FULL/LONG TITLE OF THE STUDY
Exploratory research to examine the health impact of scams and fraud and the current knowledge and systems in the police and partner agencies for targeting and delivering victim support services

SHORT STUDY TITLE / ACRONYM

The Health Impact of Scams and Fraud

PROTOCOL VERSION NUMBER AND DATE

Version 2

05/02/24

RESEARCH REFERENCE NUMBERS

IRAS Number: 1009365

SPONSORS Number:

FUNDERS Number: PHR NIHR15492

This protocol has regard for the HRA guidance and order of content

SIGNATURE PAGE

The undersigned confirm that the following protocol has been agreed and accepted and that the Chief Investigator agrees to conduct the study in compliance with the approved protocol and will adhere to the principles outlined in the Declaration of Helsinki, the Sponsor's SOPs, and other regulatory requirement.

I agree to ensure that the confidential information contained in this document will not be used for any other purpose other than the evaluation or conduct of the investigation without the prior written consent of the Sponsor

I also confirm that I will make the findings of the study publically available through publication or other dissemination tools without any unnecessary delay and that an honest accurate and transparent account of the study will be given; and that any discrepancies from the study as planned in this protocol will be explained.

For and on behalf of the Study Sponsor:

Date:
..30/11/23...

Signature:

....

Name (please print):

........Rick Muir..

Position: Director, The Police Foundation.............

Chief Investigator:

Signature: ....

Date: . 05/02/24.

....

Name: (please print):

Dr Michael Skidmore..

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KEY STUDY CONTACTS

Insert full details of the key study contacts including the following

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Sponsor	Dr Rick Muir, Director, The Police Foundation **Address**: 124 City Road, London, EC1V 2NX **Phone:** 020 3195 3837 **Email** rick.muir@police-foundation.org.uk
Joint-sponsor(s)/co-sponsor(s)	
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Committees	

STUDY SUMMARY

Study Title	Exploratory research to examine the health impact of scams and fraud and the

	current knowledge and systems in the police and partner agencies for targeting and delivering victim support services
Internal ref. no. (or short title)	Health Impact of Scams and Fraud
Study Design	Mixed Methods
Study Participants	Victims of fraud. Practitioners working for the police, social services and Victim Support.
Planned Size of Sample (if applicable)	Quantitative Survey – 1,000 Qualitative interviews – 15 victims and 20 practitioners
Follow up duration (if applicable)	N/A
Planned Study Period	Six months
Research Question/Aim(s)	Research Question Exploratory research to examine the health impact of scams and fraud on victims and current knowledge and systems in the police and partner agencies for targeting and delivering support. Aims and Objectives We aim to produce an evidence base around fraud's physical and mental health impacts and examine current systems for supporting victims within two police forces, building on emerging police policies and systems for supporting vulnerable victims. We will: • Analyse the scale, nature and distribution of health impact • Analyse the association between health impact and wider vulnerability (for example, repeat victimisation) • Index current data available to police and other services for assessing health impact • Map current services, resources and capability in the police and support services for addressing health impact

FUNDING AND SUPPORT IN KIND

FUNDER(S) (Names and contact details of ALL organisations providing funding and/or support in kind for this study)	**FINANCIAL AND NON FINANCIALSUPPORT GIVEN**
National Institute for Health and Care Research (NIHR)	Funding has been obtained from the National Institute for Health and Care Research (NIHR) Ref NIHR154927 in the call: 22/84 Application

	Development Award (ADA): The health impacts of scams and fraud.

ROLE OF STUDY SPONSOR AND FUNDER

Sponsor

The Police Foundation and its director Dr Rick Muir will have overall responsibility for the initiation and management of the study. Dr Muir will have final oversight on study design, conduct, data analysis and interpretation, manuscript writing, and dissemination of results.

Funder

Progress of the Research will be reviewed periodically by the Funder. The funder requires a draft Final Report on the Research within fourteen (14) calendar days of the Completion Date or date of termination howsoever terminated for comment and approval. The Final Report shall be in a form to be agreed with the funder and shall include an outline of the Research Data, methods, an outline of any Foreground IP, Arising Know How, results, Background IP and the final conclusions of the Research together with management information and any other information relating to the Research up to the Completion Date. Researchers have a duty to inform the funder of any outcomes from the Research, including any Foreground IP, Arising Know How or Research Data, which are capable of exploitation either by direct adoption into the healthcare service or via commercialisation.

ROLES AND RESPONSIBILITIES OF STUDY MANAGEMENT COMMITEES/GROUPS & INDIVIDUALS

Study Steering Groups

The first steering committee meeting will invite stakeholder input on the aims, key questions and proposed approach for the research, and the second, will invite feedback on emerging findings and interpretation.

Prior to publication, a draft of the Police Foundation report will be shared with key stakeholders represented on the steering committee who will be invited to share comments and questions. The research team will take account of these comments in finalising the draft.

PROTOCOL CONTRIBUTORS

The sponsor and funders will have final approval of the study design and final report and can request changes to be made prior to the disemmination of the project, and will have responsibility for disemmination. They will be informed of and have the final approval of any major amendments to the project. The researchers will be responsible for conduct, data analysis and interpretation, manuscript writing.

The nautre of the project means that there has been limited public involvement in the design of the project, however there are fraud victims on the steering group who will have a direct infulence on the conduct of the research. The semi-structured interviews will also be trialled on a select group of victims and alterations will be made depending on their views on the questions.

KEY WORDS: Fraud; Health Impact; Police; Vulnerability

STUDY FLOW CHART

The Health Impact of Scams and Fraud

NIHR154927 The Health Impacts of Scams and Fraud

Milestones	Setting up the project							Data collection and analysis				Writing up		Publication and dissemination		Aftermath
Project Month	-7	-6	-5	-4	-3	-2	-1	1	2	3	4	5	6	7	8	9
Calendar Month	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25
Milestone 1 Complete NIHR project set up	x	x														
Milestone 2 Recruit Steering Group Members	x	x	x	x												
Milestone 3 Design victim survey for Sussex Police Citizen Focus team	x															
Milestone 4 Arrange data sharing agreements with Surrey and Sussex Police		x	x													
Milestone 5 Request and Obtain ONS CSEW data	x	x	x	x	x	x	x									
Milestone 6 Literature Review		x	x	x	x	x	x									
Milestone 7 Design questions for expert interviews		x	x													
Milestone 8 Design questions for practitioner interviews		x	x													
Milestone 9 Design questions for victim interviews		x	x													
Milestone 10 Approvals & ethics			x	x	x											
Milestone 11 First Steering Group meeting							x	x								
Milestone 12 Recruit experts (5) and conduct semi-structured interviews								x								
Milestone 13 Send out victim surveys								x	x	x						
Milestone 14 Recruit fraud victims (15) and conduct semi-structured								x	x	x						
Milestone 15 Recruit practitioners (20) and conduct semi-structured								x	x	x						
Milestone 16 Analyse CSEW fraud data										x						
Milestone 17 Analyse practitioner interviews											x					
Milestone 18 Analyse victim interviews											x					
Milestone 19 Analyse victim survey data												x				
Milestone 20 Final report prep and write up												x	x			
Milestone 21 Second Steering Group meeting													x			
Milestone 22 Report launch and dissemination														x	x	
Milestone 23 Writing up study for academic journal															x	x

Version 2 Feb 2024

STUDY PROTOCOL

Exploratory research to examine the health impact of scams and fraud and the current knowledge and systems in the police and partner agencies for targeting and delivering victim support services

1   BACKGROUND

The police and wider support services are increasingly focused on addressing harm or risk of harm, and the impact on health is a key component of these assessments (for example, Poppleton et al, 2021). Research has shown that fraud can have a considerable impact on a victim's health. Research by Button et al (2009b) in a survey of fraud victims found 7.4% had experienced mental health problems, 10.8% physical health problems and 2.3% of victims had experienced feelings of suicide. Furthermore, 45 per cent reported that the financial loss had a significant effect on their emotional well-being, 44 per cent experienced stress and 37 per cent reported a significant psychological or emotional impact (Button et al, 2009a; Button et al, 2009b). More recently, a survey of 250 victims of computer misuse, many of whom were in-fact victims of attempted frauds, found 16.3% had experienced depression, 14.7% panic/anxiety, 8.3% self-harmed and 8.3% suicidal thoughts (Button et al, 2020). A number of factors can determine the impact that a fraud has on victims, including the stress caused by high or irrevocable financial loss (Skidmore, 2020); broken trust with a perpetrator who is known to them (Whitty & Buchanan, 2016); feelings of self-blame and guilt; a lack of understanding and support from friends, family or service providers (Cross, 2015); and limited resilience due to a pre-existing social or health vulnerability (Burton et al., 2022).

Despite the growing evidence on the experiences of fraud victimisation, public services are often not supportive, reflecting both a widespread perception that fraud is a 'victimless' crime and also the confused ecosystem of organisations in the public and private sector with different roles and responsibilities for supporting victims (Button et al, 2009a; Button et al, 2014). Furthermore, many victims' cases are not assigned a criminal investigation response after reporting the fraud, creating challenges for identifying the impact and needs of victims, relying on self-referral, data analytics or the protocols and awareness available to the first responder (Skidmore et al, 2018).

The police are the frontline response to fraud victims and are under increased pressure to deliver a more comprehensive service to fraud victims, not only in terms of criminal justice and crime prevention, but also the support and protection of victims most in need (Skidmore et al, 2018). 'Vulnerability' is prominent in the agendas of government and law enforcement and is key to their understanding of the demand for service and rationalising resource provision. There are number of current gaps:

- Fraud is a high-volume crime and the nature and severity of impact experienced by each victim is wide-ranging (Blakeborough & Correia, 2018), which makes identifying victims in need of support difficult;
- 'Vulnerability' lacks conceptual clarity and so can be inconsistently interpreted and applied. It is variously construed to represent susceptibility to victimisation (or revictimization), victim impact and levels of personal resilience (Skidmore et al, 2020);
- Current systems are primarily oriented to crime reduction rather than to health or welfare outcomes.

1

There is a growing body of research which is seeking to understand vulnerability among victims of fraud and cyber crime (Burton et al, 2022; Correia, 2021; Skidmore et al, 2020), but while overlaps have been identified, few studies have focused on the health impacts of fraud. Furthermore, methodologies to measure the cost of fraud to health services are limited to aggregated estimates and struggle to give a detailed understanding of the nature and distribution of health impact and needs (Heeks, et al. 2018). The absence of physical harm in most cases leaves challenges in meaningfully differentiating fraud victims by the nature and degree of impact on their mental health.

To sum up, research has demonstrated the impact that fraud can have on victims, with surveys showing a significant minority who report a detriment to their physical or mental health as a consequence. However, while these studies indicate prevalence, they do not offer a focused or deep assessment of the nature of this impact, the experiences of these victims, or how these are associated with the characteristics of victims or offending. Furthermore, there has been no research which has closely examined the needs and experiences of these victims in accessing support to address the health or other impact. And finally, the scale and composition of fraud victimisation has changed dramatically in the last ten years, particularly since the emergence of volume online fraud. There is a need for new research that provides a granular assessment of the health impact on fraud victims in the modern-day context, and how this influences the demand for services. There are pockets of good practice (certainly in relation to the vulnerability agenda) but current systems lack an evidence base and resources and implementation is highly variable across different police force areas (Skidmore et al, 2018).

2   RATIONALE

Fraud is growing rapidly and is now the most common crime type in England and Wales. Alongside any financial impact, fraud can also impact victims more widely, however our understanding of the many ways that fraud can impact people is quite limited at the moment. This research hopes to allow us to better understand the experiences of people who have become victims of fraud, in order to better support them and prevent them from becoming victims again in the future. To do this, we want to talk to people who have experienced fraud, in order to find out their opinions about fraud, and how we can better support those who may become victims.

