

### **Written evidence submitted by Meg (SPI0033)**

[Note: This evidence has been redacted by the Committee. Text in square brackets has been inserted where text has been redacted.]

1. I am submitting evidence as an individual. I want to prevent others going through the same harrowing experience that I have.
2. On Friday 6th August 2021 at approximately 00.45, I was a victim of drink spiking crime. I didn't drink much the evening before yet I have no full memories or visual recollections for approximately twelve and a half hours. The fragments I know are due to thoughts and feelings I had with bits of conversation and the odd spyhole-type flashes. I ended up feeling unable to move due to loss of motor functions, unable to breathe and screaming for help. Police and ambulance attended at approximately 7am. A quiet late-night dinner at home for my birthday followed by popping out for a late-night birthday drink turned into a nightmare.
3. As a victim of a serious crime, my subsequent experience with [the police force] left me feeling belittled and led to further traumatisation.

#### **The prevalence of spiking**

##### **How common is spiking?**

4. Drink spiking crime is far more prevalent than the public realises and it's utterly terrifying. It only takes a matter of seconds for perpetrators to strike and the consequences can be catastrophic.

##### **Where and when does it happen?**

5. Anywhere and everywhere.

##### **Who is vulnerable to spiking?**

6. Everybody. It doesn't matter what age you are, it doesn't matter where you are and it doesn't matter if you're drinking soft drinks.

##### **Who commits spiking offences and why do they do it?**

7. There are a multitude of reasons and theories for why perpetrators commit this crime, ranging from silly pranks to theft to rendering victims compliant and helpless when the aim is the more sinister target of sexual assault.

#### **How spiking should be prevented and addressed**

##### **How effective is partnership working between the police and others (such as local authorities, the health service, night-time industries, universities and third sector organisations) in safeguarding potential and actual victims of spiking?**

8. My experience with [the council] was outstanding. Their Community Safety Lead Officer and the licensing team were supportive in the aftermath of my incident and the further traumatisation I experienced with [the police force]. They allowed me to provide input and be involved with their plans for safeguarding the public from further spiking incidents. Feeling like I was helping to prevent others experiencing what I had helped me to try and cope with what happened during the subsequent months. There was excellent partnership working in place for safeguarding of potential victims of spiking.

9. As an actual victim of drink spiking, I found partnership working was non-existent in relation to my case. [The police force] proved to have no partnership working within their own organisation. I had silo conversations with the investigating Sergeant, the police licensing officer, another officer from a specialist unit and the officers who attended my incident. The only time they were linked was when I was copying them into my emails. I investigated every avenue to find out as much information as I could to try and make sense of what happened to me and to try and implement systemic change. I contacted the [Ambulance Service] because there was no liaison in place.
10. [The council] had excellent partnership working and linked up with their relevant contacts across agencies once they knew about my case. They were incredibly helpful and interested in doing all they could to prevent it happening again.

**How effective are the measures used to prevent spiking, including the advice and guidance that is used to train, educate and support those involved in handling this type of crime (such as police officers, nightclub security staff and A&E staff)?**

11. There is nothing effective in place as far as I can tell. Far more needs to be done to educate and train all venue staff. How drink dispensing is managed, how oversight of the venue and its patrons is managed as well as guidelines for how to deal with vulnerable people who may be presenting as drunk but could actually have been victims of spiking.
12. My incident highlighted the need for police officers and ambulance crews to have professional curiosity. There needs to be more awareness that people presenting as drunk or hungover may not be as they could have been victims of drink spiking crime.
13. I'm incredibly grateful to our emergency services for coming to help me. Without their intervention, I would have remained in terror indefinitely, feeling unable to move due to loss of motor functions, unable to breathe and screaming for help. I couldn't dial 111 for help. Just one digit and I couldn't dial it. I really thought I was going to die. My fear dissipated only when they were in attendance.
14. Attending a middle-aged woman wearing pyjamas and two odd left trainers on her feet, who is screaming for help sat on the ground of a car park at seven o'clock in the morning is highly unusual.
15. With the bizarre circumstances surrounding my scenario, I think there should have been more curiosity. I don't understand why the scenario wasn't questioned. There was an opportunity for my blood to be taken that was missed. Have our emergency services become desensitised to what is and isn't usual behaviour?
16. It needs to be flagged that situations should not automatically be taken at face value.

