Improving Responses to Hate Relationships
Final Report

Catherine Donovan*, John Clayton**, Stephen J Macdonald*, Carol Long*, Ayurshi Dutt* and Vani Jain*
*Durham University; **Northumbria University

Durham University

Northumbria University NEWCASTLE

Connected Voice Advocacy

Executive Summary

1. Introduction

The research team have been working with the Hate Crime Advocacy Service (HCAS) at Connected Voice Advocacy since 2019. The HCAS is funded by the Northumbria Police and Crime Commissioner's Office so whilst it is based in Newcastle it provides a service across the Northumbria Police Authority: Tyne and Wear and Northumberland.

Hate relationships is a term used by the authors to describe repeated incidents of hate being directed at an individual and/or their family by the same perpetrators who live in close proximity to them (Donovan et al. 2023). The impacts can be akin to coercive control experienced in domestically abusive relationships and exacerbated by help-providers apparent inaction. This report brings together the findings from the two most recent studies exploring different aspects of hate relationships and provides a toolkit, based on those findings, to better equip practitioners to identify hate and hate relationships and ensure that people are referred to the most appropriate help-provider.

This report answers the following questions:

(a) were the experiences of hate relationships different during the pandemic period and

(b) whether and how a toolkit for practitioners might improve service responses to those victimised by hate relationships.

Building on these questions we aimed to:

- co-produce a toolkit with practitioners, clients and workers of the HCAS that can
- aid early recognition of hate relationships and facilitate quicker and more appropriate referrals to the Hate Crime Advocacy Service (HCAS).

2. Methods

Data was collected in the following ways.

- A case note analysis was conducted by accessing the redacted and anonymised case notes of hate relationships from HCAS during the period 1/4/2019 - 31/03/2022. Hate relationships were identified with the following criteria: repeated hate incidents from the same perpetrator(s) who live in close proximity to the people they victimise, and with impacts for those victimised that are similar to those reported by those victimised by coercive control.
- 14 interviews with practitioners from a range of statutory (e.g. police), local authority and third-sector agencies (e.g. housing associations).
- Four service user focus groups and practitioner workshops.

3. Findings

- COVID-19 lockdowns led to a worrying increase in the proportion of cases being referred to HCAS that were hate relationships: from 27% during non-pandemic conditions in our earlier study, to 44% during the pandemic. Thus, there is a strong suggestion that the conditions of COVID-19, as they had for domestic abuse (Kourti, et al. 2023), allowed hate relationships to develop.
- There is a lack of leadership for responses to hate incidents, hate crime and hate relationships.
- There is widespread misunderstanding about what hate crime legislation covers,

how hate is identified, the difference between hate crime and hate incidents:

- It is often HCAS advocates who challenge other services to name what has been reported as hate motivated.

- This misunderstanding leads practitioners all too often to minimise accounts of hate motivated victimisation, perceive those making reports of hate as untrustworthy and to re-frame victimisation as being the result of anti-social behaviour or a neighbourhood dispute. This is experienced as:
  - Minimisation of victimisation and impacts.
  - Lack of empathy or concern for those victimised or reporting incidents.
  - Lack of trust in help providers or private landlords who may condone, reinforce, or initiate hate.
  - Lack of skills, knowledge, expertise, and confidence in identifying and addressing hate incidents.
  - Difficulty distinguishing between perpetration, retaliation, self-defence, and mutual aggression.

- There is little understanding that when hate relationships occur there is more than one victim, i.e.. the family and friends of the individual who reports might also be seriously impacted by the hate relationship.

- There is little to no understanding of the cumulative impact of repeated hate motivated victimisation over long periods of time by the same perpetrator(s)– which we call hate relationships:
  - Relatedly there is very little understanding that the apparent lack of intervention in hate relationships over a long period of time has profound impacts on the mental and physical health and wellbeing of those victimised.

- There is little evidence of services working in partnership to share information about the risks and harms being experienced by those who are victimised and to agree a plan of action.
  - This changes when HCAS are involved as they often take the role of key worker for the case and bring together different agencies to seek resolution.
  - Social services adult services are conspicuous by their absence in the care of disabled adults being victimised by hate relationships.

- Rehousing appears to be the only remedy offered and this is only viable when those victimised live in social housing.

- There is very little focus on perpetrators, how their behaviours might be challenged and how they might be called to account for their behaviours.

- COVID-19 lockdowns exacerbated what was already the case:
  - The results of austerity have left public and third sector services with reduced staff and resources. This in turn has led to rationed services, long waiting lists for services and a lack of training and support for front-line practitioners.
  - COVID-19 lockdowns led to longer waiting times for responses, inability to get face-to face services lack of continuity of care.

- COVID-19 lockdowns increased the victimisation because perpetrators and those victimised were confined to home.
  - In a small number of cases being required to stay at home provided periods of reprieve for those victimised.

- HCAS Advocates provide:
  - A listening ear, believing, affirming, and empathising with clients.
  - Clarity by communicating with other professionals involved in the case.
  - Support in writing letters, attending meetings, and gathering evidence.
  - Emotional support to improve confidence and self-esteem.
  - Advocacy with service providers on behalf of clients to challenge mislabelling of victimisation.
  - Advocates were more visible pre-lockdown but lost some visibility post-lockdown.

4. Recommendations

1. Though the focus of our research was on the early identification of hate relationships, the findings made clear that there is a lack of knowledge about what hate is as opposed to what anti-social behaviour is, the difference between hate incidents, hate crime and hate relationships, available reporting mechanisms, protected characteristics, thresholds for police investigation, availability of the HCAS, its referral pathways, and availability of other services who can work in partnership to address hate and hate relationships.
Recommendation: The development and delivery of training across statutory and third sectors to address the above gaps in knowledge

2. As well as confusing hate incidents/crime with anti-social behaviour practitioners were unclear about which statutory or third sector services are available to assist in responding to hate. The police were perceived as having a leadership role however, this is not the case in the majority of reports of hate which do not reach the threshold of a crime.
Recommendation: HCAS be identified as a lead organisation for hate. They should:

   a. be financially supported to design and deliver the training outline above.
   b. be the key organisation receiving referrals for hate relationships.
   c. be the key organisation providing advice to partner organisations and a service to those victimised by hate who wish it.
   d. lead on a multiagency response to tackle hate relationships within the community.

3. The needs of those who are victimised by hate are wide-ranging and include, but are not limited to, physical and mental health, housing, emotional support, safeguarding for children and/or adults, and specialist support from 'by and for' organisations with expertise in the protected characteristics. However, findings suggest that these needs are not appropriately recognised or acted on by practitioners. Partnership working is challenging and often not working with respect to those victimised by hate because of a lack of leadership and coordination of response. It is recommended that a similar model to the Multi-Risk Assessment Conference (MARAC) Marac resources - SafeLives used in domestic abuse be considered for hate relationships. With this approach, a lead agency chairs regular meetings of partner agencies to discuss a joint plan to ensure the safety of victim/survivors. Referrals are made to such a meeting would be based on an assessment of risk and need and the chair would facilitate a discussion including sharing intelligence about the case and agreements about which agencies might be involved with improving the outcomes for victim/survivors. The assessment of risk and need would be based on the criteria for a hate relationship: repeat reporting of hate incidents, perpetrators who live in close proximity, mental health, physical health and social impacts on victim/survivors.
Recommendation: Partnership working should be central to any response to hate. A lead organisation should be identified, we

recommend that HCAS, coordinate partnership work.

4. To underpin the training and development of best practice partnership working, the Hate-ID App developed in this research project provides an 'at a glance' guide to initial questions to ask of those reporting hate, referral pathways for those victimised by hate depending on whether they are reporting hate incidents, hate crime or hate relationships and a guide to referring organisation's options for intervention.
Recommendation: The Hate-ID App is embedded into the training and disseminated widely to improve early identification of hate, early intervention and appropriate referral where needed, and improved partnership working.

5. There is a lack of understanding about the scale of hate because of the reliance on police data for hate crime, i.e., those incidents that reach the threshold of a crime. This gives an inaccurate picture locally of the impact of hate on communities.
Recommendation: Community safety partnerships should work together to agree on a data set that gives a fuller picture of how hate behaviours are impacting communities. They should also be wary of being overly influenced by centralised government requirements on how and what data should be collected which can mean it is not responsive to more regional differences.

6. The findings speak starkly to the lack of attention paid to working with perpetrators of hate relationships. Some participants point to the ways in which perpetrators of hate might themselves have needs that go unmet.
Recommendation: Separate research should be conducted to explore the possibilities for addressing their behaviours that include both criminal justice and non-criminal justice interventions.

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Hate relationships is a term used by the authors to describe repeated incidents of hate being directed at an individual and/or their family by the same perpetrators who live in close proximity to them (Donovan et al. 2023). The impacts can be akin to coercive control experienced in domestically abusive relationships and exacerbated by help-providers apparent inaction. This report brings together the findings from the two most recent studies exploring different aspects of hate relationships and provides a toolkit, based on those findings, to better equip practitioners to identify hate and hate relationships and ensure that people are referred to the most appropriate help-provider.

The first study was funded by Durham University's Economic and Social Research (ESRC) Impact Accelerator Fund and focused on interviews with practitioners and service users to explore with them how help-seeking could be improved for those being victimised by hate relationships. The second study was funded by Connected Voice Advocacy (CVA) and involved the analysis of case notes for clients of the Hate Crime Advocacy Service (HCAS) during the COVID-19 pandemic between 1/4/2019-31/3/2022. This period of time allows for inclusion of any clients whose involvement with the service precedes the lockdowns and those whose initial referral began during lockdown periods who were being victimised in hate relationships.

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2. Background: National Criminal Justice System Context

The criminal justice system (CJS) response to hate crime is coordinated under the Cross-Government Hate Crime Programme, administered by the Ministry of Justice and brings together all relevant government departments and key stakeholders. The Law Commission clarifies that to be convicted of a hate crime, offences must have been motivated by hostility towards an individual or group with a protected characteristic (race, faith, sexuality, disability, and/or transgender identity). No single piece of legislation exists which defines a hate crime, but current legislation used to enforce hate offences includes the Crime and Disorder Act (1988) and The Criminal Justice Act (2003). Although there is not a specific criminal offence of 'hate speech', individuals can be prosecuted using the Public Order Act (1986), the Malicious Communications Act (1998) and the Communications Act (2003). These include offences of inciting or "stirring up" hatred.