The purpose of the study is to look at how victims of fraud are currently supported by the police and other agencies. This will be used to identify any gaps in the current services that are provided, and to make recommendations for improving the current practices and procedures following the reporting of a fraud.

This is an exploratory study that seeks to fill the substantive gaps in the knowledge and evidence on the health impact of fraud, and also how police and partners agencies configure their systems to identify and support victims who experience an impact on their health.
The proposal is to undertake primary research, drawing from the knowledge and
systems within Surrey and Sussex police forces, and the perspectives and experiences of victims in these areas. These police forces have forged a partnership and lead the way in England and Wales, in terms of the assessment and provision of multi-disciplinary support to victims of fraud who are assessed to be high need. This research is exploratory and intended to lay the groundwork for future research and the development of policies and practices, including robust frameworks in the police and partner agencies for undertaking operational and strategic assessments of the health impact and delivering related interventions. This exploratory research will focus on Surrey and Sussex police force

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areas as two case. study sites. There are considerable gaps in the knowledge and support provided to victims of fraud, but these two police forces have led the way in the UK in recognising the impact and needs of fraud victims and delivering targeted interventions. We will draw from the data and knowledge available to these established multi-disciplinary partnerships, to develop evidence specifically on the health impact of fraud and its significance for the provision of services.

3   THEORETICAL FRAMEWORK

A mixed methods approach is proposed for this research. In the process of analysis, the different datasets will be synthesised to address the core research questions, including an examination of where data and outputs converge and diverge so to reach a clear and comprehensive understanding of key themes:

- Secondary analysis of the Crime Survey for England and Wales (CSEW) data to examine the national prevalence and patterns in victims who experience a health impact, including victims who do not report to the police.
- A survey of victims resident in Surrey and Sussex and who reported a fraud in a designated 3-4 month period, to understand the scale, nature and distribution of the health impact, the needs of victims and experience of accessing support in these areas.
- Semi-structured interviews to collect qualitative data on the experiences and perceptions of practitioners responsible for delivering support services.
- Semi-structured interviews, to collect qualitative data on the experiences, needs and expectations of victims in relation to health.
- Rapid review of the literature to establish the baseline of knowledge on the themes in the research questions. These will inform the development of the research methodologies and tools.

This is mixed methods research that will incorporate qualitative interview data and quantitative survey data. Our approach will be similar to a 'triangulation design', whereby the aim is to '*gather complimentary yet distinctly different data on the same topic which can then be integrated for analysis and interpretation*'[1]. For example, the impact on victims' health and how this translates as demand for public services will be explored to develop understanding in the different contexts, including the macro-organisational context represented by the survey data, the experiences and perceptions of practitioners / sectors working across different functions and sector, and the experiences and perceptions of victims themselves.

The process of synthesising the data will vary depending on the specific research question being addressed (listed above), with some datasets offering a more secondary, supportive role when addressing certain themes. To illustrate:

- Quantitative analysis of the CSEW data will provide a national perspective on the patterns in fraud victims who reporting an impact on their health including those who do not report to the police. The research in the two police force areas will build on this baseline perspective, using focused methodologies to explore in more detail the nature of the health impact and the experiences and needs of these victims.

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[1] Almalki, S. (2016) Integrating Quantitative and Qualitative Data in Mixed Methods Research—Challenges and Benefits. Journal of Education and Learning; Vol. 5, No. 3. Canadian Center of Science and Education.

- Quantitative analysis of the victim survey data will analyse the frequency, distribution and nature of the health impact in the police forces, and the qualitative data collected in victim and practitioner interviews will be applied to help interpret the meaning of these outputs.

- Qualitative analysis of victim and practitioner interview data will take primacy when analysing the experience and pathways of victims, and quantitative data will be included to support this analysis (e.g. patterns in victims who access support).

This is exploratory research and where the findings from the different data sources either converge or diverge, this will be incorporated into our analysis to help develop our overall findings and conclusions.

4 RESEARCH QUESTION/AIM(S)

Research questions
The following research questions will be addressed by drawing from data in two police force case study sites:
- How frequently do fraud victims known to the police or other public services experience an impact on their health, and how is this distributed across victims or the different categories of fraud?
- What are the ways in which fraud impacts on the health of victims and what are the implications for their support needs and risks?
- What are the implications for the demand on public services, including the nature of the association with established frameworks such as 'vulnerability'?
- What assessments and techniques are used by police and support services to assess the impact on a victim's health, and where are the gaps?
- What are the pathways and experiences of victims who experience a health impact, in engaging with public services and receiving support?
- What infrastructure is in place to support fraud victims who experience an impact on their health, and where are the gaps?

4.1 Objectives

- To review the impact of fraud on the health of victims of crime, and to assess the availability and efficacy of current provisions to support the victims of different categories of fraud.

- To examine the pathways and experiences of victims who experience a health impact related to fraud victimisation, and to identify gaps in current provisions.
- To assess the implications for the demand on public services, including the nature of the association with established frameworks such as 'vulnerability'. To review the incorporation of health impact into current definitions of 'vulnerability'.
- To identify the current infrastructure in place to support fraud victims who experience an impact on their health, and to identify gaps in current provision.
- To make recommendations for the provision of support services that accounts for diverse offence and victim typologies.

4.2 Outcome

The research will be used to inform support and interventions to improve the health outcomes of those who experience fraud. The aim is for this research to support the development of follow-up work to

develop more robust frameworks for assessing the risk and needs of fraud victims who experience a health impact.

5   STUDY DESIGN and METHODS of DATA COLLECTION AND DATA ANALYSIS

Study Design

An exploratory, mixed methods approach will be taken to allow for the triangulation of data, resulting in a comprehensive review of key themes. Academic and professional literature will be reviewed to provide a grounding for subsequent secondary data analysis (victim survey) and the qualitative analysis of survey and semi-structured interviews. The combination of approaches will allow for both breadth (secondary analysis of large-scale survey data, novel survey data) and depth (semi-structured interviews) of data.

Methods of Data Collection

1.   <u>Rapid review of the literature</u>

The first phase of the study the study involves a scoping review of both the academic and grey literature to establish baseline knowledge on the themes in the research questions, supporting the refinement of the subsequent research methodologies and tools. This will be carried out by the Police Foundation.

This consisted of using pre-defined and optimized search queries to identify relevant articles. As the project aims to investigate multiple topics including fraud victim impact, fraud and vulnerability, fraud victim support, fraud support services and fraud victim strategies, the following two research queries were developed and piloted:

(fraud* OR scam* OR cybercrime)
AND
"health"
AND
impact*

(fraud* OR scam* OR cybercrime)
AND
"victim"
AND
("support" OR "assessment")

NOTE: "*" denotes a wildcard, such that for example "fraud*" would identify "fraudulent", "frauds" and "fraud".

This search strategy is used in the following academic databases: Web of Science, IEEE Xplore, ProQuest, ACM Digital Library, Scopus in addition to Policy Commons and targeted search on Google representing the grey literature databases.

After deploying the search strategy described above and collecting all the articles, abstracts were screened in order to determine their inclusion in the final analysis section. There is no restriction on the methodological design deployed in the articles nor the discipline the authors come from, however, for articles to be included the following criteria have to be satisfied:

- The studies must discuss the health impact fraud has on victims of fraud.
- Frauds targeting corporate entities and larger organisations were not considered, even though they may passively influence individuals.
- The article has to be published between January 2013 and January 2024. This was determined based on the literature activity in these years. Furthermore, with ten years' worth of literature included, we are able to capture the latest trends in the field.
- The article has to be available in English.
- Articles behind a paywall to which UCL and the Police Foundation does not have access will be excluded..

The literature review will be carried out by Ms Halkon and Ms Makuo of the Police Foundation.

2. Secondary analysis of survey data (Crime Survey for England and Wales, CSEW)

This analysis will be used to examine the national prevalence and patterns in victims who experience a health impact. The use of the CSEW allows for the inclusion of the experiences of victims who do not report to the police. This will be carried out by the Police Foundation.

3. Survey (victims of fraud)

A survey of victims who reported a fraud to the police (Sussex and Surrey area) within a 3-4 month period. This approach will allow for the detailed examination of the characteristics, experience and health impacts of those who do report. It will also allow for the assessment of the scale of the problem, and the accessibility and suitability of support services. The survey will be distributed by Victim Support/Surrey and Sussex Police but will be analysed by the Police Foundation

4. Semi-structured interviews (victims of fraud)

Collecting data on the perspectives of victims in relation to their experiences, needs and expectations in relation to the health impacts of fraud victimisation.

The findings of the analyses above will be synthesised to produce a comprehensive understanding of the health impact of fraud from the perspectives of a representative range of interested parties. These will be conducted by Professor Button from Portsmouth University and by Dr Skidmore and Ms Halkon from the Police Foundation.

5. Semi-structured interviews (practitioners)

Collecting data on the perspectives of practitioners in relation to the experiences, needs and expectations of victims in relation to the health impacts of fraud victimisation.

Data analysis

It is proposed to complete a cross-sectional analysis of anonymised fraud victim data obtained from the CSEW from a 12 month period. Key variables will include the socio-economic, demographic and other background factors for the victims, the key characteristics of the fraud offence, the victim's self-reported impact and their help-seeking and experience of support. The analyses will examine the scale, nature and distribution of health impact and test for associations between other key variables and the impact on health. Analysis will be completed using SPSS and R.

Statistical analyses will be conducted using R. R is a free resource that can accommodate large datasets and perform complex statistical analyses and modelling in addition to detailed data visualisation. Basic descriptives will be used to examine the frequency of reported health impact and the distribution of health impact across victims and different categories of victim and fraud. We may use for example correlations, regressions, multi-level models and/or structural equation modelling to explore the various relationships between victims' demographics, health impact, interventions and outcomes. See below diagram which gives an illustration:
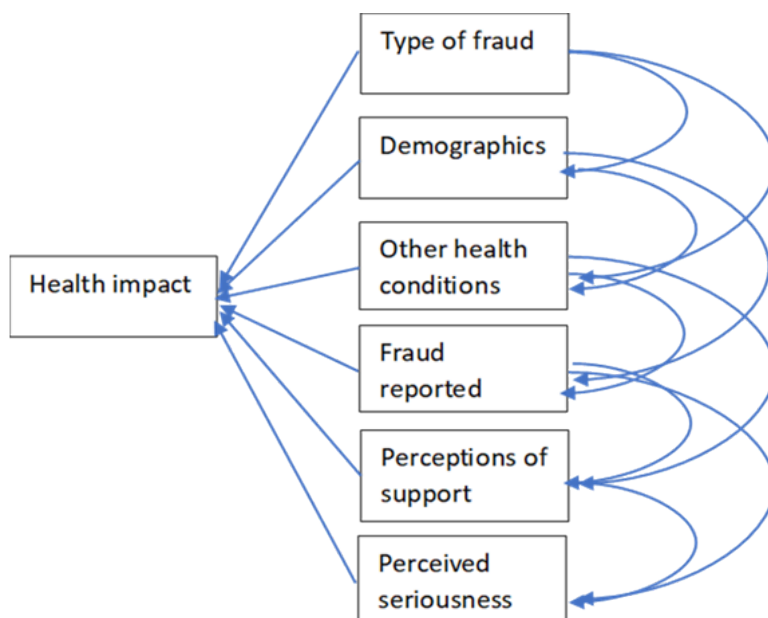
This analysis will be exploratory in nature, informed by other evidence collected in this research, and in this way, we will critically assess the robustness of the data, and examine the gaps and assumptions underlying existing systems and assessments. It will also draw from other evidence to examine the health impact through the framework of risk, acknowledging the underlying challenge for public services in identifying victims with support needs (most of whom will not have received a comprehensive in-person assessment) from the high volumes of fraud reported to the police. The above analysis will be used to test the

strength of key risk indicators for victims who experience an impact on their health.

Survey data:
The survey will consist of both closed and open-ended questions. These data will be analysed using content and thematic analysis. Data analysis will be supported using the software NVIVO. The thematic analysis will follow the guidelines of Braun and Clarke (2006).

