on social media. It might also have been because the person was known to be at risk of suicide because of what was happening in their life at the time.

> Ashley* was in hospital after having threatened to take her own life. She left the hospital without being assessed by the mental health team.
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> She then sent a text to her sister telling her that she'd "had enough" and that she was going to take an overdose. She was found by the police having drank some whisky and taken an overdose of paracetamol. She was taken to hospital.

The records show very complex and difficult situations for many people reported missing and subsequently attempting to take their own life or with suicide intentions. Examples include people experiencing mental health crisis and going missing from hospital, people who have been experiencing difficulties at home and at work, or in their relationships with friends and family.

Cases in which people died by suicide while missing

In both Missing People cases and police records, suicide was the most common cause of death in cases where there was a fatal outcome.

For Missing People records, over half of the cases in which someone died were confirmed or suspected death by suicide (52 of 89; 58%).

Regarding the police records where the person had died: in 2/3rds of cases the death was confirmed or suspected to be suicide (12 of 18; 67%).

These findings confirm previous research which has found that in missing cases where the cause of death is known the most common cause is suicide. *Learning from Fatal Disappearances* found that in 56 of the 186 cases they examined the missing person had taken their own life.[1]

> Darren* was reported missing after his friends had been unable to contact him for a few days. There was no known 'trigger' for the missing episode, but he was experiencing a number of vulnerabilities: he had been suffering from poor mental health and had attempted to take his own life in the past.
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> He had gone missing without taking anything with him; leaving his phone, money and keys at home. When the police began looking for him, they found some evidence that he had gone with the intention of taking his own life, and he was ultimately found having done so.

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[1] Newiss, G. (2011) *Learning from Fatal Disappearances,* Missing People.

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.[2]

- 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[3]

- 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.[4]

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[2] 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

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

[44] 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.[5] 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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[5] 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'[6]

- 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[7]

- 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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[6] 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.

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