The offence of 'stirring up hatred' (Public Order Act, 1986) has until recently only applied to race, religion, and sexual orientation. However, amendments to this legislation mean that it could be used to tackle disability and transgender hate speech in court, particularly if the behaviour is deemed to incite hatred or violence.

The Law Commission (2021) describe that there is currently inconsistency in the way that hate crime

laws treat different characteristics which 'is unprincipled and causes significant injustice and confusion.' They recommend that a single Act be drafted to bring together existing hate crime laws and incorporate the various reforms that they recommend in their 2021 report which are aimed at improving the system for tackling hate. As it stands the law currently treats hate crimes as more serious than offences committed without proven hostility towards a protected characteristic of the victim in two ways: treating them as aggravated offences, and enhanced sentencing. The working definition defined by the Crown Prosecution Service (CPS) and National Police Chief's Council (NPCC) (2021) specify hate crime to be:

> Any criminal offence which is perceived by the victim or any other person, to be motivated by hostility or prejudice, based on a person's disability or perceived disability; race or perceived race; or religion or perceived religion; or sexual orientation or perceived sexual orientation or a person who is transgender or perceived to be transgender.

Both agencies recognise that there have been significant escalations in terms of the challenges faced concerning hate crime – due in part to geo-political events, wider social discourse, and the nature and consequences of online behaviours on social media. Similarly, they comment, that the COVID-19 pandemic has had consequences in terms of scapegoating and stereotyping that has targeted specific communities. CPS and NPCC recognise that hate crimes often have a disproportionate impact on victims because they are being targeted for who they are or perceived to be and that this can impact not only the individual but also the wider community. Hate as one-offs or a related series of events can send reverberations through communities and can reinforce established patterns of prejudice and discrimination. Perry and Iganski (2009) identify that victims are more likely to suffer more severe and longer-lasting damage where the crime was a targeted hate crime.

Both the CPS and NPCC recognise that it is extremely important for hate crime to be investigated and prosecuted effectively because many people do not report hate crime (Home Office, Office for National Statistics and Ministry of Justice, 2013). This is one of the few categories of criminal activity where the police are actively seeking to increase the crime recording rate to reduce the gap between the actual incidence of hate crime and those that are recorded and treated as such. The College of Policing in 2021 states that hate crimes should be treated by the police as priority incidents and consideration given to the most effective response that balances the needs of the incident, police resources available and the nature of any risk. Their new guidance provides clear advice for officers on the steps they should take when responding to hate crime and non-crime hate incidents and highlights the importance of local partnerships. The latter is to encourage relationships of trust between the police and minoritised communities which might build confidence in them working with the police and providing local intelligence to address local hate problems; and promote openness and transparency about how the police investigate hate crime and manage expectations about what can be done. The intention is that this will foster joint ownership of the problem and solutions to it.

3. Northumbria Police's stance on hate

In line with the national strategy on hate crime, Northumbria Police state that their strategic intention is to reduce the harm hate crime causes, increase the confidence of victims, and work with partners to identify and prosecute those who commit such crimes. The National Policing Hate Crime Strategy (College of Policing, 2014), which underpins their practice, aims to work with

statutory and civil society partners to ensure that responsive and accessible services are provided for victims and witnesses. At a local level, this translates into several key partnerships with different statutory, community and voluntary agencies particularly housing organisations, local authority crime reduction services, adult social care, and voluntary sector organisations that focus on victim support and advocacy.

A key challenge facing many local police forces in meeting these strategic partnership aims is that they are likely to cover large areas that are often coterminous with several different local authorities, housing agencies, health authorities and voluntary sector agencies. For example, Northumbria Police work with Newcastle, Northumberland, North Tyneside, South Tyneside, Gateshead, and Sunderland local authorities and more than 15 Housing Associations and agencies alone. Whilst all agencies are working with the same national legislation and policies, how these are applied and prioritised at a local level can differ and this can be challenging for a single agency that works across multiple boundaries.

As will be shown in this report the strongest barrier to realising these intentions is the lack of recognition of hate crime across statutory (including the police) and third sector organisations and its misrepresentation as anti-social behaviour or a neighbour dispute. This is often in response to apparently low-level incidents that either do not reach the threshold of a crime or are difficult to collect evidence on. There is no recognition that the cumulative impact of repeated, apparently low-level incidents can be profound for the health, mental and social wellbeing of those who are victimised by hate relationships.

4. Connected Voice Advocacy: Hate Crime Advocacy Service

Connected Voice Advocacy (CVA) was established in 1996 to support people, help them to be heard

and secure their rights. The organisation is a third-sector agency that provides a range of advocacy services but receives funding from the Police and Crime Commissioner for Northumbria to provide a Hate Crime Advocacy Service (HCAS). HCAS supports those who are 16 or over in Newcastle, Gateshead, Sunderland, North Tyneside, South Tyneside, or Northumberland, who have experienced hate because they belong, or are perceived to have characteristics protected under hate crime legislation: race, religion, sexuality, disability and/or transgender identity.

HCAS accepts self-referrals, but most clients are referred by partner organisations, especially the police. However, if the incident is deemed to not reach the threshold of requiring police action, they are referred by Northumbria Police to Stop Hate UK or Northumbria Victim and Witness Service (previously Victims First Northumbria). Northumbria Victim and Witness Service and Stop Hate UK then refer the victims of hate incidents to HCAS. Clients are contacted by advocates who arrange to meet to discuss their experiences, circumstances and needs. HCAS provides a casework approach to those victimised by hate whereby advocates work to provide and present information needed for people to understand and make decisions about their options, to represent them where needed with partner organisations, and to ensure that their rights are protected. However, as with Northumbria Police, HCAS is confronted with similar complexities when dealing with multiple agencies across six local authorities when advocating for their client's needs.

5. Responding to non-crime hate incidents and hate relationships.

Non-crime hate incidents are one-off acts of verbal, physical, sexual, or emotional abuse motivated by perceived or actual protected characteristics. As discussed, under UK legislation this includes race, religion, disability, sexuality and transgender identity. Reporting hate incidents is

encouraged but does not necessarily lead to a criminal justice investigation or conviction for a hate crime with enhanced sentencing. This can be because the person victimised does not want to pursue charges or because the Police and/or the CPS believe that the threshold of a crime has not been reached or as is often the case, cannot be evidenced as a crime. As many incidents of hate are not criminalised in this way, a considerable proportion, especially when considered ongoing and cumulative, can be extremely harmful but often remain under the radar of help providers.

Hate relationships are defined by their being repeat victimisation by the same perpetrators who live in close proximity to those victimised; and with impacts that are parallel to those experienced under enduring coercive control in domestic abuse (Donovan et al., 2023). In our initial study, over the course of 22 months, 27.5% of the 181 cases referred to the HCAS met this hate relationships criteria.

6. Aims of this research

Subsequently, the two pieces of research reported on in this report were undertaken to find out whether the conditions of lockdown had an effect on hate relationships and to develop a toolkit to enable better, earlier identification of hate relationships.

7. Methodology

Impacts of the COVID-19 pandemic and lockdowns
This study builds on that previous research during a time period that coincides with the COVID-19 pandemic and periods of lockdown. The chosen methodology had to be adapted slightly because of the broader context in which the project was taking place. The impacts of COVID-19 were still being felt during the fieldwork which made recruiting practitioners and clients to focus groups extremely challenging. In addition, the HCAS had two major challenges which undermined their

ability to facilitate the fieldwork as intended. First, there was an increase in referrals without a commensurate increase in staffing for the service. Second, their hate crime advocate left the job, and it took some time to replace them. The following made up the key elements of our methodology:

7.1 HCAS Case Notes Analysis

A case note analysis was conducted by accessing the redacted and anonymised case notes from HCAS during the period 1/4/2019 - 31/3/2022. The time period was chosen to include any service users who had started their involvement before the pandemic lockdowns started and to follow them through beyond the last COVID-19 lockdown. This stage of the research investigated what, if any, impacts the lockdowns had on hate relationships. During the lockdown period, between March 2020 and April 2021 evidence had shown that the incidence of domestic abuse had increased because the conditions of lockdown had exacerbated the conditions in which domestic abuse can occur (Kourti, et al. 2023). We wanted to see whether anything similar took place with hate relationships. Colleagues at Connected Voice Advocacy screened the client notes of 384 clients referred to HCAS during this time using the hate relationships criteria.

The case notes include details of meetings and comms between advocates and clients, incidents, communications with agencies such as the police and housing, updates on progress/lack of progress with resolving hate relationships. The case notes in this study were in a slightly different format than in the earlier study because, during the COVID-19 lockdown periods contact was maintained with clients using emails. This means that there was a lot more data available on each client but also that there is data that comes from the clients themselves and not filtered through the advocates' accounts of their interactions with clients.

7.2 Interviews with practitioners

In adapting the project, rather than bringing practitioners together through focus groups, individual in-depth semi-structured interviews (online and in person) were conducted with 14 practitioners from a range of statutory, local authority and third-sector agencies. These included:

- Northumbria Police and Crime Commissioner Office x 2
- Northumbria Police x 3
- Local authority community safety
- Housing Association x 2
- Housing advocate charitable sector
- NHS mental health services
- Local authority community well-being
- Advocates x 2
- Local authority Neighbourhoods Team

Interviews sought to understand how hate (including crimes, incidents and relationships) is understood by those working in these areas; how those victimised by hate are responded to across relevant organisations; the nature of relationships between partner organisations and the HCAS; and how service provision to those victimised by hate relationships might be improved. In some of the interviews, especially with those working in advocacy there were reflections on the practices of other agencies in response to hate, while in others the focus was more on how they reflected on their own practice in dealing with reports of hate.

7.3 Focus groups and interviews with HCAS clients

To explore experiences of risk and safety in their neighbourhoods, help-seeking and ideas about how to improve service responses, focus groups were organised with clients of the HCAS. The sample selection was facilitated by HCAS who ensured fully informed consent from those invited to participate. One focus group was held with two disabled participants and one session was organised with 4 participants who had been

victimised by 'race'/faith-based hate, although only one participant attended this second session. Both sessions involved a semi-structured discussion of the issues mentioned above. On both occasions two researchers from the project and one advocate from HCAS were present. There were attempts to also arrange a focus group with LGBTQ clients, but ultimately this was not possible. Because this attempt to recruit service users was not very successful the data is not sufficient to warrant its own analysis. Instead, we seek to use excerpts from HCAS clients where it is appropriate to convey their lived experiences.