**What barriers do victims face in reporting spiking incidents and obtaining treatment and support?**

17. Victims don't report crime because they don't believe anything will be done about it and that has proven to be true on this occasion. It was a very difficult decision for me to proceed with this case as I didn't know what the risk to my safety, and the person I was with when the incident happened, would be by doing so. To then have day after day of further traumatisation from the treatment I received from [the police force] made the situation and my mental wellness rapidly deteriorate. I may as well have been back in the midst of the incident screaming and not understanding why nobody was helping me. Every day that passed with nobody helping had me reliving what had happened.

18. This experience has made me feel like drink spiking (as well as violence against women) is not a priority. I put myself through the harrowing ordeal of chasing [the police force], despite how unwell it was making me, and the outcome has been hugely disappointing. I was committed to seeking justice for myself and every other person that may have needed that evidence in the future. It's been a very difficult and fruitless journey.

19. My experience begs answers to the following questions:

- How many distressed phone calls ending with a victim in tears do you feel is reasonable?
- How many times should a victim have to reiterate that a case is time critical and CCTV needs to be retrieved to get heard?
- Why violence against women is only treated as a priority when it's too late?

20. There is no professional mental health support for victims of spiking crime. I reached out far and wide. I was given a telephone number by my GP for an organisation that closed years ago.

**Are the police doing enough to identify perpetrators and bring them to justice?**

21. Absolutely not in my case.

22. The only evidence there was in relation to the crime I was a victim of is gone. The only evidence there was in relation to any other crimes that took place that night is gone. The only evidence there was to support future victims of the same perpetrators is gone. There were not many people in [the bar] when this happened and now the perpetrators are free to continue drugging people, and carry out whatever other crimes they are doing alongside, with nothing to link them to this incident.

**What role should Government play in tackling this crime?**

23. Having discussed my situation and concerns with multiple police officers, it's clear that the law is outdated and needs to change. If a stranger stabbed me in the street and ran off, the police would use their powers to track down the perpetrator and question them; why is spiking crime different, especially when there are suspicious primary suspects?

24. I'm hugely concerned that so many others are having a highly traumatising experience and there remains no change to the law or how this crime is dealt with. How many people are being retraumatised due to the experience they are having with the police and finding themselves unable to seek justice?

25. During the last conversation I had with the investigating Sergeant I asked him 'what would have happened if I had ended up in a body bag?' and his baffled response was 'well, that would have been a murder investigation' and I responded with 'exactly!'.

26. Why is a dead body required before it is taken seriously?

27. Why is there no crime prevention strategy?

28. It's important that awareness of this crime is prioritised, however, as much awareness as can be done to help people minimise the risk of being targeted, it will

not stop this crime. People don't live in conscious awareness at all times. I am very careful but I was duped without my knowledge.

29. Our frontline police are overstretched and under-resourced. This is a major issue. They are expected to manage a caseload (including gathering evidence and liaising with victims of crime) as well as respond to 999 calls when on shift. Therefore, police work, such as time critical CCTV retrieval, is not getting done. There either needs to be more police officers or more civilians doing work to support them with their caseloads.
30. The police did not act quickly enough to secure the CCTV from the bar but these men are on the council CCTV. The police have the powers and the intelligence to identify and locate the primary suspects in my case. If potential perpetrators were arrested and questioned, that would be a deterrent to doing it again at the very least, but the police won't do it.
31. The police are not interested in investigating anything that will not lead to a conviction which leaves the perpetrators free to continue committing this crime with no consequences or concern that they will be investigated. Public safety no longer seems to be a priority.
32. Police need to fully investigate before there is a dead body. Drink spiking is the perfect murder because there is no evidence, and it is not taken seriously by the police.
33. I think there is more that can be done to help prevent this crime and also to support those who are victims of it including the following:
  - Educational campaign to raise awareness of drink spiking crime.
  - 101 operators to be provided with suitable training for when dealing with distressed victims of crime.
  - Strict guidelines for how police approach the retrieval of time critical CCTV evidence.
  - A suitable procedure to be put in place to ensure appropriate cover is provided for police leave such as a secondary contact, particularly for those cases that require the retrieval of time critical evidence.
  - Local authority and police assurance that CCTV licence conditions are being met by venues to ensure public safety and the availability of evidence when needed.
  - Professional mental health support made available to victims of traumatic crime.
  - Train police officers and ambulance crews to have professional curiosity when attending an incident and to be aware that people presenting as drunk or hungover may not be as they could have been victims of drink spiking crime.
  - Police conduct a full investigation into drink spiking crime as they would in any other kind of attempted murder.
34. Together, I very much hope we can make systemic change to prevent this crime continuing to be so very dangerously prevalent. Without action, people will continue to be drugged, attacked and, at worst, die.

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