Interview data:

Interview data will be analysed thematically using the approach and recommendations of Braun and Clarke (2006). This will be facilitated using NVIVO software. The researchers will conduct the research in accordance with the University of Portsmouth policies of Ethics application version 2.13 with guidance, January 2022 Ethics and guidelines (namely in accordance with The UK Research Integrity Office Code of Practice for Research), while paying particular attention to the British Society of Criminology's Code of Ethics, in order to conduct an ethical research study. The integrity of this research study, the researchers and the representation of the University of Portsmouth will be maintained by remaining respectful, honest, rigorous, transparent and open communication. This research study will respect all the participants involved in accordance with the University's Concordat to Support Research and Integrity.

Furthermore, the research team will work in close collaboration with the two police forces (Surrey and Sussex) and a formal agreement will be developed for sharing, processing, storage and retention of victim data, so to accord with legal standards. This will include formalised protocols and procedures for handling the data.

The research team will not access any personal details for the survey component of the research - the appointed gatekeeper (Victim Support) will distribute invitations to participate, and all survey responses will be anonymous.

Contact details required to facilitate the organisation of interviews and the withdrawal of consent will be stored securely on a secure system approved by the Police Foundation. No personal data for victims approached for interview will be stored on non-secure systems. The interviews will be recorded using either an encrypted digital audio recorder or Microsoft Teams, depending on the permissions / requirements of the individual. Audio recordings will be transcribed at the earliest possible time following interview. We will first use specialist transcription software, and a researcher will then manually check for edits, and if there are any personal identifiers these will be removed from the transcript. The interviews will not specifically ask participants to provide any information that could identify them. The audio file will then be deleted from both our IT system, Microsoft Teams and the transcription system.

Access to all anonymised datasets stored outside of police systems will be restricted to researchers undertaking analyses related to this NIHR project. They will be stored on a password protected file. The data will be retained for no longer than 2 years following the completion of this project.

All researchers engaged in fieldwork will receive security vetting by the police to ensure that individuals who are engaging with victims are appropriate, and the team will also complete any training designated by the police or partner services for engaging with victims or vulnerable members of the public.

The research data will be handled in accordance with the UoP (2017) Retention Policy, and managed in accordance with the Freedom of Information Act 2000, whereby research data will be retained for no

longer than necessary: it will be retained for up to 10 years for future research on the CI's UoP Google Drive and then destroyed. Data will be anonymised and participants will be provided with participant numbers. Consent forms will be digitised, and destroyed upon completion of the project.
No personal data will be collected for the survey portion of the research.

Participants interested in participating in the research will be provided with an email address to contact for more information. This will be provided by return to the participant email.

Email addresses and names of participants will be stored on a password protected file, in accordance with the Police Foundation and UoP guidelines, for the purpose of arranging the interview and to allow for withdrawal of consent for a designated 2-week period. This link document, which will allow interviews (tagged only with a participant number and no other identifiers) to be linked to the participant contact details will be destroyed after the 2 week period, creating anonymity for the interviews. Interviews will be transcribed and audio recordings deleted as soon as possible after completion.

The Police Foundation has a designated Data Controller and Data Protection Officer. And under the General Data Protection Regulations individuals retain the right to request access to any personal data they have recorded about them, and for it to be corrected or removed

CSEW data

Data collected as part of the Crime Survey for England and Wales will be provided by Dr Felicity O'Connell. All required vetting and training has been completed by the contact within The Police Foundation. Permission to provide the data has been obtained (see Appendix 7). Access to all anonymised datasets stored outside of police systems will be restricted to researchers undertaking analyses related to this NIHR project. They will be stored on a password protected file. The data will be retained for no longer than 2 years following the completion of this project.

6 STUDY SETTING

Research phase part 1 (survey) – participants will be provided with a link to an online survey that they will complete independently and online.

Victim (survey) – participants receiving active support from Victim Support Case workers will be provided with the link to the survey, in person, by their Case worker (during an approved support session) and, following informed consent processes, will complete the survey at the location of the support session.

- Research phase part 2 (victim interviews) – These will take place at locations approved by The Police Foundation and/or Victim Support.
- Research phase part 3 (practitioner interviews) – These will take place at locations approved by The Police Foundation or the practitioner's own workplace.

7 SAMPLE AND RECRUITMENT

7.1 Eligibility Criteria

Surveys will be distributed in response to all reports of fraud within the specified time frames and area. Estimated invites n= 1,000- 1,500

Estimated responses (based on a typical rate of 20%) = 200-300

These estimates are based on figures from Surrey and Sussex Police from 2022 show Surrey Police received 1520 referrals and Sussex Police received 2828 referrals to Operation Signature, the forces campaign to identify and support vulnerable victims of fraud, over a 12-month period.

Practitioner interviews:

Aim for n=20 interviews, with an intention to recruit 3 to 4 practitioners from each service invited to participate. Regular meetings and reviews will be undertaken within the research team to assess the initial analysis of data (familiarisation stage). Data collection will continue until agreement is reached by the research team regarding the reaching of data saturation.

Victim interviews:

Aim to recruit n=15 participants in this phase of the research, however as above, a flexible approach will be taken, with regular consultation meetings within the research team to ensure representation of participants from each of the police defined vulnerability categories, and self-reported health and related impacts. Data collection will be guided by agreement within the research team regarding data saturation.

The research participants from the public will be individuals who have experienced fraud victimisation. The interviews will be retrospective, collecting the views of those who have gone through the experience of fraud victimisation and subsequent police assessment and support. The data collection will involve a single semi-structured interview lasting approximately 60 minutes and with the individual's permission, will be recorded for transcription.

Public involvement in research is defined as research being carried out 'with' or 'by' members of the public rather than 'to', 'about' or 'for' them. To ensure the research is being carried out with victims rather than to them we will work closely with the victims on the steering committee to design the victim survey. We will test out the victim survey in initial scoping interviews with the help of a small group of (3-4) victims and then seek feedback and make any amendments. Involving victims in the survey design and seeking feedback after these initial scoping interviews will help ensure the survey questions are sensitive, comprehensive, comprehensible and capture the relevant information while reducing risk of re-traumatisation.

The criteria for selecting prospective volunteers will need to be agreed with the police and victim services in the local police force areas. We will be reliant on individuals volunteering following our initial contact, so in this way, will not be able to represent all victim perspectives and experiences through the qualitative interviews. However, the local victim survey will enable us to receive data from a wider range of victims who may have not necessarily experienced an acute impact from fraud, and specifically, those who do not meet local protocols and thus have not met the criteria for inclusion into the service for vulnerable victims, but who nevertheless will receive some police contact on reporting the crime regardless of the seriousness or impact of the offence.

A key part of the victim interviews is understanding their experience of accessing and receiving support to address their needs, specifically in relation to the impact on their health. This is qualitative data to build an evidence base on the health impact experienced by fraud victims, and how this interacts with their expectations and experiences of public services and support. In this regard it is not intended to represent all fraud victims, but rather provide a valuable snapshot from a relevant cohort of fraud victims that have accessed specialist support services. The aim will be to collect a more wide-ranging perspective on the health impact experience across victims from the CSEW data, the local survey data and interviews with practitioners.

7.1.1   Inclusion criteria

CSEW

- Fraud victim data collected over a specified period of 12 months by the ONS

Survey (victim)

- Victims of fraud within the specified time scales, who reported a crime to Sussex and Surrey Police
- Over 18 years of age
- Response received from the police following the reporting of the offence

Practitioner Interviews

- Practitioners working in the specialist police referral unit for assessing and delivering support to 'vulnerable' victims of fraud
- Support workers in the local Victims Support
- Local authority - Social services, Trading Standards
- Health service providers
- Local support providers in the third sector (e.g. Age UK, Citizens Advice)
- Senior practitioners in the National Economic Crime Victim Care Unit, Victim Support and victim advocate organisations in the support or health sector.

Victim Interviews

- Survey respondents who reported a health impact
- Over 18 years of age
- Volunteered to participate in the interview component

7.1.2 Exclusion criteria

CSEW

- Any data not related to the experience of Fraud
- Any data not falling within the specified time scales

Survey (victim)

- Victims of crime other than fraud
- Under 18 years
- Not resident within the selected geographic area
- Crimes reported outside the specified time frame

Practitioners

- Employed in a role or with a service out of the scope of the research
- No experience of supporting or working with victims of fraud

<u>Victims</u>

- Victims of crime other than fraud
- Under 18 years
- Not resident within the selected geographic area
- Crimes reported outside the specified time frame

Unwilling to participate in follow up interview

7.2   Sampling

7.2.1   Size of sample

Victim Surveys

- Surveys will be distributed in response to all reports of fraud within the specified time frames and area. Estimated invites n= 1,000- 1,500
- Estimated responses (based on a typical rate of 20%) = 200-300
- These estimates are based on figures from Surrey and Sussex Police from 2022 show Surrey Police received 1520 referrals and Sussex Police received 2828 referrals to Operation Signature, the forces campaign to identify and support vulnerable victims of fraud, over a 12-month period.

Practitioner interviews:

- Aim for n=20 interviews, with an intention to recruit 3 to 4 practitioners from each service invited to participate. Regular meetings and reviews will be undertaken within the research team to assess the initial analysis of data (familiarisation stage). Data collection will continue until agreement is reached by the research team regarding the reaching of data saturation.

Victim interviews:

- Aim to recruit n=15 participants in this phase of the research, however as above, a flexible approach will be taken, with regular consultation meetings within the research team to ensure representation of participants from each of the police defined vulnerability categories, and self-reported health and related impacts. Data collection will be guided by agreement within the research team regarding data saturation

7.2.2   Sampling technique

The survey sample will include:
- Fraud victims who reported to the police (commonly through Action Fraud) and are resident in Surrey and Sussex police force areas.
- Victims who reported a fraud within a stipulated time-period (to be determined)
- Victims who reported and recently received some form of response from the police – i.e. victims who can answer retrospectively on their experiences - the timeframe may vary slightly depending on the type of response assigned by the police.

The practicalities in administering the survey will be determined by the protocols for assessing and delivering support in Surrey and Sussex police force areas. Fraud victims are broadly split into the

following classification groups. As far as possible, the survey will be dovetailed with the established police systems for communicating with victims:

- High vulnerability
    - A relatively small cohort of victims who receive intensive support from Victim Support case workers.
    - The survey could be administered and completed in person by case workers who are supporting victims.

- No vulnerability
    - A large cohort of victims who receive a remote response by email or letter, giving advice and signposting other support.
    - A link to the survey could be shared along with the feedback survey Surrey and Sussex police send to all these victims.

- Low and medium vulnerability
    - A cohort of victims who are classified as vulnerable during a preliminary assessment by the police. These receive a visit from a member of police staff – some will be assessed as high vulnerability, but for most, no further support is provided.
    - For all victims for whom contact details are available, a bespoke email / letter drafted by the research team, which provides a link to the survey.

All victims who report a health impact will be invited to give an interview. This approach opens up the potential to interview victims from across the range of vulnerability (as it is assessed by police), including those who receive no service through to those who receive intensive support from a case worker.

Semi-structured interviews within the local police forces (n=20) and national stakeholders (n=5) –
The interviews with practitioners in the two local police forces will be focused to get the perspectives of specialist providers of support services in the police and partner organisations (and other relevant stakeholders). These include practitioners working in a specialist fraud victim referral unit commissioned by the police forces, and also more general service providers that play a role in supporting fraud victims (e.g. adult social services). The list of interviewees will be agreed during initial scoping and consultation with local police but will likely include:

- Practitioners working in the specialist police referral unit for assessing and delivering support to 'vulnerable' victims of fraud
- Support workers in the local Victims Support
- Local authority - Social services, Trading Standards
- Health service providers
- Local support providers in the third sector (e.g. Age UK, Citizens Advice)

The interviews with national stakeholders will focus on specialist services that deliver support to fraud victims. The questions will be the same or similar to those in the local practitioner interview template. These interviews will be done at an early stage to feed into the development of the methodology in the two local police forces. Their answers will provide a national perspective that will contextualise the findings and guide the methodologies developed for use in the two police force areas. Key national stakeholders will most likely include senior practitioners in the National Economic Crime Victim Care Unit, Victim Support and victim advocate organisations in the support or health sector.