7.4 Practitioner workshops

Following on from the practitioner interviews and discussions with HCAS clients, we produced a draft version of a toolkit. Essentially the toolkit evolved into a referral guide/flow chart to assist practitioners in identifying and appropriately signposting victims of hate. There was also a clear need to provide guidance for practitioners, not just regarding hate relationships, but also in terms of their understanding of hate more generally. To test the utility of the toolkit, as well as hone it further in relation to the realities of practice, we held two practitioner workshops. One with HCAS staff and one with 8 practitioners including representatives from:

- Northumbria Police
- Northumberland office of the Police and Crime Commissioner (NPCC)
- Local Authorities
- Housing charity
- NHS mental health
- Connected Voice Advocacy

Through the workshops, we outlined the background to the research and explained the key concepts of hate crime, incidents and relationships, including a screening of a film from our previous project (Hate Relationships Film). Following from this was a discussion of possible

improvements and amendments to the toolkit as well as conversations regarding training and the practicalities of possible implementation. A key change to the design of the toolkit is that it should be developed as an app for mobile phones.

7.5 Ethics

Full ethical approval for this research was obtained through Durham University (SOC-2022-03-08T09_19_52-cvrz57) and informed consent from all participants was gained. No names or identifying details are disclosed in this report.

8. Findings

8.1 COVID-19 impact on hate relationships: HCAS Case Notes Analysis

Preliminary identification of hate relationships in the case notes showed a significant increase in the proportion of hate relationships during COVID-19 lockdowns than in the first study. The previous project recorded 182 cases overall of which 50 (27%) were identified as hate relationships (see Clayton et al 2021). In the later time period (1/4/2019 - 31/03/2022), from a total of 384 referrals, this figure was 168 (44%). Thus, there is a strong suggestion that the conditions of COVID-19, as they had for domestic abuse (Kourti, et al. 2023), allowed hate relationships to develop.

In the qualitative analysis, several themes emerged regarding the positive and negative impacts of lockdown restrictions. These included the impact of COVID-19 on experiences of hate; disruptions in health services due to the pandemic; housing delays exacerbated by lockdown conditions; and the effects of COVID-19 on advocacy services.

8.2 Nothing Changes: similar experiences regardless of COVID-19 lockdowns

A clear theme emerging from the case notes is that they told a very similar story of victimisation and inadequate responses from agencies that was told in our first study which took place before COVID-19. In other words that, despite a global pandemic, and significant social changes in response to the pandemic, nothing changed for those experiencing hate relationships. The following excerpt from a focus group participant shines a light on what it is like to be victimised by perpetrators of hate, how determined people who are victimised are to try to seek help and how repeatedly they are let down by services:

> 'And then they start working at you to get you out. And I've seen this, I've lived in my property for ten years and for the past four and a half I have been a victim. But the people that are there, I've seen this tried and tested, it's just what they do all the time. If they don't like you, if you don't fit, they'll get you out. And they do get you out. And [housing association] and the police don't help by suggesting that you move. That's the only thing they can suggest'. (Disability focus group)

In this client's account we can see how hate relationships are experienced over time and perceived to build in purpose to get rid of their victims by forcing them to move. For this client, the perpetrators are helped by services – in this case, the police and the housing association – by them suggesting that they move. The client is not naïve and understands that nothing is going to be done with the perpetrators.

8.2a Lack of recognition of hate

When examining the impact of COVID-19 on the reporting of hate crimes and incidents, we found striking parallels in reporting and responses compared to the pre-pandemic era (Donovan et al 2023). Many victims and

survivors had endured repeated hate incidents over an extended period, often commencing before the pandemic. Similar to our earlier study (Clayton et al 2021), the majority of these incidents were not recognised as being hate motivated:

> '[The client] has lived at the property for 5 years + has had a number of issues with one of the neighbours …. The neighbour has also physically assaulted [client's] sister and mum. There have been lots of reports made to the council and police, but no action has been taken. A court order was put in place against [the] client to block people from coming to his house as he is classed as a 'vulnerable' adult and was at risk of being manipulated by people.' (Case Notes)

In this case, the client had reported persistent complaints made over several years to the police, antisocial behaviour teams, and the local council regarding a neighbour. Additionally, local individuals have purportedly befriended and exploited this adult, effectively seizing control of his home through a process known as cuckooing (see Clayton, et al. 2023; Macdonald, et al. 2024). Consequently, a Partial Closure Order was implemented to thwart community members from utilising his property. In such cases, a Partial Closure Order can prevent people other than the resident to enter the property. This is desirable because if a home is taken over it can become a focal point for antisocial behaviour in the neighbourhood (Macdonald, et al. 2024). While this intervention appears to have curbed the home from being cuckooed in the long term, the victim continued to endure day-to-day abuse from neighbours. This abuse extended to his family, with his mother and sister reportedly subjected to physical assaults by these perpetrators.

As discussed in our previous study, housing and the home is the focal point where hate relationships occur (Clayton, et al., 2023). Despite the home traditionally being perceived as a safe haven from violence, victims/survivors reported that many instances of hate took place either in close proximity to their homes or directly targeted their residences (Clayton, et al. 2021). Too often this repeated victimisation is misconstrued as either antisocial behaviour or a neighbourhood dispute. Yet the data shows clearly that victims/survivors are targeted because of actual or perceived protected characteristics, with neighbours or community members portraying them as 'other' and seeking their removal through ongoing hostility.

Consequently, throughout the case notes, housing emerges as a central issue, with complaints lodged with social housing providers and private landlords. Yet, what clients consistently reported is that incidents are not recognised as being motivated by hate and are most often identified as anti-social behaviour; and that each incident is recorded and treated in isolation rather than any pattern of perpetration being identified. These two factors lead to a lack of response from housing providers as this client, who endured racially motivated hate for over 15 years, illustrates:

> [The] Social housing officer has been allocated to the case- she has said there is no historic records of ASB [antisocial behaviour] reported [the by] client. [The] client is frustrated about this as she has been reporting for 15 years +. There was previously a warning against the neighbour about 10 years ago. [advocate] mentioned that ASB could affect the neighbour's tenancy agreement with social housing'. (Case Notes)

Despite the victim/survivor reporting racially motivated incidents to housing for 15 years, there were no historical records evidencing this. Even when social housing issued an official warning to the perpetrator, these incidents were treated in

isolation, and the ongoing nature of a hate relationship was not acknowledged or monitored. Additionally, housing responses frame the incidents as antisocial behaviour rather than hate motivated by racism.

Consequently, if a victim/survivor request a house move and the incidents are not deemed to pose a serious risk of violence, they will not be prioritised for rehousing. This sentiment is echoed by a victim/survivor of racially motivated hate:

> 'B is the highest priority available in cases of harassment and antisocial/criminal behaviour. Band A is for emergency situations only with an immediate danger to life' (Case Notes)

The victimisation is rarely recognised to be motivated by hate and typically is cast as anti-social behaviour. This means they are not typically categorised as an 'emergency situation' because practitioners do not fully understand the impacts on clients of living with hate relationships. Instead, when victims/survivors, request a move as their only solution are frequently denied this option.

Having access to an advocate means that clients have someone who not only represents their voices but also supports them through the complexities of engaging with criminal justice, health, and housing services. Too often clients report to advocates their frustration on finding that when they re-report to a service about a hate incident, that service says they have no records of previous reports or any case history and having to repeatedly recount the history of their case to criminal justice or other services. As a result, advocates were able to request information from services regarding their response to previous incidents and their approach to recently reported forms of hate. The following is an example of an advocate requesting information from the police for a client who endured a prolonged period of racially motivated hate:

> 'I understand from [client] that there is a very long history of incidents with his neighbour...It would be extremely helpful please, if you could send me a list of reports made by [client]...and actions taken by the police in relation to these, so that I can start by making a timeline and filling in any gaps. I do also understand that there was some talk about issuing [the perpetrator] with a caution in relation to the most recent incidents. It would also be helpful if you could let me know whether a caution has in fact been issued'. (Case Notes)

8.2b Health impacts of hate relationships

> 'And it was going on and on for so long, and I wasn't getting anywhere. Maybe it's time just to give up and try and move on and recover. So that was a really disappointing outcome. Police, that was horrendous. And what was quite ironic, I'm talking almost be coming up in April, it'll be five years, so say four-and-a-half-year period, that I've been basically battling with police. It got to a stage where they came out and did two welfare checks on me, which was so ironic because they were fifty percent to blame for the situation, I was in. And almost a year ago, I was referred to Mental Health Services following the welfare check'. (Disability focus group)

In this excerpt the HCAS client describes their experiences of hate over nearly five years and their belief that the deterioration of their mental health and wellbeing was 50 percent the result of the poor service they had received from the police.

In our previous study, we illustrated the impact of hate relationships on people's mental and physical health (Macdonald et al. 2024). This finding was repeated in this study. Participants reported a

range of health issues which had either developed or deteriorated during their experiences of hate relationships: the development of a heart condition, psoriasis, strokes, anxiety disorders, post-traumatic stress disorder and in some cases psychosis. It has been widely reported that lockdown conditions resulted in an increase in mental health conditions across the general population (Daly et al, 2022). In this study, mental health was particularly affected not only by lockdown conditions but also experiencing ongoing daily/weekly experiences of hate. This is illustrated by one victim/survivor who was targeted because of her disability and sexuality:

> 'I've had to call the Doctor who has opted to prescribe me Diazepam for Anxiety because of this. I'm a vulnerable adult, and the legal tenant … however I cannot say the same of [the perpetrator]. My GP is writing a letter of recommendation showing a decrease in mine and my partner's mental health as a result of these events.' (Case Notes)

The inaction of housing and other services has a profound impact on the mental health of participants, a burden exacerbated by the challenges of COVID-19. During lockdown, services ground to a halt, particularly social housing responses to hate as explained by one victim/survivor of disability hate:

> I can't really cope at all with what I'm subjected to, everything seems to be breaking down, and [I] have struggled since the first lockdown to play the evidence back as there's no escape from this hellhole currently, [I] can't even escape into the countryside. (Case Notes)

8.2c Poor services and practitioners who discriminate

Some victims/survivors suggested that access to health services was poor even in pre-pandemic times, particularly concerning mental health issues. One client stated, '*I don't get help of* [sic] *doctors, nothing!*' (Case Notes). Another suggested their experiences of discrimination continued when accessing health care concerning gender realignment. This client had experienced ongoing hate due to their gender identity. As the Advocate reports:

> '[the client was] on the waiting list for Gender clinic - appointment not due until next year. Has a lot of questions and confusion but no one will listen and does not know who to speak to. Feels treated differently by GP and medical professionals - Thinks there is something in his notes that makes them treat him differently.' (Case Notes)

Despite the Partial Closure Order awarded to a client's home that had been believed to be cuckooed, no substantive action was taken to prosecute the offenders and no practitioner recognises that the victimising behaviour is hate based. On the contrary, the client reports feeling that he has been unfairly targeted by the police as a problematic tenant following the implementation of the Partial Closure Order:

> 'A complaint was made against a police officer who used this court order 'as an excuse' to harass [client]. The officer called [client] 'thick' and 'stupid'. … [The client] is now feeling more confident reporting to the police but wasn't for a long time after this. [The client] feels they have discriminated against him and don't treat him like an adult due to his disability. … He believes he is being targeted due to his disability.' (Case Notes)

These notes, not only illustrate an example of a prolonged hate relationship experienced by the client, but also an inadequate response from the police which is interpreted by the victim/survivor as another hate incident. In this instance, rather than the police recognising the victimisation as hate motivated and offering protection, the victim/survivor perceived the police officer's actions as harassment.

