

Serious Violence Needs Assessment

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Introduction

The government published a new serious violence strategy in 2018¹ stating that they were

“Determined to do all it can to break the deadly cycle of violence that devastates the lives of individuals, families and communities.”

Following public consultation in July 2019, the Government announced that it would bring forward legislation. This introduces a new serious violence duty on public bodies which will ensure relevant services work together to share data and knowledge and allow them to target their interventions to prevent serious violence altogether. This is against a background of increasing incidents of serious violence in England and Wales, specifically knife crime predominantly affecting young people.

The 2022 Police, Crime, Sentencing and Courts Bill ² places a duty on Community Safety Partnerships to have a strategy in place tackling violent crime.

The requirements of local systems are to

- a) Identify the kinds of serious violence that occur in the area.
- b) Identify the causes of serious violence in the area, so far as it is possible to do so.
- c) Prepare and implement a strategy for exercising their functions to prevent and reduce serious violence in the area.

The duty requires the following specified authorities within a local government area to work collaboratively to prevent and reduce serious violence:

- Police
 - The Chief Officer of police for police areas in England and Wales
- Justice
 - Probation Services
 - Youth Offending Teams
- Fire and Rescue
 - All fire and rescue authorities operating in England and Wales
- Health
 - Integrated Care Boards in England
- Local authorities
 - A district council
 - A county council in England

Consultation must also take place with educational, prison and youth custody providers.

For the purposes of this duty, serious violence includes.

- a) Violence against the person
- b) Domestic abuse
- c) Sexual offences
- d) Violence against property
- e) Threats of violence

¹ HM Government (2018) Serious Violence Strategy [Online]

² Police, Crime, Sentencing and Courts Bill, 2022 (HL Bill 95) [Online]. London: The Stationery Office. [Accessed 23rd May 2022]. Available from: <http://www.legislation.gov.uk/>

This duty specifically excludes terrorism within its remit. This is covered by the local system response to the 2018 Counter terrorism Strategy (CONTEST)³.

The Serious Violence Strategy sets out specific types of crime of particular concern, including homicide, violence against the person which may include both knife crime and gun crime, and areas of criminality where serious violence or its threat is inherent, such as in county lines drug dealing. However, there is flexibility within the duty to consider other types of serious violence such as domestic violence, alcohol related violence, sexual abuse, modern slavery, or gender-based violence.

The definition of what amounts to serious violence in any given area account must be taken of several factors, which are:

- a) The maximum penalty which could be imposed for any offence involved in the violence.
- b) the impact of the violence on any victim.
- c) the prevalence of the violence in the area.
- d) the impact of the violence on the community in the area.

The World Health Organisation (WHO) has stated that violence is a global public health problem and should be tackled with a public health approach. WHO define violence as

“The intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment or deprivation”⁴.

Public Health England also define violence as a public health issue.⁵ Living without fear of violence is a fundamental requirement for health and wellbeing. Violence is a major cause of ill health and poor wellbeing and is strongly related to inequalities, with the poorest fifth of our society suffering rates of hospital admissions for violence five times higher than those of the most affluent fifth. It impacts on individuals and communities and is a drain on health services, the criminal justice system, and the wider economy.

³ HM Government (2018) CONTEST: The United Kingdom’s Strategy for Countering Terrorism.

⁴ Dahlberg, Linda. (2006). Violence: A global public health problem.

⁵ Public Health England (2019) A whole-system multi-agency approach to serious violence prevention.

Headline recommendations

- Ensure development of Child Friendly Dudley considers the needs of adolescents and addresses negative stereotypes about Young People.
- Promote wider use of a “child first” approach when working with children and young people with challenging behaviour.
- Improve data access, timeliness, sharing & linkage for serious violence and underlying risk and protective factors.
- Regular review and update of the needs assessment, to ensure any emerging issues are addressed.
- Facilitate system wide decisions regarding requirements for long term funding for evidence-based programmes.
- Further public consultation around violence and perceptions of violence, specifically with young people.
- Undertake or commission detailed mapping of current service provision, including accessible information for young people, families, and professionals.

