

Understanding and Preventing 'Cuckooing' Victimisation

'Cuckooing' involves taking over the home of a vulnerable person in order to establish a base for criminal activity, typically - although not exclusively - as part of County Lines drug dealing operations. This study aimed to investigate the mechanics of cuckooing targeting; gain an insight into the lived experience of cuckooing victims and perpetrators; and identify potential preventative measures for practical application. Led by Dr Laura Bainbridge (University of Leeds), the study involved co-production and collaboration with West Yorkshire Police, South Yorkshire Police, North Yorkshire Police, Durham Constabulary, Humberside Police, Merseyside Police, Cumbria Police and the West Yorkshire Violence Reduction Partnership. Data were collected and analysed from publicly available documents, and semi-structured qualitative interviews with cuckooing experts, victims and perpetrators.

KEY FINDINGS AND RECOMMENDATIONS

1. CUCKOOING VICTIMS ARE VULNERABLE

Primary targets for cuckooing perpetrators are vulnerable people who suffer from drug or alcohol dependency, have a physical disability, a mental health condition, and/or a learning disability.

- a. Early intervention by schools, children's services, housing providers, mental health services, and adult social care could reduce cuckooing victimisation;
- b. Effective partnership working between police, housing providers, mental health services, drug and alcohol services, adult social care, and the third sector is crucial to disrupting cuckooing victimisation.

2. CUCKOOING RELATIONSHIPS ARE COMPLEX

Cuckooing often commences with adult grooming. Victims of cuckooing may be engaged in transactional, social, or sexual relationships with perpetrators and may not be viewed, or perceive themselves, as victims.

- a. Some victims of cuckooing have been criminalised for their role in the commission of drug offences or offences related to organised crime, including where they have been coerced or forced to cooperate with criminal operatives;
- b. Ongoing support from partnership agencies and wraparound services for victims of cuckooing would reduce the likelihood of repeat victimisation.

3. CUCKOOING IS OFTEN A HIDDEN CRIME

Cuckooing activity habitually occurs behind closed doors and is difficult to detect.

- a. Professionals should exercise professional curiosity when engaging with vulnerable people and entering their homes;
- b. Public awareness campaigns may improve reporting of suspected cuckooing activity.

4. CUCKOOING RESPONSES ARE NOT FORCE-WIDE

Promising police and partner initiatives to tackle cuckooing have been implemented in England and Wales. However, such initiatives are often short-term and rarely span an entire force area.

- a. Specific cuckooing legislation should define cuckooing and clarify statutory responsibility for its prevention and detection. New civil legislation, such as a Cuckooing Closure Order, could strengthen safeguarding mechanisms without unduly criminalising vulnerable victims;
- b. Introducing cuckooing flags/markers on all police and safeguarding IT systems could improve intelligence sharing and enable cuckooing statistics and trends to be monitored over time.

Policy Briefing

UNDERSTANDING AND PREVENTING 'CUCKOOING' VICTIMISATION

PROJECT BACKGROUND

'Cuckooing' is a highly exploitative and predatory practice that involves vulnerable people being conned, coerced, controlled or intimidated into sharing, providing or offering up their accommodation to criminals, who then use it as a base for their activities (see Harding, 2020). There is some evidence to suggest that incidences of cuckooing are increasing in England and Wales. The Centre for Social Justice (2023) found that one in eight of people surveyed had noticed signs of cuckooing in their local communities, and Inside Housing (2023) have reported a 300% increase in cuckooing in London. Cuckooing undoubtedly presents a 'wicked' problem for police forces and their safeguarding partners. Yet, while political, professional and media interest in cuckooing has amplified in recent years, academic research dedicated to exploring, understanding and scrutinising this evolving phenomenon remains in its infancy. This study aimed to plug gaps in the existing knowledge base, and in doing so identify a series of interventions that could be implemented to prevent and disrupt cuckooing victimisation.

KEY FINDINGS

Risk Factors

- Victims of cuckooing are targeted because of their vulnerability, which may be multi-dimensional or temporal (e.g. grief following a bereavement)
- Primary targets are those who suffer from drug or alcohol dependency, have a physical disability, a mental health condition, and/or a learning disability
- Functioning addicts are attractive cuckooing candidates as they are less likely to be subject to police, housing or adult social care attention
- Additional risk factors include *inter alia*: being in recovery from drug or alcohol dependence; neurodiversity; loneliness; poverty; housing insecurity; involvement in sex work; and history of being in the care system
- Victims often live in socially deprived areas, and live alone in either a) a block of flats, or b) a house that has back alleyway access. Such properties are typically managed by social or private landlords

Pathways to Victimisation

- Perpetrators use a range of strategies to identify and build relationships with vulnerable people, with some pathways to victimisation involving higher levels of deception or manipulation than others
- Pathways associated with drug dependency involve perpetrators identifying victims by loitering in areas frequented by drug users, waiting outside drug treatment centres, or creating drug debts
- Pathways associated with social networks involve perpetrators identifying victims by befriending lonely people in cafes and public spaces, tapping into knowledge about socially isolated members of the local community, or using social media to target vulnerable people
- Pathways associated with deprivation involved perpetrators idling in or around areas with high social deprivation, Accident and Emergency, local pharmacies, Job Centres and food banks