Semi-structured interviews with fraud victims who have received specialist support services (n=15) – this will produce qualitative data to address the following themes:

The sampling frame will be all fraud victims who report a health impact in the survey and volunteer to participate in an interview. It is possible that victims who are assessed with 'high vulnerability' by police will be over-represented. The vulnerability protocols incorporate individuals who have experienced the most acute impact and / or present the most acute risks. For example, victims who report a romance fraud are one particular focus, based on the existing knowledge and evidence of the considerable emotional impact that fraud has on these victims and the risk of re-victimisation. As far as possible, we will aim to capture victims from across the different vulnerability categories.

A high proportion of fraud victims do not report to the police, these hidden victims will be captured through the CSEW data, but not through the victim survey or the semi-structured interviews. We will also give some consideration to this in our methodological approach in the two police force areas, by interviewing practitioners from non-police agencies that work with non-reporting fraud victims, including Trading Standards and Citizens Advice. Systematic arrangements for recruiting from these organisations is beyond the scope of this exploratory study, however we will incorporate interviews with non-reporting victims should the opportunity arise. In addition, we will publicise the research through Police Foundation and University of Portsmouth social media channels, inviting members of the public who have experienced these issues to come forward for interview. The interviews will be conducted using the same process as that outlined for the practitioner interviews - audio recorded with the participants' permission the recordings transcribed and then processed using specialist analytical software (NVivo). We will initially use a thematic analysis framework for configuring and synthesising the data to address the key research questions. And we will also use this data to identify additional themes that arise during the process of analysis.

7.3   Recruitment

CSEW data – a cross-sectional analysis of fraud victim data collected over a period of 12 months by the Office of National Statistics. The Crime Survey for England and Wales (CSEW) estimates continue to provide important information in relation to longer-term trends in crime from the year ending December 1981 to the year ending June 2023. The face-to-face CSEW was suspended on 17 March 2020 because of the coronavirus (COVID-19) pandemic. A telephone-operated Crime Survey for England and Wales (TCSEW) was designed to continue measuring crime while the face-to-face CSEW was suspended. TCSEW data collection took place between 20 May 2020 and 31 March 2022. Face-to-face CSEW interviewing for people aged 16 years and over resumed on 4 October 2021. Crime estimates for the year ending June 2023 are produced from data collected between July 2022 to June 2023 and are based on 30,667 interviews. Data collected during this period include experiences of crime in the 12 months before the interview month, and therefore include crimes committed as early as July 2021. Similarly, the year ending June 2022 (13,752 interviews from nine months of data collection) will include crimes committed during the coronavirus (COVID-19) pandemic and as early as October 2020.

<u>Victim Survey</u>

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Survey phase part 1 (victims categorised as no/low/medium vulnerability according to current police practices) – participants will be provided with a link to an online survey that they will complete independently and online. These links will be forwarded via email or text. Contact details for those invited will be held by external organisations (e.g. Victim Support) who will act as gatekeepers for distributing links to the survey.

Survey phase part 1a – participants receiving active support from Victim Support Case workers will be provided with the link to the survey, in person, by their Case worker (during an approved support session) and, following informed consent processes, will complete the survey at the location of the support session.

<u>Victim interviews</u>

Participants who complete the survey above will be provided with contact details for the research team. Participants will be required to contact the research team to maintain anonymity of the survey above. If they are interested in taking part in an interview, they will be provided with information sheets and consent forms by the research team (via email), and a suitable time/location for the interview will be arranged.

In selecting prospective volunteers from the public, we will look to invite all who reported a fraud within a fixed time-period. Recruitment will entail an initial contact made by the police on our behalf. As part of this initial contact, we will provide a plain English summary of the research, along with our contact details for any who would prefer to have an initial discussion before deciding to participate. At the point of each interview the interviewer will provide a description of the project, the themes of the questions that will be asked, how the data will be treated and all follow-up arrangements, including updates and process of withdrawal should they choose to do so subsequently. The interviewee will be asked to sign a form to say that they have understood and consent to participate.

All interviewees will be provided an email or a hard copy of a document that outlines this information. The interviews will be focused primarily on the impact on their health, their perceived needs at the time, and their experience of accessing services, so will not be focused on their experience of falling victim to fraud.
It is not anticipated that the interview will be upsetting to most interviewees but it
remains a risk. If this is observable to the interviewer, they will suggest to the volunteer that the interview be terminated. All volunteers will be provided with contact details for local support services in the event that an individual feels they wish to seek some additional
support following the interview. Furthermore, once the interview is completed, follow-up contact will be made with all interviewees to check if there are any support needs, and to
signpost the individual to the relevant service. This follow-up contact will be made within two weeks after the interview. This process will be developed in consultation with local victim services under the arrangements with the local police forces.
In the recruitment of victims for interview we will adopt flexible engagement strategies to
ensure inclusivity and that everyone invited has an equal opportunity to participate. Key
factors to consider based on research and our own experiences of research in the area: the
prominence of elderly victims and victims with mental or physical health disabilities
(particularly among those assessed as vulnerable), victims who are dissatisfied with the
support they received, and victims who are distrustful and wary of unsolicited contact (due to
the method by which they were victimised). To address these and more general barriers to
inclusivity:
- We will make the initial approach through the police or related service so the individual can be confident that the approach is legitimate;

- We will provide plain English summaries to ensure all invited to participate can make an informed choice, and we will offer to have a follow-up conversation over the phone or video call to clarify or provide more information;
- We will clearly communicate in the initial approach to prospective participants the independence of the Police Foundation from the police and wider public sector and the aims and outcomes of the research;
- We will offer to complete the interviews in whichever format best suits the individual – face-to-face, phone or video-call – to ensure that geography, mobility and variable access to technology do not present as barriers to involvement;
- We will offer a choice of a male or female interviewer from the research team.

Practitioner interviews

Organisational consent has been gained from the Police and Crime Commissioner and lead officer for fraud victim support in Surrey police force (see Appendix 1). A gatekeeper will be appointed to distribute email invitations to potential participants. The gatekeeper will identify potential participants according to role held in organisation and experience of working with victims of fraud.

The same process for gaining informed consent that is described above, will also be applied in all interviews with practitioners. All victim and practitioner interviewees will be presented with a choice on the process and venue for the interview, including a face-to-face meeting, a meeting on Microsoft Teams or to speak on the phone.

7.3.1 Sample identification

Sampling
Police force case study sites
The focus on Surrey and Sussex police force areas provides an opportunity for in-depth analyses of victims who experience a health impact that is neither identified nor addressed in many other police force areas. The research seeks to capitalise on the data, knowledge and expertise that has been accrued from delivering support to vulnerable victims, whilst also capturing a wider perspective of the impact on health by analysing police data and conducting interviews with a wider range of practitioners who support victims of fraud.

Fraud is commonly a borderless crime and victimisation driven by national or global offending and other factors, and so the experiences of victimisation in these two police forces is likely to be reflected in other parts of the UK. However, other drivers of fraud victimisation and impact include socio-economic status and demographic factors such as age, so the profile of fraud impacting in a specific geographic location will be in part a product of the demographic composition in the area. These caveats will be addressed as part of the analysis and interpretation of the administrative data recorded by these two police forces and their partners organisations.

The focus on victims who come into contact with the police introduces a selection bias, because there are a high proportion of fraud victims who do not report to the police. It has been suggested by police practitioners that those who are most impacted by fraud, count among those most likely to report to the police – noting that official statistics show there are many frauds that appear to have a limited

impact on the victim[2]. However, it is also known that there are a cohort of non-reporting victims who count among the most highly impacted and vulnerable. In some cases, they do not acknowledge they are a victim of crime. Analysis of the CSEW provides one way for the study to examine these gaps. Furthermore, the research will incorporate interviews with practitioners from the wider local support services, some of which will support victims who have not reported to the police (for example, third sector advisory services).

Victim interviews
The research participants from the public will be individuals who have experienced fraud victimisation. The interviews will be retrospective,
collecting the views of those who have gone through the experience of fraud victimisation and subsequent police assessment and support. The data
collection will involve a single semi-structured interview lasting approximately 60 minutes and with the individual's permission, will be recorded for transcription.

Public involvement in research is defined as research being carried out 'with' or 'by' members of the public rather than 'to', 'about' or 'for' them. To ensure the research is being carried out with victims rather than to them we will work closely with the victims on the steering committee to design the victim survey. We will test out the victim survey in initial scoping interviews with the help of a small group of (3-4) victims and then seek feedback and make any amendments. Involving victims in the survey design and seeking feedback after these initial scoping interviews will help ensure the survey questions are sensitive, comprehensive, comprehensible and capture the relevant information while reducing risk of re-traumatisation.

The criteria for selecting prospective volunteers will need to be agreed with the police and victim services in the local police force areas. We will be reliant on individuals volunteering following our initial contact, so in this way, will not be able to represent all victim perspectives and experiences through the qualitative interviews. However, the local victim survey will enable us to receive data from a wider range of victims who may have not necessarily experienced an acute impact from fraud, and specifically, those who do not meet local protocols and thus have not met the criteria for inclusion into the service for vulnerable victims, but who nevertheless will receive some police contact on reporting the crime regardless of the seriousness or impact of the offence.

A key part of the victim interviews is understanding their experience of accessing and receiving support to address their needs, specifically in relation to the impact on their health. This is qualitative data to build an evidence base on the health impact experienced by fraud victims, and how this interacts with their expectations and experiences of public services and support. In this regard it is not intended to represent all fraud victims, but rather provide a valuable snapshot from a relevant cohort of fraud victims that have accessed specialist support services. The aim will be to collect a more wide-ranging perspective on the health impact experience across victims from the CSEW data, the local survey data and interviews with practitioners.
The proposed methodology aims to include all who reported a fraud within a fixed time period in two police forces which operate to local policies and protocols. Representation is therefore intrinsically constrained to the demographic composition of victims in the local
areas. The analyses of CSEW will examine the profile of all victim cases and as part of the analyses (in conjunction with qualitative data from practitioners) will explore any misrepresentation or inequalities in the established systems and assessments.

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[2] https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/datasets/natureofcrimefraudandcomputermisuse

7.3.2 Consent

<u>Survey</u>

Full information about the purpose of the research, ethical considerations, and data protection will be provided in the first page of the survey (See Appendix 2). Participants will be required to indicate that they have read and consent to participate before they can access the survey.

Participants will be informed that they can withdraw their consent at any time by navigating away from the web page. Any information provided up to this point will be deleted and not included in analysis.

<u>Practitioner Interviews</u>

The appointed gatekeeper will provide potential participants with an information sheet outlining the details of the research, ethical considerations, and data protection (see appendix 3). They will be required to complete a consent form prior to taking part in the interview (see appendix 4). Consent will be reconfirmed orally immediately prior to commencing the interviews.

Practitioners will be thanked for their time following the interviews.

<u>Victim Interviews</u>

Potential participants will be required to contact the researchers via the details provided in the survey (email). They will then be provided with an information sheet outlining the details of the research, ethical considerations, and data protection (see appendix 5). They will be required to complete a consent form prior to taking part in the interview (see appendix 6). Consent will be reconfirmed orally immediately prior to commencing the interviews.

Participants will be informed that they can withdraw their participation at any time during, and up to 2 weeks after the completion of the interview. During the interview, they can choose to stop the interview and leave, and any data collected up to this point will be deleted. After the interview, they can contact the researchers and request their data be removed and deleted. This will be facilitated using a link document, which will allow interviews (tagged only with a participant number and no other identifiers) to be linked to the participant contact details. At the end of the 2 week period, the linking document will be destroyed, creating anonymity for the interviews.