Dudley Demographics

The latest population estimates from the 2021 Census show that Dudley Borough has a population of around 323,500. The population has seen sustained growth in recent years, with approximately 10,600 more people in the Borough now compared to 2011. Dudley is the eighth largest local authority district in the West Midlands Region based on population. 18% of the population are aged under 15 and 20% are 65 and over⁶.

According to the 2011 Census (data from the 2021 Census has not yet been released), 88.5% of the Borough population are White British. Asian groups constitute 6.1% of the population, with the largest individual groups in the Borough being Pakistani (3.3%) and Indian (1.8%). 1.8% of people are from mixed ethnic groups, 1.5% Black ethnic groups and a further 1.5% from White groups other than British.

As of December 2021, there were 10,625 people in Dudley borough claiming working age benefits principally due to unemployment, which constitutes 5.5% of the population aged 16 to 64. The equivalent figure for England is 4.5%. 7.9% of those aged 18 to 24 living in Dudley borough are claiming, notably higher than the proportion for England of 5.4%.

According to data from 2020 Dudley borough has 13,600 households with at least one person aged 16 to 64 where no-one aged 16 or over is in employment. This equates to 15.2% of households, compared to 13.0% for England. These people may be unemployed but looking for work, or unavailable to work because of family commitments, retirement, study, sickness, or disability.

In the year to September 2021 the employment rate of residents in Dudley Borough was 78.4%. This is the proportion of people in paid work, on government-supported training or employment programmes and those doing unpaid family work as a proportion of those aged 16 to 64. The figure for England was 74.9%.

The latest earnings figures from 2021 show the median pay of full-time workers living in Dudley Borough is £29,438 per year, below the England figure of £31,490 but more than Sandwell (£26,630), Walsall (£28,515) and Wolverhampton (£27,503). Earnings for men living in Dudley Borough are £31,212 and for women are £27,363.

Dudley Borough is ranked as the 104th most deprived of the 317 local authority districts in England (where 1 is most deprived), ranking it as less deprived than five of the other six districts in the West Midlands conurbation. While this suggests Dudley has relatively low deprivation for an urban area, it masks the disparity in levels of deprivation across the Borough. The latest national Index of Multiple Deprivation from 2019 showed that 28.1% of the Dudley borough population live in areas in the 20% most deprived in England. These are principally found in a zone covering Dudley, Pensnett, Netherton and Brierley Hill, but also include parts of Coseley, Lye, Halesowen, and Stourbridge.

⁶ [First results from Census 2021 in England and Wales - Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk) accessed 29/06/2022

Scope of Assessment

Whilst there is a focus on knife crime, gun crime and gang violence in the Government Serious Violence Strategy this assessment will use a slightly broader definition of serious violence. Knife crime, gun crime and gang violence have a lower prevalence in Dudley than certain inner-city areas within the UK, but other forms of serious violence also have a serious impact on the health and wellbeing of Dudley residents.

As police data is one of the more robust data sources for analysis of violence, the police crime category of violence against the person will be frequently used in this document. Violence against the person subcategories is outlined below.

Table 1: Legal definitions of violent crime

Category	Definition
Assault with injury	Assault with non-serious injury or with serious injury (Actual Bodily
Common assault	When someone uses force, such as pushing or slapping, or makes threats of violence where there is no injury, or injuries are not serious.
Wounding/GBH	Assault with very serious injury (Grievous Bodily Harm)
Murder (homicide)	Where a person: <ul style="list-style-type: none"> • Of sound mind and discretion (i.e., sane); • unlawfully kills (i.e., not self-defence or other justified killing); • any reasonable creature (human being); in being (born alive and breathing through its own lungs - Rance v Mid-Downs Health Authority (1991) 1 All ER 801 and AG Ref No 3 of 1994 (1997) 3 All ER 936; • under the Queen's Peace (not in wartime); • <u>with intent to kill or cause grievous bodily harm (GBH).</u>
Harassment	Behaviour which is repeated and unwanted by the victim and which causes the victim alarm or distress.
Offensive weapon	Possession of any article made or adapted for use for causing injury to the person or intended by the person having it with him for such use by him or by some other person.
Other violence	Other types of violence not covered above

Health services also record A&E attendances due to assault and admissions due to assault and are useful in analysis of violence, albeit with some data quality issues. However, many incidents of violence will not result in hospital treatment or police involvement and are therefore more difficult to quantify. Survey data can assist in filling this gap.