Several participants highlighted specific challenges with private landlords, noting that many seemed apathetic toward the behaviour of their tenants if they were the perpetrators of hate incidents. Despite victims/survivors reporting perpetrators to their private landlords, these landlords often displayed indifference or dismissed reported experiences as fabricated or mere neighbourhood disputes. Some private landlords, acknowledging that their tenants were involved in either antisocial behaviour or hate-motivated incidents, opted not to pursue eviction due to the associated costs. The following is an example of this:

> [The perpetrator] is clearly in breach of his tenancy agreement, but his landlord has refused to pursue this because of the costs of taking legal action. As a result, there has been a sustained history of harassment, abuse and ASB … [the client feels] *completely unprotected* as no one is holding the landlord responsible for the behaviour of his tenant. They have repeatedly complained to the landlord and their landlord's letting agent. They have complained to the Property Ombudsman, and they have reported incidents to the police, leading to [the perpetrator] being convicted of homophobic abuse. (Case Notes)

8.2d Tactics by perpetrators to undermine help-seeking of clients

8.2d (i). Counter Allegations

This study, in common with our previous study, has found that in cases of hate and hate relationships there is very little knowledge and expertise evidenced among practitioners about how to respond to and address alleged perpetrators. This is shown in two ways, the first of which is where perpetrators counter allege that the clients are in fact the perpetrators. This is a common tactic when housing providers do intervene: perpetrators deny everything and make a counter-allegation against the client. This effectively slow down housing's response to address the ongoing hate relationship and constrains their ability to implement meaningful interventions (Donovan et al 2023). This is illustrated by one victim of racist hate:

> 'There has been some 'low-level' issues linked back to the neighbour, but the neighbour has equally made their own counter-allegations against [the] client, which means it has become one word against another.' (Case Notes)

8.2d (ii) Threats to Clients to withdraw complaints

The second way that services fail to appropriately address perpetrators is in the latter being able to threaten clients unless they withdraw complaints. Not all victims/survivors feel empowered to report perpetrators to services due to perceived threats of violence. As one person stated, '*he [the client] feels he has been targeted as he complained about these people. Some of them are in prison and some are outside*.' The fear of reporting, compounded by a lack of action from agencies, led some to refrain from naming perpetrators. When help providers do not recognise the victimisation as hate motivated and do not respond appropriately to clients asking for help, perpetrators threats leave clients feeling isolated and unable to act.

8.3 Negative impacts of COVID-19 on hate relationships

8.3a COVID-19 as motivation for hate

While most cases had started before the pandemic and persisted through COVID-19 lockdown restrictions, a significant number of cases also emerged during the pandemic. It is challenging to definitively conclude that COVID-19 lockdown restrictions directly caused the increase in hate crimes during this period. However, there is evidence suggesting that misinformation about COVID-19 contributed to the targeting of certain marginalised communities due to the spread of the disease (Clifton-Sprigg, et al. 2022). In several instances documented in case notes, racially motivated hate appears to be rooted in the belief that COVID-19 was spread through immigration and/or associated with specific racially minoritised groups. An example of this is evident in the experience of one victim/survivor, where racially motivated hate was justified based on the spread of COVID-19:

> 'She was at her front door … talking to a friend when a white male in his mid-30s approached them. He began shouting racist comments towards them and blaming them for the spread of COVID-19. The client was extremely distressed and called the police. The perpetrator then threatened to burn her property down with her children inside. Soon after he left. The client believes he lives [locally]. Police came out and took a statement. They told her incidents happen like this all the time. Police said they would be looking to arrest and would inform her. She still has not heard back.' (Case Notes)

As evidenced by this case note, the spread of COVID-19 and racially motivated hate are intricately linked, serving as justifications for abuse (Ittefaq, et al. 2022) that can extend to threats to life. It also highlights the lack of, or delayed response from, police, housing authorities, local authorities, or adult services. Despite the eventual

prosecution of the perpetrator in this case, the victim/survivor received no response from the police until HCAS intervened. It was not until an advocate supported the victim/survivor that a criminal justice response was initiated. Nonetheless, this interaction left the victim/survivor fearing for her safety and that of her children.

8.3b Increased waiting times for responses and cancellation of interventions

The lack of timely responses from police and other agencies during the COVID-19 lockdown restrictions emerged as a significant problem. While some victims/survivors acknowledged the strain that police, housing, and health services were under, COVID-19 seemed to have a detrimental impact on interventions aimed at preventing or mitigating ongoing experiences of hate endured by victims/survivors. As one Advocate recorded:

> 'I have spoken with the family on a number of occasions and explained the waiting time but also stressed due to the current COVID-19 situation it is taking the council longer to prepare properties to re-let as works need to be carried out using a social distancing process therefore only one member of works is able to enter a property at one time. We have also been advised that all homeless people will take priority this is something the government has stated. Our priority is keeping the family safe at the moment this can only be done from a distance where we keep regular contact.' (Case Notes)

As demonstrated in our previous study (see Clayton et al 2021), victims/survivors often show initial reluctance to relocate from their homes as a response to hate relationships. However, after a prolonged period of hate, individuals frequently

reconsider and requested a move (Clayton, et al. 2021; Donovan et al 2023). However, the pandemic made it more difficult to be re-housed. We also note that whilst this might be an appropriate solution for the victim/survivor in the absence of the hate being stopped, it also sends a worrying message to perpetrators that their behaviour can continue with impunity.

COVID-19 lockdown restrictions also caused further disruption to people's help-seeking for physical and mental health support. Many individuals reported it was almost impossible to access their GP which is the gateway into other health services. Even if participants had previously been accessing services for physical or mental health issues, these services were significantly disrupted during lockdown restrictions (Scherer et al, 2023). This is illustrated by one participant who before accessing HCAS had experienced an ongoing hate relationship for over 19 years. She and her partner were targeted due to her sexuality and having a disability:

> 'I've tried my GP, but he says there was nothing [available]. MIND said I no longer fitted their budget restrictions, [I've] spoke to an NHS psychotherapist twice in January and they said their short-term 6-week interventions weren't really suitable for what was going on in my life, so they recommended Victims First, who then referred me back to MIND who again said they had nowt. Victims First then told me about North East Counselling Services an umbrella organisation I think but they had nothing. … the NHS have said I can return there if there's nothing, but… I'm hoping there will be something.' (Case Notes)

As this victim/survivor illustrates, lockdown restrictions caused a significant disruption not only to access but also, in the case of MIND, due to new budget restrictions.

For many victims/survivors, GP letters were crucial for use as evidence of the impact of ongoing hate. Yet some indicated that they must pay up to £25 to their GP to write a letter which was an extra expense some struggled to afford. Yet the key barrier to obtaining a GP letter was not the cost but getting access to their GP during lockdown conditions. As one client said, the '*GP is more than useless. I can't even get a simple appointment to see a doctor for the migraines I have been having let alone help with my mental health*' (Case Notes). The added stress of this for some waiting for rehousing is clearly articulated in the following:

> Regards to my homelessness application... I am starting to panic, and this is triggering my anxiety severely, also from my bids as soon as they are up each Thursday morning. Even though I am in the top 3 places each time I am still getting relegated to the back of the queue. This is making me worry incessantly because if I don't get the apartment mentioned above, there's a chance I won't be getting anything soon and I am starting to feel nothing has changed. Since none of my bids I feel are not being taken seriously and I am still being a victim of repeated crime, the latest incident was today.' (Case Notes)

Many victims/survivors encountered significant hurdles when reporting incidents to social housing, especially during COVID-19 restrictions. A considerable number of victims/survivors expressed difficulties when reporting hate incidents to their own or the perpetrators' social housing agency. Many recounted repeatedly calling the helpline without their complaints being addressed or receiving a return phone call to acknowledge their grievances. Similar challenges were encountered when sending emails. Even when social housing providers committed to responding within a specified timeframe,

especially during lockdown restrictions, many reported receiving no response. Consequently, victims/survivors grew increasingly frustrated with their housing agencies. This frustration is exemplified by a victim/survivor of racially motivated hate:

'Feels frustrated that [social housing] have not taken further action as neighbour has breached tenancy agreement but does not feel that they will be responsive. [The] neighbour is now less explicitly harassing them but is still doing various small things e.g., making noise when they go outside in the garden, throwing rubbish into their property' (Case notes)

Even when relocations had been agreed, the impact of COVID-19 lockdowns meant that moves were often cancelled due to the property not being ready on time. This is evident in the following email between an advocate and a housing provider on behalf of a client who had endured over one year of racially motivated hate:

'Please could you let me know why the [client] family's move was cancelled again on the planned move date, yesterday. I am the family's Hate Crime Advocate. This is the third cancellation. The first was cancelled the day before and the next two were cancelled on the day.'

Although clients were informed of the cancellation, many reported not being given a reason for the cancellation of the move. It was not uncommon during lockdown restrictions and later in the pandemic for clients to experience multiple cancellations while waiting to move. This was stressful in its own right, but within many of the victims/survivors' case notes, it is documented

that they were still experiencing ongoing hate during that period.