At the end of the survey, links to relevant support services will be provided. All participants (victim components) will have access to this as all will complete the survey. Participants who take part in the interview will be reminded of these contact details at the end of the interview.

8   ETHICAL AND REGULATORY CONSIDERATIONS

Research involving human participants is reviewed by an ethics committee to ensure that the dignity and well-being of participants is respected. This study will be reviewed by the University of Portsmouth

Humanities and Social Sciences Faculty Ethics Committee and will not proceed before being given favourable ethical opinion.

The researchers will conduct the research in accordance with the University of Portsmouth policies of Ethics application version 2.13 with guidance, January 2023 Ethics and guidelines (namely in accordance with The UK Research Integrity Office Code of Practice for Research), while paying particular attention to the British Society of Criminology's Code of Ethics, in order to conduct an ethical research study. The integrity of this research study, the researchers and the representation of the University of Portsmouth will be maintained by remaining respectful, honest, rigorous, transparent and open communication. This research study will respect all the participants involved in accordance with the University's Concordat to Support Research and Integrity.

Interviews will take place in locations managed by the Police, the Police Foundation or in locations currently used by Victim Support Case workers. These will be covered by existing organisational risk assessments, and these will be reviewed by the research team prior to undertaking any interviews. Where necessary, additional risk assessments will be undertaken by the research team.

Given the nature of the research, there is a risk that participants may experience distress. All participants will already have been classified (according to established Police systems) according to vulnerability. Those considered to be 'No vulnerability' and 'Low and medium vulnerability' will complete the survey independently, but will be reminded of the contact details for the support services available to them in the survey debrief.

Those classified as 'high vulnerability' will complete the survey in the presence of their case worker, who will be able to provide immediate support should any of the components cause distress to the participant.

Full contact details will be provided for relevant support services in the debrief of each component of the research.

All research sites will be covered by existing risk assessment reviews, and/or ongoing risk assessments will be undertaken by the research team as necessary. No reputational risks are anticipated to arise from the research. All ethical and data protection guidelines promoted by the UoP will be adhered to at all times.

8.1   Assessment and management of risk

The anticipated ethical issues associated with this project are outlined below:

Victim components:

Autonomy:

Participants will be invited to complete an anonymous survey through an email or text message invitation. A link to the survey will be provided in this communication. Contact details for those invited will be held by external organisations (e.g. Victim Support) who will act as gatekeepers for distributing

links to the survey. Personal identifiers will not be collected as part of the survey, therefore participation will be anonymous.

There will be a subset of participants (those receiving intensive support from Victim Support case workers) who will be provided with the link to the survey in person, by their case worker, and who will complete the survey in the presence of their case worker. As above, once submitted the survey will be anonymous.

At the end of the survey, participants who identified that they experienced health impacts as a result of their victimisation will be invited to take part in a further interview. They will be provided with an email address to contact the researchers who will arrange a suitable time/location for the interview. No personal identifiers or contact details for participants will be requested on the survey.

Consent:

The anonymous survey will outline the aims of the research, what will be involved for the participant if they choose to participate, data collection and retention procedures and what participant data will be used for. Participants will be required to opt in via a forced choice consent question (tick box to indicate consent). Participants will only be able to access the survey if they indicate their consent.

Interview component – those who express an interest in participating in the research component will be contacted by the research team. They will be provided with a letter outlining the purpose and nature of the research, what will be involved in participation, and how their data will be managed. They will be invited to take part in a face-to-face interview at an agreed location, and asked to return the signed informed consent form prior to the interview. Consent will be orally re-confirmed at the time of interview.

Anonymity:

No personal information will be collected using the online survey, which will be hosted using JISC online surveys.

Participants who participate in the interview component will be assigned a numerical identifier. No personal data will be stored with the research data. A link document will be created to allow for the data to be identified for the purpose of withdrawal, after the designated time (as communicated to participants) the linking document will be destroyed to anonymise the data.

Interviews will be audio recorded, these will be transcribed after completion and only numerical identifiers will be used on both raw and processed data.

Withdrawal:

Participants will be informed of their right to withdraw at any time from the research, without having to give a reason, and with no consequences. Survey participants can achieve this by closing the survey web-page. Participants will be informed that if they choose to withdraw during completion of the survey any information provided before the final submission will be deleted and not included in analysis. They will be informed that once the survey has been submitted it will not be possible to withdraw as the survey is anonymous.

Interview component – participants will be informed that they can withdraw participation at any point during the interview, and up to 2 weeks after data collection. This will be facilitated using a linking document.

Non-Maleficence:

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Participants in the research will be advised as to the nature and purpose of the research. Due to the topics covered, there is a possibility that the participant may experience discomfort or distress as a result of discussing their experiences. Links and contact details for appropriate support services will be provided. Contact with participants will be facilitated by Victim Support Case Workers, as such participants will already have contact with appropriate sources of support.

Beneficence:

No incentive will be offered for the survey portion of the research. Participants agreeing to participate in interviews will be informed that they will be renumerated for their time, and will be provided with a payment of £50 at the time of the interview. Participants will be provided information about the funding streams associated with the research.

Practitioner components

Autonomy:

Practitioners from relevant organisations will be contacted by approved gatekeepers within their organisation and invited to take part in an interview. They will be provided with contact details for the research team. Those that respond will be contacted to arrange a suitable time and location for the interview to take place.

Consent:

Participants will be provided with a letter outlining the purpose and nature of the research, what will be involved in participation, and how their data will be managed. They will be invited to take part in a face-to-face interview at an agreed location, and asked to return the signed informed consent form prior to the interview. Consent will be orally re-confirmed at the time of interview.

Anonymity:

Participants who participate in the interview component will be assigned a numerical identifier. No personal data will be stored with the research data. A link document will be created to allow for the data to be identified for the purpose of withdrawal, after the designated time (as communicated to participants) the linking document will be destroyed to anonymise the data.

Interviews will be audio recorded, these will be transcribed after completion and only numerical identifiers will be used on both raw and processed data.

Withdrawal:

Participants will be informed of their right to withdraw at any time from the research, without having to give a reason, and with no consequences. They will be informed that they can withdraw participation at any point during the interview, and up to 2 weeks after data collection. This will be facilitated using a linking document.

Non-Maleficence:

Participants in the research will be advised as to the nature and purpose of the research. Practitioner participants are not anticipated to be at risk of experiencing harm as a result of taking part in the research, and will have access to organisational support as part of their role in employment

Beneficence:

With approval of the participant's employer, interviews will take part during the participant's working hours and as such no financial reward will be offered for participation in the research.

8.2   Research Ethics Committee (REC) and other Regulatory review & reports

Before the start of the study, a favourable opinion will be sought from Portsmouth University's University Ethics Committee (UEC), for the study protocol, informed consent forms and other relevant documents e.g. advertisements.

The UEC is responsible for ensuring that appropriate consideration is given to ethical issues relating to the main activities of the University, including Research, Teaching and Innovation.
The University has adopted the UK Research Integrity Office (UKRIO) Code of Practice for research as its own, and it publishes an annual statement [PDF] outlining its compliance with the Universities UK Concordat to Support Research Integrity.

Regulatory Review & Compliance

Before any participants or victims can be enrolled into the study, the Chief Investigator/Principal Investigator or designee will ensure that appropriate approvals from participating organisations are in place. These have

For any amendment to the study, the Chief Investigator or designee, in agreement with the sponsor will submit information to the appropriate body in order for them to issue approval for the amendment. The Chief Investigator or designee will work with the study delivery team so they can put the necessary arrangements in place to implement the amendment to confirm their support for the study as amended.

Amendments

Amendments will be handled in line with the sponsors and site management organisations polices. The Ethics Committee and the funders will be notified of substantial amendments to the protocol or the terms of the final application, and to seek a favourable opinion before implementing the amendment

8.3   Peer review

The National Institute Health Research (NIHR) have reviewed this study protocol. Further peer review has been carried out by two independent researchers who are external to the investigators' host institution and not involved in the study in any way

8.4   Patient & Public Involvement

Public involvement in research is defined as research being carried out 'with' or 'by' members of the public rather than 'to', 'about' or 'for' them. To ensure the research is being carried out with victims rather than to them we will work closely with the victims on the steering committee to design the victim survey. We will test out the victim survey in initial scoping interviews with the help of a small group of (3-4) victims and then seek feedback and make any amendments. Involving victims in the survey design and seeking feedback after these initial scoping interviews will help ensure the survey

questions are sensitive, comprehensive, comprehensible and capture the relevant information while reducing risk of re-traumatisation.

All practitioners and members of the public will go on to a mailing list (two separate lists), unless they elect not to be included, and they will receive notification and links to the relevant publications or other outputs.

A plain English summary of the final report will be created and will be shared with study participants with directions on how to access the full report should they wish. An invitation to the report launch will also be provided as appropriate.

8.5   Protocol compliance

The researchers will conduct the research in accordance with the UK Research Integrity Office Code of Practice for Research), while paying particular attention to the British Society of Criminology's Code of Ethics, in order to conduct an ethical research study. The integrity of this research study and the researchers will be maintained by remaining respectful, honest, rigorous, transparent and open communication. This research study will respect all the participants involved. Accidental protocol deviations can happen at any time. They must be adequately documented on the relevant forms and reported to the Chief Investigator and Sponsor immediately. Deviations from the protocol which are found to frequently recur are not acceptable, will require immediate action and could potentially be classified as a serious breach.

8.6   Data protection and patient confidentiality

The research data will be handled in accordance with the UoP (2017) Retention Policy, and managed in accordance with the Freedom of Information Act 2000, whereby research data will be retained for no longer than necessary: it will be retained for up to 10 years for future research on the CI's UoP Google Drive and then destroyed. Data will be anonymised and participants will be provided with participant numbers. Consent forms will be digitised, and destroyed upon completion of the project.

The Police Foundation has a designated Data Controller and Data Protection Officer. And under the General Data Protection Regulations individuals retain the right to request access to any personal data they have recorded about them, and for it to be corrected or removed.

No personal data will be collected for the survey portion of the research.

Participants interested in participating in the research will be provided with an email address to contact for more information. This will be provided by return to the participant email.

Email addresses and names of participants will be stored on a password protected file, in accordance with the Police Foundation and UoP guidelines, for the purpose of arranging the interview and to allow for withdrawal of consent for a designated 2-week period. This link document, which will allow interviews (tagged only with a participant number and no other identifiers) to be linked to the participant contact details will be destroyed after the 2 week period, creating anonymity for the interviews. Interviews will be transcribed and audio recordings deleted as soon as possible after completion.

CSEW data

Data collected as part of the Crime Survey for England and Wales will be provided by XXXX. All required vetting and training has been completed by the contact within XXXX organisation. Permission to provide the data has been obtained (see Appendix 7). Access to all anonymised datasets stored outside of police systems will be restricted to researchers undertaking analyses related to this NIHR project. They will be stored on a password protected file. The data will be retained for no longer than 2 years following the completion of this project.

8.7 Indemnity

The research will fall within the standard University of Portsmouth Insurance cover.
Liability to research participants in most research studies is covered under the University's Public Liability insurance.

- ▪ Legal Liability for breach of professional duty by reason of any negligent act or accidental error or omission is covered under the University's Professional Indemnity Insurance.

Updated certificates can be found on the University's insurance webpage:

https://www.port.ac.uk/about-us/structure-and-governance/legal/insurance

8.8 Access to the final study dataset

The research data will be handled in accordance with the UoP (2017) Retention Policy, and managed in accordance with the Freedom of Information Act 2000, whereby research data will be retained for no longer than necessary on the CI's UoP Google Drive and then destroyed. Data will be anonymised and participants will be provided with participant numbers. Consent forms will be digitised, and destroyed upon completion of the project.

