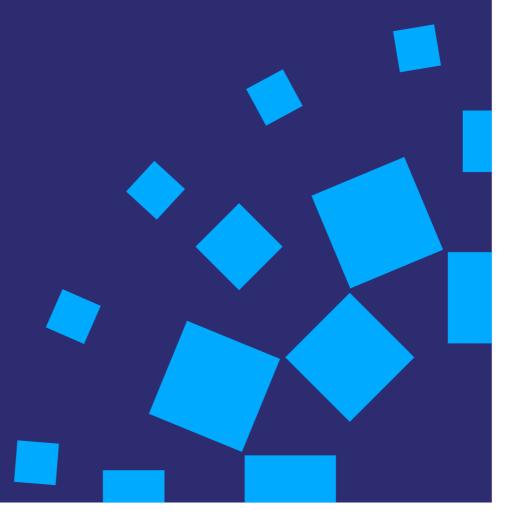# Recognising and responding to vulnerability-related risks

Report on the refresh of 'vulnerability: review of reviews'

Version number 5.0

Contents

- The College has updated a review of published reviews on the available evidence on signs of and risk factors for vulnerability to include papers published since 2015.

- Findings from the refresh were consistent with those of the original review in relation to the proportion of harms and risk factors identified.

- The refresh identified a small number of additional risk factors for domestic abuse and suicide, including problem gambling and (minority) sexual identity.

Background

As part of the development of its guidelines on recognising and responding to vulnerability-related risks, the College has built on the findings from a review of published reviews undertaken in 2015. This identified and provided an overview of the available evidence on signs of, and risk factors for, increased vulnerability to harm.[1]

This report refreshed the evidence search to include review papers from January 2015 to 2019. It identified additional papers of interest and built on the body of evidence.

This report summarises the findings from the refresh.

Method

The original report examined the evidence available on the factors associated with increased risk from a wide range of harms and attempted to understand, where possible, any commonalities or interactions between them. The ultimate aim was to help police practitioners better understand the vulnerabilities of those they encounter.

The refresh was designed to mirror the original review as closely as possible to ensure consistency.

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[1] Available from:
whatworks.college.police.uk/Research/Documents/Vulnerability_review_of_reviews.pdf

Review questions

1. What are the signs that indicate a greater vulnerability to harm or victimisation?

2. What are the risk factors (situational or individual) that indicate a greater vulnerability to harm or victimisation?

Searching

Database searches were conducted in January 2019 for papers published in English between 2015 and 2019 (inclusive). The following databases were searched: PsycINFO, Web of Science (all databases), Applied Social Sciences Index and Abstracts (ASSIA) and Social Policy & Practice. A copy of the search terms is included in appendix A.

Sifting

A total of 2,223 papers were identified. Of these, 349 were identified as duplicates and removed. The remaining 1,874 titles and abstracts were reviewed against the following inclusion criteria.

- Published in or after 2015.

- Paper is an evidence review (for example, meta-analysis, systematic review, rapid evidence assessment).

- Relevance to the research questions.

Papers were sifted by two researchers, with approximately 20% dual coded to ensure consistency.

Preferred reporting items for systematic reviews and meta-analyses (PRISMA) chart

| Records identified through database searching (n=2,223) | Duplicates removed (n=349) |

| Records screened a title and abstract (n=1,874) | Records excluded (n=1,727) |

| Included for second review (n=147) | Suicide and/or self harm (n=51) |

Included for second review (n=147)

Suicide and/or self harm (n=51)
Domestic abuse (n=32)
Child abuse/CSE (n=21)
Bullying (n=19)
Mental health problems and crises (n=7)
Elder abuse (n=6)
Youth violence (n=2)
Human trafficking (n=1)
Serious sexual offences (n=1)
Other (n=7)*

*6 general victimisation, 1 cyber victimisation

Findings

A total of 147 papers were included after the title and abstract sift. These papers were reviewed for a second time by two researchers for operational relevance and to compare the findings with those collated by the original review for new or noteworthy updates.