Relationships

- Cuckooing is a form of exploitation that often starts with adult grooming
- Perpetrators may be charming and are likely to have honed their skills of manipulation over time
- Relationships between victims and perpetrators tend to begin as transactional, social, or sexual in nature, before deteriorating into exploitation and violence once access has been gained to the property
- Forcing entry to a property is not a preferred method for County Lines operatives
- The behaviour of perpetrators when they occupy a property appears to reflect the level of 'professionalism' of the organised crime group
- Overt cuckooing may be associated with parties, a high volume of visitors entering the property for a short period of time, unknown vehicles parked outside the property, damage to doors and windows, and an increase in theft in the local area
- Covert cuckooing is harder to detect. Signs may include the victim becoming socially withdrawn, curtains being closed at the property, gardens becoming overgrown, and children and young people with no known connection to the victim being seen entering the property

Recommended Prevention and Disruption Strategies

- New legislation should be introduced to make cuckooing a specific criminal offence. To prevent vulnerable 'alpha victims' (i.e. those complicit in the victimisation of others) from being convicted, this legislation should include a defence of coercion
- Cuckooing perpetrators aged under 18 years should be referred to local Multi-Agency Child Exploitation (MACE) forums and diverted from criminal justice processes
- A 'Cuckooing Partial Closure Order' should be made available as a civil enforcement measure to reduce the risk of repeat victimisation. Breach should result in a sentence that reflects the myriad harms associated with home takeovers
- Cuckooing flags/markers should be available on all police and safeguarding IT systems
- Local intelligence gathering and mapping - such as risk-terrain modelling - could be deployed to identify cuckooing hotspots
- Regular multi-agency meetings should be convened that involve sharing information and RAG-rating cuckooing victims, those at risk of being cuckooed, and (potential) perpetrators, with coordinated support directed towards those rated as Red and Amber.
- Social housing providers should forge (in)formal reciprocal partnerships that enable cuckooing victims to swiftly move into a new out-of-area property should they wish to relocate
- Community Safety Partnerships should be granted access to a fund that permits the purchase of 'target hardening' equipment such as panic alarms, mobile CCTV, door and window locks
- Educational sessions on County Lines and cuckooing should be offered to secondary school pupils that outline the dangers and potential repercussions of becoming involved with drugs market operatives
- Investment in public awareness-raising campaigns to encourage (anonymous) reporting of suspected cuckooing activity
- Training and information about the signs of cuckooing victimisation should be circulated to professionals that have access to vulnerable people's homes, including housing officers, NHS staff, private home care workers, safety inspectors and meter readers
- Professionals that engage with vulnerable people should be encouraged to exercise their curiosity by sensitively querying unusual or suspicious behaviour - e.g. repeated loss of keys, or sudden payment of rent arrears

CONCLUSION

Findings suggest that cuckooing is a highly predatory and exploitative practice that poses a significant danger to vulnerable members of society. Tackling cuckooing requires a multi-agency response designed to safeguard (potential) victims and prosecute perpetrators. While examples of innovative and promising cuckooing initiatives were identified in the data collected, it is clear that cuckooing prevention and disruption activity varies significantly both within and between police force areas. Legislation that not only defines and criminalises cuckooing, but also places a statutory responsibility on a specific safeguarding agency to coordinate cuckooing interventions would improve this situation.

METHODOLOGY

A multi-method qualitative approach to data collection was adopted that featured three strands:

Strand 1: Scoping Study (Literature Review)

A comprehensive and systematic online search for academic, journalistic and practice-based documents that discuss cuckooing and interconnected topics was conducted. 636 documents were initially located for review, with 464 being classified as pertinent to the study.

Strand 2: Expert Interviews

64 semi-structured virtual interviews were conducted with professionals who were familiar with cuckooing policy, policing, prosecution and/or safeguarding practice. Interviewees operated at the local, regional or national level. Each interview lasted approximately 60 minutes.

Strand 3: Lived Experience Interviews

Semi-structured face-to-face interviews were undertaken with cuckooing victims and perpetrators. Graphic elicitation techniques were used during these interviews (i.e. the co-creation of drawings and diagrams by the interviewer and interviewee). These innovative visual methods were used to stimulate dialogue and capture meaning not covered verbally during the interview itself. Interviewees lived in both County Lines importer and exporter areas.

IMPLICATIONS FOR FURTHER RESEARCH

1. Robust quantitative data on the prevalence of cuckooing is not readily available in England and Wales. Future co-produced research should examine strategies that could be adopted to routinely capture and record cuckooing activity to target victims and addresses
2. Cuckooing that occurs within private-sector rented accommodation and owned-properties requires further empirical investigation as, to date, researchers have predominantly engaged with victims that live in properties managed by social landlords
3. Promising cuckooing initiatives should be independently evaluated to promote the delivery of evidence-based practice across England and Wales

REFERENCES

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