8.3c Forced into close association with perpetrators

For individuals and families residing immediately next to a perpetrator, lockdown restrictions resulted in being ensnared in a cycle of hate during the lockdown period. Perpetrators whether adjacent, above, or below, victims/survivors, often persisted in their hate-fuelled interactions throughout lockdown. Consequently, being confined to their homes and living in close proximity led to a relentless cycle of abuse. As reported by one family during one of the lockdown periods:

'At the start of lockdown abuse has started again against her children. Her daughter is 15, her son is 10. while [client] was at work her daughter was on the balcony, neighbours' kids from an adjacent L-shaped block were shouting racial abuse towards children, and then their parents joined in. [client] daughter called the police who came out, however, nothing has been followed up.' (Case Notes)

8.4 Unintended positive impacts of COVID-19 lockdowns

In a small number of cases responses to hate crimes and hate relationships during COVID-19 lockdown restrictions were positive. Indeed, several victims/survivors reported that COVID-19 lockdown rules often facilitated the police to restrict the movements of perpetrators to their homes. Secondly, emergency legislation granted police additional powers, enabling new forms of intervention when perpetrators breached COVID-19 lockdown conditions (Sheldon 2021) while engaging in hate relationships.

Some clients reported that the lockdowns had brought a reduction or even in some cases a cessation in hate relationships – though these were short-lived and resumed once lockdowns were lifted they provided some respite for clients during those times. However, for these participants, the prospect of reverting to the same level of abuse and violence they endured before the pandemic had a profound psychological impact on both individuals and their families as lockdown restrictions began to be eased during 2020.

8.5. Impact of COVID-19 on Advocacy Services

'My feeling was that I'd knocked on so many doors. I banged on so many doors. And I was getting nowhere. But I was of the impression, well, if someone comes along, 'my name is Joe Blogs, and I'm a hate crime advocate', they're less likely to be like humiliated, or disregarded, or ignored. And that was my hope that all these different authorities are less likely to not listen or to not respond to someone with a title of hate crime advocate than they are just for little old me who has tried her absolute best over a prolonged period to highlight and raise of awareness of what's been going on. And you have run out of avenues of where to go'. (Disability focus group)

This service user provides their sense of hope in how an advocate can realise their needs and act in their interests after prolonged attempts to get other services to response appropriate to their predicament.

8.5a Naming Hate
Running through all of the case notes is the significant confusion amongst practitioners in partner agencies and, sometimes, clients themselves, concerning the naming of victimisation as being motivated by hate. All too often incidents, and in some cases, patterns of incidents, were categorised as antisocial behaviour, or a neighbourhood dispute. The HCAS advocates were important here in supporting clients to understand these different categories and in some cases they were able to challenge cases initially categorised as a neighbourhood dispute by services and point to the hate motivation. As we see in the case notes threaded throughout this report, there is also evidence of advocates challenging services regarding the classification of an incident. These challenges extended not only to health and social care services but also on several occasions, to the police themselves. An example of this can be seen in the case below, involving a client who had endured ongoing homophobic hate.

'I understand that [police] attended the incident in September…when the neighbour stood outside [client] property staring into his living room windows on four occasions in one night, which he found extremely intimidating. Again, the client believes (and informed you) that he believes that the motivation behind this is homophobic. Please would you re-code this report as hate-related?' (Case Notes)

8.5b Explaining the harm, risks and impacts of hate relationships
During COVID-19 lockdown conditions, while victims/survivors reported services as being slow to respond, there were numerous instances where advocates intervened with those services to highlight the seriousness of a hate relationship and its impact on their clients. By raising awareness of the impact of hate, advocates facilitated joint meetings primarily between housing and the police. In some cases, these meetings also involved other third-sector organisations or statutory services. From a victim/survivor's perspective, without access to HCAS, these interventions would

either not have occurred or would have excluded the victim/survivor from the process.

> 'Whether or not they are treated as hate crimes, [client] is genuinely in fear of her life as a result of the repeated threats of violence (and indeed murder) by [the perpetrator] towards her. She is adamant that [the perpetrator] lives [in the neighbourhood] (which I believe is his mother-in-law's social housing tenancy). I would be grateful if you could let me know what steps are being taken to protect the client and her family. Might a joint meeting be helpful to discuss the options?' (Case Notes)

Service user voices should be central in all services responding to their requests for help (Macdonald, et al. 2021) and our analysis suggests that it is HCAS that ensures the voices of victims/survivors are listened to by multiple services within the research.

8.5c Advocates clarifying legal processes
Although support through house moves is a significant issue for victims/survivors, case notes also reveal that many practitioners and clients are confused about the legal processes concerning the reporting and responses to hate, as well as scheduled house moves. In a small number of cases, advocates also illustrated how services, or in one case, employers, were not fully considering the ramifications of hate and linking this to equality legislation (EA 2010). Thus, HCAS offered a vital service concerning access to legal advice for their clients:

> 'You mentioned yesterday that you lost your job because of the effect on you of the Hate Crimes. Is there any chance that you could contest this decision on the grounds that your employer did not take into account the effects on your mental

health of the violent crimes? Just a thought. I can help you find some legal advice if you want to consider this.' (racially motivated hate, Case Notes)

Although all services were significantly affected by COVID-19 lockdown restrictions (Scherer, et al. 2023; Macdonald and Wilder 2024), particularly having an impact on face-to-face contact between clients and HCAS advocates, the data illustrates that advocacy services were able to maintain the level of service they offered in pre-pandemic times. Thus, advocacy services offered a vital service, ensuring that clients' experiences of hate are recognised as hate motivated, victimisation, that their experiences were taken seriously, and that some form of intervention was forthcoming.

8.5d Impacts of staff absences on clients
The HCAS was impacted by COVID-19 by their main hate crime advocate leaving for another job and, because of the timing, during lockdowns, the difficulties they had in replacing her. As one client explained:

> Draining. That's the keyword. And then you've said all that, and then you feel, personally, I feel totally wiped out. And then you build your hopes up and then this advocate either gets back in touch and makes promises, and like you say, disappears. Or you've heard nothing for weeks and you're chasing it up, and then you're allocated someone else and you've gotta start again and you have gotta relay all this traumatic information again and you build your hopes again. (Disability focus group)

Waiting for responses, having to repeatedly give your account to a new person, feeling let down by services is a common experience of clients before they arrive at the HCAS so it is perhaps even more keenly felt when the same thing happens with the

HCAS. This kind of comment is rare but nonetheless provides an insight into the impacts that apparent inaction and lack of care of services can have on those who are victimised by hate.

9. Practitioner interviews

9.1. Identifying and understanding hate

From the practitioner interviews, it was clear that too many professionals across statutory and third-sector services did not fully understand legal and/or policy definitions of different kinds of harm, for example, how to differentiate between anti-social behaviour, neighbourhood disputes, and hate motivated victimisation, the seriousness and extent of hate and/or the dynamics of power involved in hate relationships.

Whilst there was a general awareness of the protected characteristics, particularly racism, homophobia and disablist hate, the significance of these other than for matters of criminal justice, the police and community safety professionals was not widely recognised. However, some practitioners also thought, mistakenly, that groups such as Goths and Emos, misogyny, alcohol dependency are covered by hate crime legislation.

It was evident that intersecting characteristics can be missed too. In police recording of hate incidents/crimes, there seems to be a lead characteristic identified and recorded and "secondary" characteristics may not always be recognised. This is problematic for understanding the complexity of hate experiences as this local authority representative commented:

> '...in the crime recording system, it doesn't allow for, it allows for each characteristic to be counted separately. So, a person could be putting down intersectional characteristics however, it wasn't going to be counted as that, so we didn't get a figure of these ones are race and faith or these ones are race and

disability. We just got what and how many times each individual characteristic appeared. So that was a big problem. We lost that in the police data...' (Local Authority)

When speaking directly with those from social housing, there was evidence that the default response is suspicion when somebody reports hate, as if those reporting are not trustworthy. This concurs with our previous research that identified clients' perceptions that service responses were primarily of suspicion and disbelief (Donovan et al 2023):

> 'I mean it, it depends. It's like I think the first one I ever had was when I was in [name of geographic area] and it was a...The lady was *claiming* it was like a religious hate crime. She was a Muslim and she *claimed* that people were burning copies of the Qur'an in the front garden'. (Housing Association)

Alongside doubt there was also evidence that practitioners downplayed the extent to which hate motivated victimisation takes place. One housing association representative, for example, suggested that in their experience of working in one of the region's cities for 13 years, they had not witnessed any hate-based incidents. More recent incidents were attributed to the changing demographics of the neighbourhood in which they worked with an assumption that it might be race hate they hear more about:

> 'So, I think what you find more is like over the years, we are now getting people from different backgrounds in the housing and within [city]. But I mean... I've in my area there are..., it's quite new for people from a different background, if you're coming in my area. So, this is the first time I've ever experienced anyone

who's, you know, being a victim of hate crime.' (Housing Association)

Another senior representative from the Neighbourhood Team of a local authority in a different part of the region also suggested that amongst the many anti-social behaviour-related incidents that they respond to annually, approximately 10 would be identified as hate-related. Given the research we have previously conducted on third-party reporting of hate in the region (Clayton, et al. 2016; Macdonald, et al. 2017) these seem to be a particularly low estimation.

An interviewee from a housing charity, also highlighted that it was anti-social behaviour that is more common than hate, although they reflectively acknowledged that agencies, including their own, could improve at identifying where discrimination and hate figured *within* those incidents:

> 'I don't think we see a lot of it. It may be kind of underlying and it may be that the client doesn't recognise that it comes from a place of that kind of hate. And I have had a case where it was racist hate that they had to flee from. This is probably a lot of cases where we're haven't necessarily picked it up...most of the cases it's not always obvious to us and we'll maybe need to get better at picking up on it, are we seeing discrimination here?' (Housing charity)

It was clear that there is a level of misunderstanding and misidentification of hate motivated victimisation that might be the result of practitioners not asking the right questions. On occasion, accounts also demonstrated a misunderstanding of how forms of discrimination operate, in terms of power dynamics. For example, in interactions between neighbours, where

cultural differences become racialised, these are not recognised as racial because of a lack of reference to bodily physical differences. In the following excerpt, we can also see those targeted as being at fault through their own 'lifestyle choice'.

> 'Like sometimes it doesn't even come down to like the race. I think the race, their nationality has been mentioned, you know and not in the right way, but I think it's like, it's like lifestyle choice as well that they don't agree with'. (Housing Association)

There was a widespread tendency and admission by some, that hate is often misidentified and confused with anti-social behaviour.

> 'We would get a lot of ASB that would be a lot of it hate that was being mislabelled as an ASB. And that was one of the big issues here'. (Local Authority)

The danger here is that it may result in misrecognition of the distinctive impacts of hate as well as driving inappropriate responses.
Although not confined to the housing sector, this issue seemed to be especially apparent in the experiences of interviewees working with those in social housing.