The Police Foundation has a designated Data Controller and Data Protection Officer. And under the General Data Protection Regulations individuals retain the right to request access to any personal data they have recorded about them, and for it to be corrected or removed.

Access to all anonymised datasets stored outside of police systems will be restricted to researchers undertaking analyses related to this NIHR project. They will be stored on a password protected file. The data will be retained for no longer than 2 years following the completion of this project.

All researchers engaged in fieldwork will receive security vetting by the police to ensure that individuals who are engaging with victims are appropriate, and the team will also complete any training designated by the police or partner services for engaging with victims or vulnerable members of the public.

9 DISSEMINIATION POLICY

9.1 Dissemination policy

On completion of the study, the data will be analysed and tabulated and a Final Study Report prepared. We will produce multiple outputs, including those routinely included in the dissemination strategies of the Police Foundation for communicating findings to policymakers and practitioners in key stakeholder organisations. We will also produce outputs to communicate findings to a wider academic audience.

This research has been funded by the NIHR and the NIHR's role will be acknowledged in any outputs from the funded research. The NIHR requirements that those it funds track and measure outputs, outcomes and impacts during the funding award and afterwards. This information will be reported through Researchfish , an online data collection platform used by over a hundred funders. The information enables the NIHR to
  • demonstrate the difference that the research project has made
  • make the case for continued applied health research funding
  • evaluate the most effective ways to allocate it.
 The approved protocol which will be published on the NIHR funding and awards website.

The data, when made anonymous, may be presented to others at academic conferences, or published as a project report, academic dissertation or in academic journals or book. It could also be made available to any commissioner or funder of the research. The raw data will be retained for a minimum of 10 years. When it is no longer required, the data will be disposed of securely (*e.g.* electronic media and paper records / images) destroyed.

The outputs will include:

  ● A Police Foundation report – this will be a comprehensive report of the research, key findings and policy implications. The report will be published on The Police Foundation website and free for anyone to access.
  ● A plain English summary of the research will be created and will be shared with study participants with directions on how to access the full report should they wish. An invitation to the report launch will also be provided as appropriate.
  ● A media and publicity campaign to highlight the research – on the day the report is published we will host a launch event to be attended by key national and local stakeholders from across public services, including the police, welfare and health services in the public and third sector. There will be a press release to media outlets. The report will also be promoted through our social media channels and will be accompanied by a Police Foundation blog which will summarise the key findings.
  ● Conference events – the team will attend at least three practitioner / academic conference events to present the work.
  ● Academic paper – the team will produce an academic journal article which will be focused on the considerations of the findings in the context of existing theory in the areas of victimology and public services.

This is exploratory research to fill substantive gaps on the health impact of fraud. The aim is for this research to support the development of follow-up work to develop more robust frameworks for assessing the risk and needs of fraud victims who experience a health impact.

Engaging the key stakeholder organisations will be critical for achieving impact, noting the substantive gaps across public services in England and Wales for targeting support services for victims of fraud.

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The Police Foundation, as part of daily business, continuously engages with senior stakeholders in law enforcement and the Home Office and can use these connections for channelling research findings to the appropriate personnel and teams.

There are a wider range of other organisations who we would need to engage with this research, including representatives for local government adult social services, Victim Support, health services for delivering therapeutic support, and advocate organisations in the third sector (e.g. Age UK, Money and Pensions Advice). At an early stage we will develop a page on our website which outlines the topic and aims of the research which we will disseminate to key stakeholders in relevant organisation. We will produce a comprehensive chart of all relevant stakeholder organisations and where we have established contacts we will use them, or else we will seek new contacts to reach out to the organisations. The steering committee will also provide a key vehicle for engaging key stakeholder organisations from an early stage.

At the stage of dissemination, the Police Foundation has considerable experience of communicating and running events to publicise and communicate findings to audiences of policymakers and practitioners. The Police Foundation is a research organisation that is continuously advocating for improved services across policing and their partner agencies. With strong connections in the police and the Home Office we have the potential to be particularly impactful in shaping conversations and thinking in these organisations. As the primary first responder, police engagement is vital, as a service that is currently under considerable strain to resource a robust response to fraud victims, but also as a gateway to key partner organisations with a current or prospective role in supporting victims of fraud. The Police Foundation have been involved in research on fraud for several years and given the continued challenges, will likely continue to produce research in this area. In this way, once completed, this research will be continuously referenced to inform and support our work going forward.

9.2   Authorship eligibility guidelines and any intended use of professional writers

The ICMJE recommends that authorship be based on the following 4 criteria:

- Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
- Drafting the work or reviewing it critically for important intellectual content; AND
- Final approval of the version to be published; AND
- Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Following this criteria, authorship will be jointly held by:

Dr Skidmore, Ms Halkon, who will be responsible for acquisition, analysis, or interpretation of data for the work and Drafting the work and final approval of the version to be published; and agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. Professor Button and Dr Meenaghan who will be responsible for substantial contributions to the conception or design of the work reviewing it critically for important intellectual content; and Final approval of the version to be published; and agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Non Author Contributors: Dr Felicity O'Connell from the Police Foundation will assist in gaining and analysing data from the CSEW and so will be acknowledge for her work. Emilija Mauko, a PhD

student from the University of London currently on secondment to the Police Foundation will also assist with the Literature Review and will be acknowledged as a contributor.

Dr Rick Muir of the Police Foundation will give the written report final oversight. Catherine Skidmore from the Police Foundation will be responsible for editing and proofreading the final report. Her contribution will also be acknowledged.

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11.   APPENDICIES

Amendment History

Amendment No.	Protocol version no.	Date issued	Author(s) of changes	Details of changes made
1	0.1	24/11/23	Ruth Halkon	The information outlined in this protocol differs from the research plan originally submitted to the NIHR in some respects. The main changes have been to methodology. Rather than relying on raw police data and analysing that, we are instead taking data on fraud victims from the Crime Survey of England and Wales - which will capture hidden demand as many of those would not have reported to police. We are also carrying out a quantitative survey of all victims which will be circulated via Surrey and Sussex Police - both of these will provide comparable data to that envisioned in the original methodology but will capture a wider cross-section of victims than the research plan as originally envisioned. All of these changes have been clearly marked in red in the above protocol.
2	0.2	05/02/24	Ruth Halkon	This version was the one approved by the ethics panel. The victim survey was altered according to the panel's recommendations

APPENDIX 1 - ORGANISATIONAL CONSENT (POLICE AND CRIME COMMISSIONER)

25 November 2022

To whom it may concern

Re: Police Foundation research proposal – Addressing the health impacts of fraud using existing police systems to support vulnerable victims.

I am Lisa Townsend, Police and Crime Commissioner for Surrey, and I am pleased to support The Police Foundation and provide in-kind support to the project.

Fraud is a serious and growing problem in Surrey which is having a devastating effect on the mental and physical health of vulnerable people. In Surrey we are proud of our work to develop more robust systems for identifying and supporting the most vulnerable victims of fraud to reduce the impact on their mental and physical health. Our work has been recognised as national best practice, but we recognise the need for more research to develop more effective and evidence-based policies for tackling what is a national problem.

This is why I endorse the Police Foundation's health impacts of fraud project and will provide access to data and to practitioners with expertise, to assist them in collecting the evidence needed to conduct this important research.

I believe that this research has the potential to be influential in improving our understanding of the mental and physical health impacts of fraud and how best the police can work with partners to prevent this crime impacting victims.

Yours faithfully

Lisa Townsend

Surrey Police and Crime Commissioner

APPENDIX 2 - SURVEY

DATE: 28/11/23

VERSION: 1

Study Title:

The impact of scams and fraud and the current knowledge and systems in the police and partner agencies for targeting and delivering victim support services

Faculty Ethics Committee Ref No: FHSS 2024-005

Name of researcher: Prof Mark Button (University of Portsmouth); Dr Michael Skidmore (The Police Foundation)

Contact details:

mark.button@port.ac.uk School of Criminology and Criminal Justice, St Georges Building, University of Portsmouth, Portsmouth PO1 2HY. Tel +44(0)23 92843923

Michael.Skidmore@police-foundation.org.uk The Police Foundation, Kemp House, 124 City Road, London, EC1V 2NX Tel: 0203 195 3837 www.police-foundation.org.uk

Invitation

Thank you for reading this. We would like to invite you to take part in our research study by completing this questionnaire. It is entirely up to you whether you participate but your responses would be valued. You have been identified as a potential respondent by Action Fraud or Victim Support. This research aims to find out more about the impact of fraud on its victims, with an aim to inform appropriate support for those who experience fraud. I do not need your name or any identifying details; the questionnaire can be completed anonymously and all reasonable steps will be taken to ensure confidentiality. Responses from completed questionnaires will be collated for analysis; once this is complete the original questionnaires will be retained securely under the *University of Portsmouth Research Data Management Policy* for a minimum of ten years*.* Up to this stage, completed questionnaires will be stored on a secure server in accordance with data protection guidelines. If you wish to learn more about the results of the research you can contact the researchers using the contact details above. The survey will involve answering questions about your experience of fraud. Details of support services that you can access if you need to are provided below, and also at the end of the questionnaire*.*

Victim Support: 08 08 16 89 111

Action Fraud: 0300 123 2040

Questionnaire instructions

If you choose to continue to complete the survey, you will first be asked to confirm that you have read the information above and that you agree to participate in the research. After checking the consent box

below, you will be directed to the anonymous online survey. No personal data will be collected, and you will not be asked to provide any information that could identify you. We would like you to consider answering all the questions, as this will help us to understand the impact of fraud victimisation more fully, however if you are uncomfortable with any questions, you can leave them out. You are also free to withdraw at any time by closing the webpage. The final question will ask you to submit the survey - only surveys that have been submitted in this way will be included in analysis. The survey should take approximately 20 minutes to complete.

I consent to participate in the research: …. (required question)

Victim Survey Questions…

1	Has this fraud had an impact on your financial wellbeing? To a great extent | To a moderate extent | To a small extent | Not at all | N/A
2	Have you noticed a change in your physical health as a result of becoming a victim of fraud? *Yes / No*
3	If so, which of these symptoms have you experienced (tick all of the symptoms that apply) *N/A* *Stress- related symptoms e.g Skin conditions, digestive issues, headaches, muscle tension and pain, heart disease, heart attack, high blood pressure, stroke, sleep problems, weight gain, and memory and concentration impairment* *Worsening of pre-existing health conditions (please specify)* *Other (please specify)*
4.	Have you noticed a change in your mental health as a result of becoming a victim of fraud? *Yes / No*
5	If so, which of these symptoms have you experienced (tick all of the symptoms that apply) N/A Depression Anxiety/panic attacks Loss of confidence Feeling vulnerable to falling victim again Difficulty sleeping Crying/tears Self-harm Suicidal thoughts Attempt at suicide Other (Please specify)

	This will be a closed question – the response options will be developed further based on consultation with practitioners and a review of existing literature.
6	Were these physical / mental health symptoms linked to health conditions you were experiencing prior to the fraud? All / Some / None / N/A
7	How soon after the fraud incident did you notice these symptoms (and if they were preexisting, how soon after did you notice them worsening). Same day/Within a week/Within a month/ Within two months/ N/A
8	To what extent have the symptoms you experiences affected you in your ability to function in everyday life? *Very affected	Moderately affected	Slightly affected	Not at all affected	N/A* Could you give more detail about how you have been affected (free text field)
9	Have you spoken to anyone about these symptoms? (tick all that apply) *N/A* *Police* *GP* *Family Member* *Friend* *Social Worker* *Victim Support* *Citizens Advice* *Other (Please specify)*
10	Were you offered any treatment or support from an organisation to address these symptoms? (tick all that apply) *N/A* *Police* *GP* *Family Member* *Friend* *Social Worker* *Victim Support* *Citizens Advice* *Other (Please specify)*
11	Have you received any treatment or support from an organisation to address these symptoms? (tick all that apply) *N/A* *Police* *GP* *Family Member* *Friend* *Social Worker* *Victim Support* *Citizens Advice*