The original review identified 19 relevant papers, of which 10 predicted victimisation for the following harms:[2]

- mental health problems including suicide/suicidal behaviour (n=4)
- domestic abuse (DA) (n=3)
- bullying/peer victimisation (n=2)
- child sexual abuse/child sexual exploitation (CSE) (n=1)

Broadly, the proportion of harms identified in the refresh was the same as in the original. The larger number of CSE-related papers identified likely reflects the growth in awareness in this area in recent years.

The risk factors identified for each harm were also compared. Again, findings from the papers identified through the refresh were broadly very similar to those identified through the original review. A small number of additional risk factors for domestic abuse and suicide were identified that may be of interest. These are noted below along with references to the papers.

Domestic abuse

1. Fertility

One systematic review explored the relationship between infertility/subfertility and domestic abuse (DA). A total of 21 quantitative papers were included. The evidence indicates that infertility/subfertility is associated with domestic abuse in low- and middle-income countries.

Reference: Stellar C, Garcia-Moreno C, Temmerman M and van der Poel S. (2016). 'A systematic review and narrative report of the relationship between infertility, subfertility, and intimate partner violence'. International Journal of Gynaecology and Obstetrics, 133(1), pp 3-8.

2. Problem gambling

One systematic review explored the relationship between problem gambling and DA. A total of 14 studies were included. Most of the evidence suggests there are

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[2] This is the total number of papers identified after full text sift. For the refresh, the researchers sifted only on title and abstract.

disproportionately high rates of DA victimisation among problem gamblers, and there is a consistent relationship between problem gambling and perpetration of DA.

Reference: Dowling N and others. (2016). 'Problem gambling and intimate partner violence: A systematic review and meta-analysis'. Trauma, Violence & Abuse, 17(1), pp 43-61.

3. Sexual identity (minority)

Two systematic reviews and one meta-analysis were identified, which explored the relationship between sexual identity and DA.

One systematic review and one meta-analysis, based on the same collection of studies, explored the prevalence and correlates of DA in self-identified lesbians in same-sex couples (Badenes-Ribera and others, 2015; 2016). Findings from the 14 included studies suggest that all forms of violence occur, but the most prevalent is emotional/psychological violence. Although DA experiences among heterosexual couples and same-sex couples share commonalities, such as being associated with substance abuse and violence in the family background, the authors suggest that abuse in same-sex couples has some particularities that require differential treatment. For example, homophobic control behaviours (threatening the partner with revealing his/her sexual orientation to significant people; questioning whether the partner is a 'real' lesbian; and forcing the partner to show affection in public). The authors noted significant limitations in the literature, which should be considered when interpreting their findings.

One systematic review examined the role of sexual minority stressors on DA in same-sex relationships (Longobardi and Badenes-Ribera, 2017). The findings were based on 10 studies that indicated that different forms of DA (physical, psychological, sexual) tend to co-occur in same-sex relationships; bidirectional violence might be a common pattern; and internalised homophobia, degree of 'outness', stigma consciousness and experiences of discrimination based on sexual orientation are all related to DA. However, these associations were not fully supported by all studies.

References: Badenes-Ribera L and others. (2016). 'Intimate partner violence in self-identified lesbians: A systematic review of its prevalence and correlates' Trauma, Violence & Abuse, 17(3), pp 284-297.

Badenes-Ribera and others. (2015). 'Intimate partner violence in self-identified lesbians: A meta-analysis of its prevalence'. Sexuality Research and Social Policy, 12(1), pp 47-59.

Bermea MA, van Eeden-Moorefield B and Khaw L. (2018). **'A systematic review of research on intimate partner violence among bisexual women'**. Journal of Bisexuality.

Longobardi C and Badenes-Ribera L. (2017). 'Intimate partner violence in same-sex relationships and the role of sexual minority stressors: A systematic review of the past 10 years'. Journal of Child and Family Studies, 26(8), pp 2039-2049.

Suicide

1. Sexual identity (minority)

One meta-analysis compared risk for non-suicidal self-injury (NSSI) between sexual minority and heterosexual individuals (Batejan and others, 2015). Findings from 15 studies suggest that sexual minority individuals are at significantly greater risk for engaging in NSSI compared to heterosexual individuals. Sub-group analyses found sexual minority youth to be at higher risk compared to sexual minority adults, and bisexual individuals at higher risk compared to heterosexual, gay/lesbian and questioning/other individuals. The authors suggest that bisexual individuals may face additional stressors, specifically prejudice towards bisexual individuals and a lack of support from both heterosexual and gay/lesbian communities.