> '...my experience is working with the housing association that I'm working with currently, I feel they didn't recognise hate crime as a hate crime. I think it went down as anti-social behaviour. Rather than hate crime you know. But obviously when I've explained to the housing company, that it is hate crime because of this and you know, they said, oh well, we've just... *it's antisocial behaviour as far as we're concerned*.' (Advocate).

Practitioner responses seem to suggest that there exists a hierarchy of harms and that, for them or those they work with, anti-social behaviour or neighbourhood disputes are the preferred category for victimisation they receive reports from. This is especially the case when harms are viewed as non-criminal, low-level and thus 'just' anti-social. In the following example, this mental health practitioner comments on how housing associations in particular are prone to minimising what we would see as hate relationships to the status of neighbour disputes and even 'gossip':

> 'I'm not exaggerating. It's very much every single time it's sort of reduced down to the lowest sort of thing. like 'oh people are just gossiping' and I'm like no, it's harassment. It's very much. It's awful. Like it's leading to inciting hate and it's getting to a point that everyone hates the person and then it starts being physical and like and that's partly because housing associations really do reduce it down to uh, 'you can't stop people gossiping.'' (Mental Health)

This inability to distinguish hate or to acknowledge when ASB and hate become blurred, was recognised by some participants, especially in more senior positions. Sometimes this was attributed to staff avoiding the work involved, including form filling, and sometimes it was attributed to a lack of awareness of hate-motivated behaviours. The impact of home working during and post-COVID-19 was also seen as providing challenges for being able to oversee staff work on a day-to-day basis, so some managers felt this distinction might then get missed.

> '...it gets lost in amongst ASB. It needs to be differentiated from that. It's not the same. It's not the same impact, it's not so you don't see another Fiona Pilkington.

That's often held up as like the extreme example of a ASB going wrong. No, that's the extreme example of hate crime going wrong.' (Police)

The evidence of practitioners, including some senior management interviewees, suggest that there is a significant training gap for frontline practitioners, including police officers about what hate motivated victimisation is, what questions might be asked of clients to better understand what is happening and the impacts of it on themselves and/or family and the importance of recognising and naming hate.

9.2 Reflecting on hate relationships

Unsurprisingly, given the work that we have been doing in partnership with Connected Voice, those working in advocacy roles had the clearest awareness and understanding of the distinctive character of hate relationships as a form of hate which often goes under the radar but is common.

> 'Yes yes, it is a very regular a very regular occurrence. Yeah. Yeah. You know, every time I'm speaking to them [their client], then they report that something else has happened and you know, and that's probably, three out of five of the people I'm working with.' (Advocate)

During interviews with practitioners hate relationships were described and interviewees were asked for their reflections on the usefulness of the concept. There was recognition from some interviewees, such as this Community Safety lead, of the significance of what is identified as lower-level incidents, especially in terms of the cumulative impact that these can have when they take the form of hate relationships:

> '...we don't tend to get gangs of people beating people up and leaving them for

dead. We don't get a huge amount of that. I mean, I guess it's positive in one sense, you know, but it's still that low-level rumbling that just makes life intolerable for people.' (Community Safety Lead)

However, in other interviews, it was apparent that hate relationships, whilst seen as an interesting and useful way of thinking about enduring low-level forms of hate, were not well recognised or understood. When it was explained, there was sometimes a tendency for interviewees to give examples about individuals known, particularly in the nighttime economy, for being persistent offenders such as a person known to the police to get drunk, and regularly shout racist slurs at taxi drivers or bouncers. In other cases, examples were cited of victim/survivors regularly racially targeted by a range of individuals, but as one-off incidents. These are all concerning incidents, but do not represent hate relationships.

9.3 Responding to hate

Those victimised are characterised in our interviews with practitioners as often being failed by a system which comes across as uncoordinated and not always victim centred. As with our previous research (Clayton et al 2021), this includes evidence of those targeted not being believed, taken seriously or reports being minimised. This is especially the case for incidents and relationships which fall under the evidence threshold of criminal behaviour as the representative from the Northumbria office for the Police and Crime Commissioner (NPCC) explained:

'The victims are in a situation where they feel they're not being believed and the feel of all they have to get [is] the evidence and sometimes they're told we can't do anything with this.' (NPCC)

This experience seems to be exacerbated for those not seen as trustworthy or credible witnesses, primarily due to a learning disability, cognitive impairment, or long-term mental health condition (Macdonald et al., 2023):

'This individual, who I'm talking about has found the police not very responsive at all and you know he's doesn't feel he's very happy with the outcome, the way they've investigated and possibly even the way he's being tracked. And you know, he has learning difficulties himself. So, he takes longer to process information. Information has to be bit, you know, in bite sized chunks. And I think sometimes there's not that level of understanding from not just the police, but other agencies.' (Advocate)

There was a lack of appreciation of the wider impact that hate had on the victim's family, with implications in terms of mental health, physical safety and everyday mobility. This included where cases were dealt with concerning individuals rather than as a family.

'It tends to be the victim it, it tends to be the victim. And again, we're governed and culturally by this idea that, you know, once you're over 18, broadly speaking, you're over 18. We're not gonna tell anybody about the offence that involves you. You are the victim. You are the contact but hate crime can, is probably one of the ones that does merge into the family a little bit easier than other offences.' (Police)

The picture in terms of processes of reporting and referral pathways was uneven and inconsistent. This largely depended upon the field in which the interviewees were working – with limited knowledge beyond those fields (apart from those more familiar with multi-agency working). Some

participants emphasised the role of the Police or if those victimised did not want action but someone to talk to – Stop Hate UK. Others working in housing emphasised 'in-house' victim support services as well as social services safeguarding processes if children or older people were involved.

Clients are referred to HCAS via the police and then Victim Support. Mental health Advocates are accessed through the NHS but may work in partnership with HCAS and the police if a client is experiencing ongoing hate. Yet what becomes clear is that although best practice encourages multiagency working, in reality, many services are working in silos. The blurring of ASB and hate mentioned above is further compounded by a sense expressed by some that hate was not their domain of responsibility. For example, the Neighbourhood Team within one local authority saw their role as primarily dealing with anti-social behaviour and hate was something to be dealt with by the police. Other participants noted how hate is not the focus of the work of those first responding to incidents of 'neighbourhood dispute':

> 'I mean in some places like the anti-social behaviour teams are pretty good. But I think probably that's their focus anti-social behaviour probably rather than the hate crime element of it but then people are just so relieved to see something happening'. (Advocate)

Most practitioners look to the police to take the lead in matters of hate and to lead on partnership working around these issues, where there is a presumption that hate is a matter for the criminal justice system. However, in the main, the police response tends to non-recognition of hate, an inability to evidence hate, and/or decisions that what is being reported does not reach the threshold of a crime:

> 'Because I mean everybody's kind of stretched and I think police are supposed to be the last reach uhm I mean the last the last option basically, aren't they? The police... so when other partners haven't got the resources to deal with, it's often passed to the police so they kind of. well, the police just want to kind of deal with it I guess the best way they can but with the limited resources they've got.' (Advocate)

However, we also know the police are increasingly distancing themselves from matters not considered to be their domain, including non-crime hate incidents. Such tensions result in a lack of ownership and oversight of these issues more generally.

Where meetings are held to discuss the needs of particular individuals, it seems that those victimised are not invited or involved in discussions of their case and possible outcomes. This mental health professional, for example, discusses this as being problematic, especially that notes from the meeting are not shared with clients:

> '...the majority I want them to be there to hear it all, say it all but the majority of them are certainly not invited, so I'll go on their behalf. Yeah. And a lot of the time you can't share the meeting notes.' (Mental Health)

Attention was drawn to the need to act holistically when responding to questions of hate in ways that draw in multiple agencies in a victim-centred manner beyond the criminal justice system.

9.4 Training

Training is identified as crucial to improve practitioners' knowledge and understanding of hate, relevant legislation and local processes for responding to hate to challenge the tendency to

blame the victim and promote more consistent responses. There seems to be a need for training that helps practitioners recognise distinctions between different forms of harm, but especially to more appropriately respond to those incidents that aren't above the threshold of a crime:

> '...I think we need consistency in training, and we need consistency and how to report and how to record and when I think about crime there is a very clear way... there are, you know, there is legislation. This is how you will record a crime. We don't have that for anything that falls below the criminal threshold. So, I think we really need to look at tightening the model.' (NPCC)

Poor practices of gatekeeping and triaging were identified by some local authorities, and this was linked to inadequate knowledge and training. For example, this was identified when multi-purpose call lines were being used to deal with a wide range of issues:

> '...we have a particular problem with one council at the minute where like their call centres are kind of expected to answer all of the calls...Like deal with all of the incoming calls are coming in and try and like sort of deal with them in that one phone call, not transfer them to like the right department who might be a bit more knowledgeable and might give them a bit more help. And so, these people who aren't as well trained or are reading notes on the system, interpreting them wrong, getting it wrong.' (Housing Charity)

One potential avenue to better respond to hate incidents and relationships is the enhanced use of the 'Community Trigger'. Community Trigger, otherwise known as the ASB Case Review can be activated if there have been 3 incidents (or more) within 6 months. This is designed to give the victim,

the right to demand that agencies deal with persistent anti-social behaviour and results in a multi-agency case review. This is significant because there is recognition of the impacts of multiple cumulative incidents, but also because of the multi-agency response that might better meet the needs of those who are being targeted. However, amongst our interviewees understanding of this process and its use across all areas of the region was uneven.

> 'There's the community trigger and I don't think that's something that gets used. It's not something I'm really familiar with, but that may be something that would be helpful that involves all these kinds of multidisciplinary team meetings or something where just everybody kind of gets to recognise that this person needs support. So how is it going to be delivered?' (Housing Charity)

There is then a need for training on the Community Trigger as well as a need for consideration of its wider use and application to matters of hate, not just ASB.