	Other (Please specify)	
12	Did you want to receive treatment or support to address your symptoms when you reported the fraud? *Yes / No / N/A* If not, did you want to receive treatment or support at any time after reporting the fraud *Yes / No / N/A*	
13	Would you like to say any more about your experience of being a victim of fraud and how it has affected your physical and/or mental health? *(Free text field)*	
14	The team are very keen to speak to victims who have experienced an impact on their mental or physical health as a result of a fraud. If you are willing to speak in more detail about your experiences, please insert your contact details in the field below. *(Free text field)*	

Submit survey …. (required response)

Thank you for completing the questionnaire. If you have any concerns regarding this research please contact the researchers at: Michael.Skidmore@police-foundation.org.uk in the first instance. If you are not entirely happy with a response please contact *the University of Portsmouth Complaints Officer (University at complaintsadvice@port.ac.uk).* Please also find below contact details for relevant support services:

Victim Support: 08 08 16 89 111

Action Fraud: 0300 123 2040

 APPENDIX 3 - PRACTITIONER PARTICIPANT INFORMATION SHEET

DATE: 05/02/24

VERSION: 1

Study Title: The impact of scams and fraud and the current knowledge and systems in the police and partner agencies for targeting and delivering victim support services

Faculty Ethics Committee Ref No: FHSS 2024-005

Name of researchers: Prof Mark Button (University of Portsmouth); Dr Michael Skidmore (The Police Foundation)

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Tel: 0203 195 3837 www.police-foundation.org.uk

1. Invitation

We would like to invite you to take part in our research study. Joining the study is entirely up to you, before you decide we would like you to understand why the research is being done and what it would involve for you. We will go through this information sheet with you, to help you decide whether or not you would like to take part and answer any questions you may have. We estimate that the interview will take about 60 minutes. Please feel free to talk to others about the study if you wish. Do ask if anything is unclear.

We are researchers from the Police Foundation and The University of Portsmouth, and we have considerable experience in undertaking research relating to fraud and victimisation. Professor Mark Button is the Director of the Centre for Cybercrime and Economic Crime and The University of Portsmouth, and Dr Michael Skidmore is the head of Serious Crime Research at the Police Foundation.

2. *Study Summary*

Fraud is growing rapidly and is now the most common crime type in England and Wales. Victims can suffer considerable impact to their physical and mental health, and can be vulnerable to revicitimisation, which can generate significant costs to the police and health service among others. However, there are large gaps in our understanding of what this health impact might consist of, what makes some victims more vulnerable than others and how their needs can be met. As first responders, the police are mainly guided by a law enforcement and crime reduction agenda. Their knowledge and data-capture on victim health needs and the support they offer varies nationally.

This exploratory research aims to produce an evidence base around fraud's physical and mental health impacts and examine current systems for supporting victims within two police forces, building on existing police policies and systems for supporting vulnerable victims. Op Signature is Surrey and Sussex Police's campaign to identify and support vulnerable victims of fraud and protect them from further targeting. There are strong indications that Op Signature provides a good service to victims, not only in reducing the impact to their mental and physical health of falling victim of fraud, but also preventing revicitimisation. However no formal evaluation has been carried out, thus there is a lack of concrete data to give weight to the anecdotal evidence provided by practitioners and service users. This project aims to lay the foundation for follow up work to develop robust and evidence-based national frameworks for assessing the health impact of fraud.

We are seeking participants who have experience of working with victims of fraud in a professional context. Participation in the research would require you to attend an interview, either online (using Microsoft Teams), or face to face. This will be arranged at a time and place convenient for you, and will take about an hour of your time.

3. What is the purpose of the study?

The purpose of the study is to better our understanding of the health impact of fraud on victims. Also to understand how the police and partner agencies identify and support victims who experience an impact on their health. The research will draw on knowledge and systems within Sussex and Surrey police forces, and from the perspectives and experiences in these areas, in order to provide a comprehensive review of current provision. This will lay the groundwork for future research and the development of policies and practices, including robust frameworks for undertaking operational and strategic assessments of impact and delivery of interventions.

4. Why have I been invited?

You have been invited to participate as you have been identified by The Police Foundation as holding a role within law enforcement or an organisation with responsibility for providing support for victims of fraud. We are looking to talk to representatives from a range of relevant organisations, and these, alongside interviews with victims of fraud, will allow a holistic overview of the vulnerabilities, experiences, needs and provisions following victimisation. The Police and Crime Commissioner and the lead officer for fraud victim support in Surrey Police have provided support for this research. You will be asked to provide your own opinion, from your professional experience, about the health impact of fraud on its victims. Please contact your organisation (if not covered by the permission outlined above) if additional organisational consent is required to take part in this research.

5. Do I have to take part?

No, taking part in this research is entirely voluntary. It is up to you to decide if you want to volunteer for the study. We will describe the study in this information sheet. If you agree to take part, we will then ask you to sign the attached consent form, dated 05/02/24, version number, 2.

6. What will happen to me if I take part?

If you agree to take part in the research, you will be contacted by one of the researchers to arrange a suitable time and location for the interviews. These will take approximately 60 minutes, and can be face-to-face or online using Microsoft Teams. The researcher will talk you through the research, and will check that you understand the nature and purpose of the research. You will then take part in an interview which will be audio recorded, with your consent. After the interview, the audio recordings will be transcribed for analysis.

You will not be asked to provide any information that could identify you, and only your participant number will be stored on the interview recordings and transcriptions.

7. **Expenses and payments**

There will be no payment for participating in the research.

8. **What data will be collected and / or measurements taken?**

The interviews will be audio recorded using a secure recording device, or using Microsoft Teams record function. Audio recordings will be transcribed after the interviews are completed. No personal identifiers will be requested, and the data will be confidential and anonymous.

10. **What are the possible disadvantages, burdens and risks of taking part?**

There should be no disadvantages to taking part other than the time taken to participate in the research. If you find any of the issues discussed upsetting or concerning, contact details for support services will be provided after the interview.

11. **What are the possible advantages or benefits of taking part?**

The benefits of taking part relate to the ongoing development of the impact of fraud on its victims. While you may not experience any direct benefits, the research will be used to inform support and interventions to improve the health outcomes of those who experience fraud.

12. **Will my data be kept confidential?**

The raw data, which identifies you, will be kept securely by the researcher team using a password protected research folder. This will only be accessible to the research team.

You will be allocated a participant number and only this will be recorded on the raw and processed data. Your contact details will be stored separately, also in a secure folder, purely for the purpose of arranging the interview, and to allow you to contact the research team if you decide to withdraw your consent (see below). This document will be destroyed after a designated period (two weeks after the interview) to anonymise the data.

The data, when made anonymous, may be presented to others at academic conferences, or published as a project report, academic dissertation or in academic journals or book. It could also be made available to any commissioner or funder of the research.

The raw data will be retained for a minimum of 10 years. When it is no longer required, the data will be disposed of securely (*e.g.* electronic media and paper records / images) destroyed.

13. What will happen if I don't want to carry on with the study?

As a volunteer you can stop any participation in the interview at any time, or withdraw from the study up to two weeks after the interview, without giving a reason if you do not wish to. If you do withdraw from a study after some data have been collected you will be asked if you are content for the data collected thus far to be retained and included in the study. If you prefer, the data collected can be destroyed and not included in the study. Once the research has been completed, and the data analysed, it will not be possible for you to withdraw your data from the study.

14. What if there is a problem?

If you have a query, concern or complaint about any aspect of this study, in the first instance you should contact the researcher(s) using the contact details above.

If your concern or complaint is not resolved by the researcher, you can contact The University Complaints Officer: 023 9284 3642   complaintsadvice@port.ac.uk OR Dr Rick Muir, Director of the Police Foundation, at rick.muir@police-foundation.org.uk

15. Who is funding the research?

This research is being funded by The National Institute for Health and Care Research (NIHR), Ref: NIHR154927. None of the researchers or study staff will receive any financial reward by conducting this study, other than their normal salary.

16. Who has reviewed the study?

Research involving human participants is reviewed by an ethics committee to ensure that the dignity and well-being of participants is respected. This study has been reviewed by the University of Portsmouth Humanities and Social Sciences Faculty Ethics Committee and been given favourable ethical opinion.

Thank you

Thank you for taking time to read this information sheet and for considering volunteering for this research.

APPENDIX 4 - PRACTITIONER CONSENT FORM

DATE: 05/02/24

VERSION: 1

Study Title: The impact of scams and fraud and the current knowledge and systems in the police and partner agencies for targeting and delivering victim support services

Faculty Ethics Committee Ref No: FHSS 2024-005

Name of researcher: Prof Mark Button (University of Portsmouth); Dr Michael Skidmore (The Police Foundation)

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Tel: 0203 195 3837 www.police-foundation.org.uk

1.   I confirm that I have read and understood the information sheet dated 28/11/23 (version 1)

for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

2. I understand that my participation is voluntary and that I am free to withdraw at any time (or add the date after which withdrawal will not be possible) without giving any reason.

3. I understand that data collected during this study will be processed in accordance with data protection law as explained in the Participant Information Sheet (insert date and version of participant information sheet).

4. I consent for my interview to be audio / video recorded. The recording will be transcribed and analysed for the purposes of the research. Following transcription of the data, audio recordings will be destroyed securely.

5. I consent to verbatim quotes being used in publications; I will not be named but I understand that there is a risk that I could be identified.

6. I agree to the data I contribute being retained for any future research that has been given a favourable opinion by a Research Ethics Committee.

7. I understand that the results of this study may be published and / or presented at meetings or academic conferences, and may be provided to research commissioners or funders (*Give the name of

the Company / Organisation here, or remove the reference if not applicable). I give my permission for my anonymous data, which does not identify me, to be disseminated in this way.

4. I agree to take part in the above study.

Name of Participant: Date: Signature:

Name of Researcher: Date: Signature:

Note: When completed, one copy to be given to the participant, one copy to be retained in the study file

APPENDIX 5 - VICTIM PARTICIPANT INFORMATION SHEET

DATE: 28/11/23

VERSION: 1

Study Title: The impact of scams and fraud and the current knowledge and systems in the police and partner agencies for targeting and delivering victim support services

Faculty Ethics Committee Ref No: FHSS 2024-005

Name of researcher: Prof Mark Button (University of Portsmouth); Dr Michael Skidmore (The Police Foundation)

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1. Invitation

We would like to invite you to take part in our research study. Joining the study is entirely up to you, before you decide we would like you to understand why the research is being done and what it would involve for you. We will go through this information sheet with you, to help you decide whether or not you would like to take part and answer any questions you may have. We estimate that the interview will take about 60 minutes. Please feel free to talk to others about the study if you wish. Do ask if anything is unclear.

We are researchers from the Police Foundation and The University of Portsmouth, and we have considerable experience in undertaking research relating to fraud and victimisation. Professor Mark Button is the Director of the Centre for Cybercrime and Economic Crime and The University of Portsmouth, and Dr Michael Skidmore is the head of Serious Crime Research at the Police Foundation.

2. *Study Summary*

Fraud is growing rapidly and is now the most common crime type in England and Wales. Alongside any financial impact, fraud can also impact victims more widely, however our understanding of the many ways that fraud can impact people is quite limited at the moment. This research hopes to allow us to better understand the experiences of people who have become victims of fraud, in order to better support them and prevent them from becoming victims again in the future. To do this, we want to talk

to people who have experienced fraud, in order to find out their opinions about fraud, and how we can better support those who may become victims.

3. What is the purpose of the study?

The purpose of the study is to look at how victims of fraud are currently supported by the police and other agencies. This will be used to identify any gaps in the current services that are provided, and to make recommendations for improving the current practices and procedures following the reporting of a fraud.