One meta-analysis tested whether suicidal thoughts and behaviours are more common and more severe among people identifying as a sexual minority (Fox and others, 2018). Findings from the four studies included indicate a longer and more severe engagement in suicidal thoughts and behaviours among individuals who identify as a sexual minority when compared to a heterosexual group.

One systematic review and meta-analysis of 46 studies explored the relationship between bisexual identity and self-reported suicide ideation and attempt, and the effect of several moderating factors (Salway and others, 2019). The findings were consistent: bisexual individuals reported the highest proportion of suicide ideation or attempt, lesbian/gay individuals the next highest proportion and heterosexual individuals the lowest proportion.

References: Batejan KL, Jarvi SM and Swenson LP. (2015). 'Sexual Orientation and Non-Suicidal Self-Injury: A Meta-Analytic Review'. Archives of suicide research, 19(2), pp 131-50.

Fox, KR and others. (2018). 'Self-injurious thoughts and behaviors may be more common and severe among people identifying as a sexual minority'. Behavior Therapy, 49(5), pp 768-780.

Salway T and others. (2019). 'A systematic review and meta-analysis of disparities in the prevalence of suicide ideation and attempt among bisexual populations'. Archives of sexual behaviour, 48(1), pp 89-111.

2. Alcohol

One systematic review explored the effect of alcohol use disorder (AUD) on suicidal thought and behaviour. Findings from 31 studies provided evidence that AUD is an important predictor of suicide and significantly increases the risk of suicidal ideation, suicide attempt and completed suicide.

Reference: Darvishi N and others. (2015). 'Alcohol-related risk of suicidal ideation, suicide attempt, and completed suicide: A meta-analysis'. PLoS One, 10(5), e0126870.

3. Other

One systematic review explored suicide and homicide-suicide events involving aircraft. The review identified some evidence of clustering where pilot suicides occur after media reports of suicide or homicide-suicide, and five of six homicide-suicide events by pilots of commercial airliners occurred after they were left alone in the cockpit. The authors suggest that this finding, along with a sixth incident in which active intervention by a Japan Air crew saved 147 lives, indicates that having two flight members in the cockpit is potentially protective. No single factor was found to be associated with the risk for suicide or homicide-suicide; drugs and/or alcohol played a role in almost half of suicides, but not in homicide-suicides. Factors associated with both events included legal and financial crises, occupational conflict, mental illness and relationship stressors.

Reference: Kenedi C and others. (2016). 'Suicide and murder-suicide involving aircraft'. Aerospace medicine and human performance, 87(4), pp 388-396.

Appendix A

Search terms

(vulnerab* OR risk* OR victim*)

AND

(sign* OR correlate* OR indicat* OR precurs* OR predict* OR probab* OR propens* OR serious*)

AND

(violen* OR abuse* OR aggressi* OR "anti social" OR assault* OR bully* OR coerc* OR delinquen* OR disab* OR exploit* OR extort* OR extremis* OR gang* OR harass* OR harm* OR hate OR maltreat* OR missing OR neglect OR problematic OR radicalis* OR runaway* OR stalk* OR sex* OR porn* OR prostit* OR "scarred sex*" OR "domestic abuse" OR "forced marri*" OR "honour based violence" OR mental OR "substance abuse" OR alcohol* OR addict* OR dependence OR drink* OR "drug abuse")

AND

("systematic review" OR "meta analysis" OR "rapid evidence assessment")

NOT

(war* OR veteran* OR gene* OR disaster* OR hiv OR aids OR military* OR pain* OR patient* OR depression OR army OR sleep*)

About the College

We're the professional body for the police service in England and Wales.

Working together with everyone in policing, we share the skills and knowledge officers and staff need to prevent crime and keep people safe.

We set the standards in policing to build and preserve public trust and we help those in policing develop the expertise needed to meet the demands of today and prepare for the challenges of the future.

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