9.5 Perpetrators

Perpetrators are identified as generally 'missing' in discussions about responding to hate and there is a clear call for more effective interventions to address their behaviours. Currently responses are limited to piecemeal localised police intervention and some work around mediation and anti-social behaviour. There was a call for some kind of education for perpetrators:

> And that's the sort of thing that we need to be able to approach for people willing to take part in perpetrator education. I think it would be a very good idea. It would help to educate and deal with a lot of community tensions as well. And so

that would be something that would be really good, definitely.' (Local Authority)

Others pointed to the interventions available for domestic abuse perpetrators that also address the needs of the perpetrators themselves and suggested a similar approach might be appropriate for perpetrators of hate:

> '...if you can get courses for perpetrators of domestic abuse, you can get courses for people who I've got severe lack of understanding of other cultures and faiths and it's definitely worth it. I am not that aware of a structured network organisations for that. We've very much relied on again, the Community engagement group, or the police going in and having low hyperlocal interventions, or some of the charitable organisations taking a perpetrator under their wing and saying right we'll have a chat with you. We'll sort you out. We'll help you understand. And that's not very often. (Local Authority)

There is some discussion about the importance of not making things worse for those victimised and how this concern can hamper interventions that might address the behaviours of perpetrators. For example, in this excerpt below, a mental health worker discusses how one Housing Association discouraged those victimised from evidence collection on the basis that it may further provoke these behaviours.

> 'Yeah, then the environmental health, they've said that they would put up a camera, but that they would need to inform the residents why the camera was going up...So, then the Housing Association said, 'well like she has to know that this is just gonna cause it to get worse and so, if she wants to do that then

that's up to her.' And it all seems very much 'Well, if she complains about people she can't be, she can't be surprised when people don't like her', and it's just things like that. It's very unfair. They seemed to blame her for a lot for things.' (Mental Health)

There was some discussion regarding the role that non-criminal justice responses might play including restorative justice or probation responses to perpetrators, but there is a lack of knowledge about what either might involve and concerns about the victimised and consequences for them.

> 'I am right in thinking that I think that other forces may use community resolutions or some kind of reparatory remedy when it comes to hate crime. Northumbria, unless I'm totally wrong on this, we don't really do that side of it because of the aggravating factor, I am conscious of other forces too. And I think one of the reasons for that is ultimately because of the far-reaching effect it has on people long term with anxiety, with stress, with and the connotations of being a victim of hate crime, you know?' (Police)

9.6 Housing

Practitioner interviewees agreed with our analysis of the case notes that housing is central in experiences of hate, particularly concerning hate relationships, where incidents are often concentrated in and around the home space. Indeed, some practitioners mentioned that the house itself becomes the target. This can happen where a house or flat has been modified to accommodate disabled people so a disabled person targeted for hate might be relocated but another disabled person is moved in and the cycle

of hate begins once again, with existing perpetrators targeting the new individual or family.

Housing-based resolutions – such as community-based resolutions, housing allocation and banding processes, housing decisions, and moving people away from the area - are all significant routes away from victimisation. However, as we have also seen in our previous research, there are several problems with this, particularly the disproportionate emphasis on moving those victimised rather than perpetrators and the fact that those victimised might not want to move.

For those – either the victimised or perpetrators - living in private housing, eviction or moving is much harder to achieve if at all, highlighting the differential rights available to those victimised based on housing tenure.

> 'Practitioner: She was an owner occupier ... So yeah, we prosecuted her. But it was [social housing] next door and they moved them out and got them another property.
> Interviewer: So, in effect, the family that been targeted were the ones that had to move?
> Practitioner: That tends to be the way things go, unfortunately'
> (Neighbourhood Team NCC)

The difficulties of using evictions because of the requirement for particular types of admissible evidence can result in those victimised being moved rather than the perpetrators:

> 'I always go on what them actually want to do. Because to go to see the perpetrator, you know, we can if them wanted us to move them, them are easier to move, but like for the perpetrator, they would have to go through a long process. You know, it would have to be proven. It would have to be, you know,

police involved. It would be a really long process to move or evict'. (Housing Association)

There is evidence here and in our previous work, that the enduring character of hate relationships leads to those victimised being exhausted and albeit reluctantly forced to move as the only possible resolution. It can feel that the person being victimised is the one punished because they lose localised connections and the proximity of schools and work, which add further levels of disruption to their lives:

> 'Yeah, absolutely. Because you know, especially as well, I think if these people have got children. Because the child goes to school in the area, child's got friends in the area. I think I feel it's important that the perpetrator is, you know, is kinda brought to justice or moved themselves rather than the person who's shall we say is the victim?' (Advocate)

9.5 The broader political context

Most of those who report to HCAS live in more deprived neighbourhoods that have suffered from historical disinvestment and are disproportionately impacted by spending cutbacks to public and third sector services under austerity. In addition, Brexit, and a political climate where extreme right-wing beliefs have become more mainstream and encouraged by government rhetoric and policies (including the creation of a hostile immigration environment), have been a catalyst for increases in reporting of hate (Hall et al., 2022). The broader, global context is also relevant as spikes in reporting of hate can follow an event elsewhere in the world. Such national and international shifts have resulted in two significant and interrelated consequences: First, a rise of forms of hate experienced within communities and a context of greater permissiveness of hateful

behaviours. For example, this community safety officer explains how hate has been given greater legitimacy since the 'toxic' debates leading to and following Brexit:

> 'I think that [political debates about welfare benefits] has changed the tone. People just see it as skivers and people get one over us and then the whole narrative around Brexit, which is just so toxic, and I think that's changed the tone of what people think. Your average person in the street who maybe 10 years ago would never have said anything so negative about their Spanish next-door neighbour might be like, "Well what are they still doing here kind of thing?"' (Community Safety)

Second, the constrained ability to proactively respond to this rise. Examples of this include cutbacks in resources that have affected the ability of responding services to be proactive rather than reactive, and to work in partnership with organisations such as Connected Voice Advocacy. The lack of opportunities, resources, services, and infrastructure also allows for conditions that facilitate hate as divisions emerge and differences between people and groups are given greater negative attention and are less tolerated. Without prevention and early intervention, these can also escalate more quickly.

> 'But again, it's just down to that resource and down to the competing demands. Our world is very… I see it's probably 50/50 in terms of that reactive and proactive, whereas beforehand we were so proactive with our resources [we] will be out doing projects with Connected Voice and various other different organisations and helping them and bringing that back into the organisation. And we're getting there again'. (Police)

A lack of skilled, knowledgeable, confident practitioners in existing organisations results in response times being slower than ideal, partial, and less effective. Services for those victimised and for perpetrators are negatively impacted by budget cuts which means there is less any organisation can do to respond to hate especially if the organisation does not believe they have such a remit.

10. Conclusions

There are several core findings that emerge from this research:

- COVID-19 lockdowns led to a worrying increase in the proportion of cases being referred to HCAS that were hate relationships: from 27% during non-pandemic conditions in the earlier study, to 44% during lockdowns which were a response to the pandemic. Thus, there is a strong suggestion that the conditions of COVID-19, as they had for domestic abuse (Kourti, et al. 2023), allowed hate relationships to develop;
- There is a lack of leadership for responses to hate incidents, hate crime and hate relationships;
- There is widespread misunderstanding about what hate crime legislation covers, how hate is identified, the difference between hate crime and hate incidents:
  o It is often HCAS advocates who challenge other services to name what has been reported as hate motivated;
- This misunderstanding leads practitioners all too often to minimise accounts of hate motivated victimisation perceive those making reports of hate as untrustworthy and to re-frame their victimisation as being the result of anti-social behaviour or a neighbourhood dispute. This is experienced as:
  o Minimisation of victimisation and impacts,
  o Lack of empathy or concern for those victimised or reporting incidents,
  o Lack of trust in help providers or private landlords who may condone, reinforce, or initiate hate,
  o Lack of skills, knowledge, expertise, and confidence in identifying and addressing hate incidents,
  o Difficulty distinguishing between perpetration, retaliation, self-defence, and mutual aggression;
- There is little understanding that when hate relationships occur there is more than one victim, i.e. the family and friends of the individual who reports might also be seriously impacted by the hate relationship;
- There is little to no understanding of the cumulative impact of repeated hate motivated victimisation over long periods of time by the same perpetrator(s)– which we call hate relationships:
  o Relatedly there is very little understanding that the apparent lack of intervention in hate relationships over a long period of time has profound impacts on the mental and physical health and wellbeing of those victimised;
- There is little evidence of services working in partnership to share information about the risks and harms being experienced by those who are victimised and to agree a plan of action:
  o This changes when HCAS are involved as they often take the role of key worker for the case and bring together different agencies to seek resolution,
  o Social services adult services are conspicuous by their absence in the care of disabled adults being victimised by hate relationships;
- Rehousing appears to be the only remedy offered and this is only viable when those victimised live in social housing;

- There is very little focus on perpetrators, how their behaviours might be challenged and how they might be called to account for their behaviours;
- COVID-19 lockdowns exacerbated what was already the case:
  - The results of austerity have left public and third sector services with reduced staff and resources. This in turn has led to rationed services, long waiting lists for services and a lack of training and support for front-line practitioners,
    - COVID-19 lockdowns led to longer waiting times for responses, inability to get face-to face services, lack of continuity of care;
    - COVID-19 lockdowns increased the victimisation because perpetrators and those victimised were confined to home:
    - In a small number of cases being required to stay at home provided periods of reprieve for those victimised;
  - HCAS Advocates provide:
- A listening ear, believing, affirming, and empathising with clients,
- Clarity by communicating with other professionals involved in the case,
- Support in writing letters, attending meetings, and gathering evidence,
- Emotional support to improve confidence and self-esteem,
- Advocacy with service providers on behalf of clients to challenge mislabelling of victimisation,
- Advocates were more visible pre-lockdown but lost some visibility post-lockdown.

11. Developing the toolkit

Once the contents for the toolkit was developed, a detailed diagram was designed and shared with practitioners in a focus group to provide feedback on its potential usefulness and impact on dealing with hate relationships. This included representatives from the Office of Northumbria Police and Crime Commissioner, local authorities, a housing charity, NHS mental health, and Connected Voice Advocacy. Overall, the toolkit received positive feedback from all contributors. Subsequently, we decided to present the toolkit as an online app rather than a poster format to enhance useability and collaborated with students from Leeds Trinity University to develop the Hate-ID App for free and easy access by practitioners working in the field of hate within the North-East of England. **See Appendix 1 for a diagram of the Hate-ID App.**

12. Recommendations

1. Though the focus of our research was on the early identification of hate relationships, the findings made clear that there is a lack of knowledge about what hate is as opposed to what anti-social behaviour is, the difference between hate incidents, hate crime and hate relationships, available reporting mechanisms, protected characteristics, thresholds for police investigation, availability of the HCAS, its referral pathways, and availability of other services who can work in partnership to address hate and hate relationships. Recommendation: The development and delivery of training across statutory and third sectors to address the above gaps in knowledge.