4. Why have I been invited?

You have been invited to participate as you have been identified by Victim Support as having experienced fraud, and as having reported it to the police. You will be asked to give some information about your own personal experience (although you will not be asked any questions that would allow you to be identified), and you will be asked your opinion on the impact of fraud from your experience.

5. Do I have to take part?

No, taking part in this research is entirely voluntary. It is up to you to decide if you want to volunteer for the study. We will describe the study in this information sheet. If you agree to take part, we will then ask you to sign the attached consent form, dated 28/11/23, version number, 1.

6. What will happen to me if I take part?

If you agree to take part in the research, you will be contacted by one of the researchers to arrange a suitable time and location for the interviews. These will take approximately 60 minutes, and can be face-to-face or online using Microsoft Teams. The researcher will talk you through the research, and will check that you understand the nature and purpose of the research. You will then take part in an interview which will be audio recorded, with your consent. After the interview, the audio recordings will be transcribed for analysis.

You will not be asked to provide any information that could identify you, and only your participant number will be stored on the interview recordings and transcriptions.

7. Expenses and payments

As a thank you for giving up your time to be interviewed, you will be reimbursed £50.00.

8. What data will be collected and / or measurements taken?

The interviews will be audio recorded using a secure recording device, or using Microsoft Teams record function. Audio recordings will be transcribed after the interviews are completed. No personal identifiers will be requested, and the data will be confidential and anonymous.

10. What are the possible disadvantages, burdens and risks of taking part?

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There should be no disadvantages to taking part other than the time taken to participate in the research. If you find any of the issues discussed upsetting or concerning, contact details for support services will be provided after the interview.

11. What are the possible advantages or benefits of taking part?

The benefits of taking part relate to the ongoing development of the impact of fraud on its victims. While you may not experience any direct benefits, the research will be used to inform support and interventions to improve the health outcomes of those who experience fraud.

12. Will my data be kept confidential?

The raw data, which identifies you, will be kept securely by the researcher team using a password protected research folder. This will only be accessible to the research team.

You will be allocated a participant number and only this will be recorded on the raw and processed data. Your contact details will be stored separately, also in a secure folder, purely for the purpose of arranging the interview, and to allow you to contact the research team if you decide to withdraw your consent (see below). This document will be destroyed after a designated period (two weeks after the interview) to anonymise the data.

The data, when made anonymous, may be presented to others at academic conferences, or published as a project report, academic dissertation or in academic journals or book. It could also be made available to any commissioner or funder of the research.

The raw data will be retained for a minimum of 10 years. When it is no longer required, the data will be disposed of securely (*e.g.* electronic media and paper records / images) destroyed.

13. What will happen if I don't want to carry on with the study?

As a volunteer you can stop any participation in the interview at any time, or withdraw from the study up to two weeks after the interview, without giving a reason if you do not wish to. If you do withdraw from a study after some data have been collected you will be asked if you are content for the data collected thus far to be retained and included in the study. If you prefer, the data collected can be destroyed and not included in the study. Once the research has been completed, and the data analysed, it will not be possible for you to withdraw your data from the study.

14. What if there is a problem?

If you have a query, concern or complaint about any aspect of this study, in the first instance you should contact the researcher(s) using the contact details above.

If your concern or complaint is not resolved by the researcher, you can contact The University Complaints Officer: 023 9284 3642   complaintsadvice@port.ac.uk OR Dr Rick Muir, Director of the Police Foundation, at rick.muir@police-foundation.org.uk

15. Who is funding the research?

This research is being funded by The National Institute for Health and Care Research (NIHR), Ref: NIHR154927. None of the researchers or study staff will receive any financial reward by conducting this study, other than their normal salary.

16. Who has reviewed the study?

Research involving human participants is reviewed by an ethics committee to ensure that the dignity and well-being of participants is respected. This study has been reviewed by the University of Portsmouth Humanities and Social Sciences Faculty Ethics Committee and been given favourable ethical opinion.

Thank you

Thank you for taking time to read this information sheet and for considering volunteering for this research.

APPENDIX 6 - VICTIM CONSENT FORM

DATE: 28/11/23

VERSION: 1

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1.   I confirm that I have read and understood the information sheet dated 28/11/23 (version 1)

for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

2. I understand that my participation is voluntary and that I am free to withdraw at any time (or add the date after which withdrawal will not be possible) without giving any reason.

3. I understand that data collected during this study will be processed in accordance with data protection law as explained in the Participant Information Sheet (insert date and version of participant information sheet).

4. I consent for my interview to be audio / video recorded. The recording will be transcribed and analysed for the purposes of the research. Following transcription of the data, audio recordings will be destroyed securely.

5. I consent to verbatim quotes being used in publications; I will not be named but I understand that there is a risk that I could be identified.

6. I agree to the data I contribute being retained for any future research that has been given a favourable opinion by a Research Ethics Committee.

7. I understand that the results of this study may be published and / or presented at meetings or academic conferences, and may be provided to research commissioners or funders (*Give the name of the Company / Organisation here, or remove the reference if not applicable)*. I give my permission for my anonymous data, which does not identify me, to be disseminated in this way.

4. I agree to take part in the above study.

Name of Participant: Date: Signature:

Name of Researcher: Date: Signature:

Note: When completed, one copy to be given to the participant, one copy to be retained in the study file

APPENDIX 7 - CSEW ACCESS AGREEMENT
DATE:

VERSION: 1

APPENDIX 8 - PRACTITIONER INTERVIEW SCHEDULE

DATE: 05/02/24

VERSION: 2

1. Can you tell me briefly about your organisation, what its role is and what it does to support fraud victims?
2. Based on your experience, how common is it for victims of fraud to experience an impact on their physical or mental health?
3. What are the ways that this can come to your attention?
4. Based on your experience, are there certain victim characteristics or circumstances that are associated with experiencing a health impact?
   - The victim's personal characteristics or circumstances
   - The financial loss
   - The methods in use by the offender
5. Are there certain types of fraud offence that tend to have a greater impact on victim's health?
6. Why do you think this is?
7. Does your organisation include the impact on health into assessments of vulnerability?
8. To your knowledge, is there:
   a. An association between a pre-determined vulnerability and an impact on the victims' health of the fraud?
   b. An association between a pre-existing health condition and susceptibility to fraud?
   c. An association between suffering a health impact from a fraud and the risk of repeat victimisation?
9. Do you feel confident in your organisations' (or partner organisations') ability to identify and assess the impact of fraud on a victim's health?
10. What frameworks or assessment tools does your organisation use to assess vulnerability?
    a. Can you outline the criteria or thresholds used?
    b. Is there anything missing from the assessment? – i.e. is any additional information you routinely ask the victims for that is not included in the assessment?
11. What training and awareness is there around the health impacts of fraud in your organisation?
12. What assistance from partner organisations do you receive in identifying and assisting vulnerable fraud victims?
13. In your experience, what are the needs of fraud victims who experience an impact on their health?
14. In what way are these needs distinct from other victims of fraud?
15. In what way are these needs distinct from victims of other types of crime?
16. What types of support do these victims want/need?
17. What support services does your organisation offer to victims who experience a health impact?
18. Can you tell us more about
    a. The level of demand for this support?
    b. Eligibility criteria to access this service?
    c. Staff training to deliver this support?
    d. The timeline for victims to access this support?
19. Do you commonly refer these victims to external services to access the support they need?
    a. If so, who are the key partner organisations to which you refer them?
20. Do you use agreed referral channels, or do you signpost victims to support and then they self-refer?
21. Do you come across any barriers when dealing with external partner organisations on behalf of fraud victims?
22. What are the challenges in identifying and supporting fraud victims who have experienced an impact on their health?
23. Do you feel that the systems in place internally and across partnerships are sufficient to support fraud victims who experience an impact on their health?
24. Do you feel that the systems in place internally and across partnerships are sufficient to meet the scale and / or type of demand?
25. In your opinion, is there anything more that can be done to improve support for victims?

APPENDIX 9 - VICTIM INTERVIEW SCHEDULE

DATE: 28/11/23

VERSION: 2

Victim Interview Questions

The first set of questions relate to the fraud that was committed. If you do not feel comfortable discussing this, please let me know. We can skip questions or take a break whenever you need. You are also free to withdraw from the interview entirely if you wish.

1. Can you describe the fraud that you experienced?
   • How did you come into contact with the offender?
   • How long were you in contact with the offender?
   • Has anything like this happened before?

2. Did you tell your family, friends or others that you know about the fraud?
   • If did not tell anyone, why do you think this is?

3. Did anyone help you to sort things out after the fraud?
   • People in the household, at work, support staff etc?

4. Have you had any resolution from the police, bank or other organisation?
   • Suspect identified, investigated, arrested, charged?
   • Did you get the money back?

The following questions relate to your health, both before and after the fraud took place:

5. Did you have any mental, emotional or physical health problems before the fraud?

6. If yes, did any of these health problems become worse after the fraud took place?
   • Do you think the fraud was the reason for this?

7. Did you experience any new physical symptoms after the fraud?

8. Did you experience any new mental or emotional health symptoms after the fraud?

9. Since the fraud happened, has the impact on your health affected your day-to-day life?

The next set of questions relate to your experience of reporting the fraud and any subsequent support you have received from other organisations.

10. Have you spoken to anyone about your symptoms (e.g. friends/family, doctor, police etc)?
    • How would you describe your awareness of available support services for fraud victims?
    • "How was the process of reporting the fraud for you?"

11. Were you offered treatment or support from anyone in relation to your symptoms? –
    • At the time of reporting the fraud to Action Fraud, the police or other organisation?
    • During subsequent contact from an organisation?
    • After approaching an organisation to request support?

12. Do you think you were offered the support that you needed?

- This includes specific support to address the health impact?
- General support from other organisations?

13. If you did receive treatment or support from an organisation, was this helpful? – if yes **or** no, why do you think this is?
- Could you let us know the service provider?
- Was there an improved health outcome?

14. Do you think there is anything that could have improved your experience of accessing or receiving support for your health?

APPENDIX 10 - INVITATION EMAIL (PRACTITIONER)

DATE: 28/11/23

VERSION: 1

Dear…

We would like to invite you to participate in our research study, that looks at the impact of scams and fraud and the current knowledge and systems in the police and partner agencies for targeting and delivering victim support services. The research is a collaboration between The Police Foundation and Sussex and Surrey Police, with additional support from the University of Portsmouth.

Attached to this email is an information sheet that provides detailed information about the research. If you decide to participate, which will involve taking part in an interview lasting approximately 60 minutes, please read through the information sheet and return the consent form (also attached). The research team will then contact you to arrange a suitable time and location.

Please do feel free to contact the research team by responding to this email if you have any questions.

Best wishes,

Dr Michael Skidmore

Professor Mark Button

APPENDIX 11 - INVITATION EMAIL (VICTIM)

DATE: 28/11/23

VERSION: 1

Thank you for expressing an interest in taking part in an interview about your experiences of fraud. These interviews will cover similar topics to those in the survey that you kindly completed, but will give you the opportunity to tell us about your experiences in more detail. The research is a collaboration between The Police Foundation and Sussex and Surrey Police, with additional support from the University of Portsmouth.

Attached to this email is an information sheet that provides detailed information about the research. If you decide to participate, which will involve taking part in an interview lasting approximately 60 minutes, please read through the information sheet and return the consent form (also attached). The research team will then contact you to arrange a suitable time and location.

Please do feel free to contact the research team by responding to this email if you have any questions.

Best wishes,

Dr Michael Skidmore

Professor Mark Button

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APPENDIX 12 - INVITATION TEXT MESSAGE (SURVEY)

DATE: 28/11/23

VERSION: 2

Following from your contact with Surrey and Sussex Police, we would like to invite you to tell us more about your experience of fraud, and its impact on you as a victim. Please click on this link to be directed to a survey. This survey is part of a research project that is being completed by The Police Foundation, Sussex and Surrey Police and the University of Portsmouth.

Thank you!

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