2. As well as confusing hate incidents/crime with anti-social behaviour practitioners were unclear about which statutory or third sector services are available to assist in responding to hate. The police were perceived as having a leadership role however, this is not the case in the majority of reports of hate which do not reach the threshold of a crime. **Recommendation: HCAS be identified as a lead organisation for hate. They should:**

e. **be financially supported to design and deliver the training outline above.**
f. **be the key organisation receiving referrals for hate relationships.**
g. **be the key organisation providing advice to partner organisations and a service to those victimised by hate who wish it.**
h. **Lead on a multiagency response to tackle hate relationships within the community.**

3. The needs of those who are victimised by hate are wide-ranging and include, but are not limited to, physical and mental health, housing, emotional support, safeguarding for children and/or adults, and specialist support from 'by and for' organisations with expertise in the protected characteristics. However, findings suggest that these needs are not appropriately recognised or acted on by practitioners. Partnership working is challenging and often not working with respect to those victimised by hate because of a lack of leadership and coordination of response.

It is recommended that a similar model to the Multi-Risk Assessment Conference (MARAC) Marac resources - SafeLives used in domestic abuse be considered for hate relationships. With this approach, a lead agency chairs regular meetings of partner agencies to discuss a joint plan to ensure the safety of victim/survivors. Referrals are made to such a meeting would be based on an assessment of risk and need and the chair would facilitate a discussion including sharing intelligence about the case and agreements about which agencies might be involved with improving the outcomes for victim/survivors. The assessment of risk and need would be based on the criteria for a hate relationship: repeat reporting of hate incidents, perpetrators who live in close proximity, mental health, physical health and social impacts on victim/survivors. **Recommendation: Partnership working should be central to any response to hate. A lead organisation should be identified, we recommend that HCAS, coordinate partnership work.**

4. To underpin the training and development of best practice partnership working the Hate-ID App developed in this research project provides an 'at a glance' guide to initial questions to ask of those reporting hate, referral pathways for those victimised by hate depending on whether they are reporting hate incidents, hate crime or hate relationships, guide to referring organisation's options for intervention.
Recommendation: The Hate-ID App is embedded into the training and disseminated widely to improve early identification of hate, early intervention and appropriate referral where needed, and improved partnership working.

5. There is a lack of understanding about the scale of hate because of the reliance on police data for hate crime, i.e., those incidents that reach the threshold of a crime. This gives an inaccurate picture locally of the impact of hate on communities. **Recommendation: Community safety partnerships should work together to agree on a data set that gives a fuller picture of how hate behaviours are impacting communities. They should also be wary of being overly influenced by centralised government requirements on how and what data should be collected which can mean it is not responsive to more regional differences.**

6. The findings speak starkly to the lack of attention paid to working with perpetrators of hate relationships. Some participants point to the ways in which perpetrators of hate might themselves have needs that go unmet.

Recommendation: Separate research should be conducted to explore the possibilities for addressing their behaviours that include both criminal justice and non-criminal justice interventions.

Hate-ID App

Introduction: You will come across service users who have experienced a range of harms that may or may not sound like a hate incident which may make it difficult to direct them to the right sources of support.

There is some confusion about the differences between different forms of hate and anti-social behaviour/neighbour disputes, although in law and practice these are clear:

Definitions:

- Hate crime

[Hover for definition] Any crime can be prosecuted as a hate crime if the offender has either demonstrated hostility or been motivated by hostility based on race, religion, disability, sexual orientation, or transgender identity. Someone can be a victim of more than one type of hate crime. (CPS 2023)

- Hate incidents

[Hover for definition] A non-crime hate incident ("incident" is defined as "a single distinct event which disturbs an individual, group or community's quality of life or causes them concern") …involves … an act by a perpetrator which is perceived by the victim to be motivated - wholly or partly - by hostility or prejudice towards persons with a particular characteristic. (see Home Office 2023)

- Hate relationships

[Hover for definition] A 'hate relationship' occurs when an individual/family experiences repetitive, often (but not always) 'low level' forms of hate from known perpetrators who live close by. The impacts are similar to coercive control experienced in domestic violence and abuse with victimised people feeling entrapped, isolated, and with profound impacts on physical and mental health and well being. Hate incidents might include abusive language; surveillance; disruptive noises; obstruction; thrown missiles; damage to property; harassment and threats; and physical violence, etc. Perpetrators are not strangers (Donovan, Clayton and Macdonald 2021).

- Mate crime

[Hover for definition] Mate Crime is defined as the exploitation, abuse or theft from any person at risk from those they consider to be their friends. Those who commit such abuse or theft are often referred to as 'fake friends'. (Salford Safeguarding Adults Board 2023)

- Anti-social behaviour

[Hover for definition] Antisocial behaviour is defined as 'behaviour by a person which causes, or is likely to cause, harassment, alarm or distress to persons not of the same household as the person'. There are three main categories for antisocial behaviour, depending on how many people are affected: Personal antisocial behaviour is when a person targets a specific individual or group; Nuisance antisocial behaviour is when a person causes trouble, annoyance or suffering to a community; Environmental antisocial behaviour is when a person's actions affect the wider environment, such as public spaces or buildings. (Met 2023)

- Neighbour disputes

[Hover for definition] Neighbour Disputes are where two neighbours disagree about something that then becomes a source of distress and frustration. It is common for both sides of the dispute to have done things to annoy the other person and ultimately the actual dispute is not ASB. (ASB Help 2023)

This toolkit is designed to help you make decisions about where to refer people, so they get the support they need as soon as possible. It is based on research conducted by Durham and Northumbria Universities with Connected Voice Advocacy's Hate Crime Advocacy Service. You will find a link to the research here: [insert a link to exec summary pdf]

To make decisions about where to refer, the following questions need to be asked of the service user:

1. What happened?

2. a. Who was involved? (Perpetrator(s) and/or victim(s)

1. b. Where did it happen?

1. c. When did it happen?

1. d. Has the client contacted other services about this?

Yes ☐

No ☐

1. e. If so which of these organisations? (Tick all that apply)

Police ☐

GP/health practitioner ☐

Social housing ☐

Landlord ☐

Council/anti-social behaviour team ☐

Educational institutions ☐

Social services/social workers/care staff etc ☐

Stop Hate UK/Tell MAMA/other third-party reporting services ☐

Other (If you selected Other, please specify) ☐

2. Does the client believe this is a crime? *[Hover for definition]* A crime is an unlawful act *(or sometimes a failure to act) and can include: physical assault, threatening behaviour, harassment, criminal damage, vandalism, trespass, incitement to racial hatred, etc.*

Yes ☐

No ☐

Unsure ☐

3. Does the client feel unsafe or in danger?

Yes ☐

No ☐

4. Has the client reported that this is a:

      i. a one-off incident?

one in a series of incidents from the same perpetrators? ☐

series of incidents from the different perpetrators? ☐

5. Does the client think that this happened because of a:

Disability (physical/sensory/cognitive/mental health) ☐

Religion or faith ☐

Race or ethnic group ☐

Sexuality (gay, lesbian, bisexual etc.) ☐

Transgender ☐

None ☐

Assessment and referral:

Your organisation/sector will have its guidance/protocol for dealing with hate crime. Please refer to and follow that guidance. Some examples are:

- Police [hyperlinks]
- Social housing [hyperlinks]
- Social Work [hyperlink]
- Education [hyperlinks]

Outcome 1 (Neighbourhood Dispute). If, in your judgement, the client has not been victimised by hate, but by a neighbourhood dispute, please see Northumbria Police guidance to give appropriate advice [hyperlink to Northumbria Police Neighbour Disputes page].

Outcome 2 (Anti-Social Behaviour). If, in your judgement, the client has not been victimised by hate, but by anti-social behaviour, please refer them to your ASB Team. See: [hyperlink to Northumbria Police ASB page].

Outcome 3 (Crime). 1. If, in your judgement, the client is in danger/at risk and or the victim of a crime encourage them to RING THE POLICE.

Outcome 4 (Hate crime). If, in your judgement, the client is in danger/at risk and or the victim of a crime that is motivated by hate then encourage them to RING THE POLICE and REPORT A HATE CRIME.

Outcome 5 (Hate non-crime incident). If, in your judgement, the client is in danger/at risk and or the victim of a non-crime incident that is motivated by hate then encourage them to RING THE POLICE and REPORT A HATE INCIDENT.

If, in your judgment, the client is the victim of a non-crime incident then please refer them to CONNECTED VOICE HATE CRIME ADVOCACY SERVICE (HCAS).

Outcome 6 (Mate Crime). If, in your judgement, the client is in danger/at risk and or the victim of a mate crime that is motivated by hate then encourage them to RING THE POLICE and REPORT A HATE CRIME.

If, the client has been victimised by mate crime, please refer them to ADULT SERVICES:
Northumberland
North Tyneside
South Tyneside
Newcastle
Gateshead
Sunderland
If, in your judgment, the client is also/or in need of emotional and/or practical support for mate crime they have experienced, please refer to the CONNECTED VOICE HATE CRIME ADVOCACY SERVICE (HCAS).

Outcome 7 (Mate non-crime incident). If, in your judgement, the client is at risk and the victim of a mate-related non-crime incident that is motivated by hate then encourage them to RING THE POLICE and REPORT A HATE INCIDENT.

If, the client has been victimised by a mate-related non-crime incident, please refer them to ADULT SERVICES:
Northumberland
North Tyneside
South Tyneside
Newcastle
Gateshead
Sunderland

If, in your judgment, the client is also/or in need of emotional and/or practical support for a mate-related non-crime incident they have experienced, please refer to the CONNECTED VOICE HATE CRIME ADVOCACY SERVICE (HCAS).

REFERAL PATHWAY SUGGESTION: Hate relationship. The information you have provided suggests that your client is in at risk and the victim of a hate relationship. Please encourage them to RING THE POLICE and REPORT A HATE CRIME.
If, in your judgment, the client is the victim of a hate relationship [including a crime] then please refer them to CONNECTED VOICE HATE CRIME ADVOCACY SERVICE (HCAS).
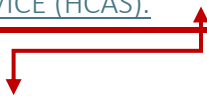
Outcome 9 (Hate relationship- including only non-crime incidents). If, in your judgment, the client is the victim of a hate relationship [including only non-crime incidents] then please refer them to CONNECTED VOICE HATE CRIME ADVOCACY SERVICE (HCAS).

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