Types of violence and definitions

Gun and knife crime

'Knife crimes' can fall under several offences, depending on if they're recorded as involving a "knife or sharp instrument". The ones where this is measured include homicide, attempted murder, threats to kill, various kinds of assault, robbery, rape, and sexual assault.

About half of knife offences in 2017/18 were a form of assault that caused injury, and about 43% were robberies. Homicides account for less than 1% of all recorded offences. A few years ago, the figures were the other way round—with robberies being more common than assaults.

The available figures suggest that when they happen recorded knife crimes are becoming more severe, though that may partly be the product of improved recording practices.

At the same time, sharp instruments account for between 30% and 40% of all homicides, making them the most common single method of killing.

It's also a crime to possess an offensive weapon unlawfully in public. In 2017, there were almost 21,000 offences dealt with in the criminal justice system for possessing a knife or sharp instrument.

Sexual violence (such as rape or sexual assault)

Rape is often described as unwanted or forced 'sex' – or 'sex' that happened without consent. But sex can only happen when everyone consents. Rape, on the other hand, is a form of sexual violence and a serious crime.⁷

Sexual assault happens when someone touches another person in a sexual manner – or makes that person take part in sexual activity with them – without consent.

Other forms of sexual violence include sexual harassment, indecent exposure (flashing), child sexual abuse and female genital mutilation (FGM). These forms of violence will be considered separately in a more detailed needs assessment.

Alcohol and drug-related violence

Alcohol is a factor in around 39% of all violent crimes in England and 49% in Wales, as well as contributing to public disorder and anti-social behaviour in communities across the country. Furthermore, there is an enormous amount of hidden harm associated with alcohol—through its role in exacerbating domestic and intimate partner violence, child neglect and the abuse of vulnerable individuals.

Drug related violence is more commonly related to organised crimes and gangs involved in the supply of drugs or violence associated with crimes committed to fund drug habitual drug use.⁸ However, some stimulants such as crack cocaine are associated with violent behaviour.

⁷ <https://rapecrisis.org.uk/get-informed/types-of-sexual-violence/>

⁸ <https://www.russellwebster.com/carolblack4/>

Gang violence and street violence

Many gang members carry weapons to protect themselves during drug dealing activity. Firearms and knives may also be carried for respect or retaliation, to expand their revenue collection base, or to emulate 'gangster' culture. Firearms may be 'used' without being discharged, for example to threaten and control others, and in connection with armed robberies, drug distribution, kidnap, and extortion. Gangs may also use acid and other corrosive substances as weapons to attack victims in retribution.

Street crime is a loose term for any criminal offense in a public place. The difference between street crime and white-collar crime is that street crime often involves violence and occurs in a public area, whereas white-collar crime is non-violent crime for the purpose of financial gain.⁹ According to London's Metropolitan Police Force, "Robbery, often called 'mugging', and thefts from victims in the street where their property is snatched, and the victim is not assaulted is also considered 'street crime'."

Domestic abuse

Domestic abuse is the systematic pattern of behaviour on the part of the abuser designed to control their partner.

The abuse can be physical, emotional, psychological, financial, or sexual. Anyone forced to alter their behaviour because they are frightened of their partner's reaction is being abused. It can begin at any stage of the relationship. Domestic violence is rarely a one-off. Incidents generally become more frequent and severe over time.¹⁰

National Picture ¹¹

- The number of police recorded domestic abuse-related crimes in England and Wales rose 6% in the year ending March 2021 to 845,734; this follows increases seen in previous years and may reflect improved recording by the police alongside increased reporting by victims.
- Of all crimes recorded by the police in the year ending March 2021, 18% were domestic abuse related. This was an increase of three percentage points compared with 15% the previous year.
- Demand on domestic abuse helplines increased in the year ending March 2021 with a 22% increase in people supported by the National Domestic Abuse Helpline in England; this is not necessarily indicative of an increase in the number of victims, but perhaps an increase in the severity of abuse being experienced, and a lack of available coping mechanisms.

⁹ ["Street Crime vs. White-Collar Crime: Definitions & Examples - Video & Lesson Transcript"](#). *Study.com*.

¹⁰ <https://www.refuge.org.uk/our-work/forms-of-violence-and-abuse/domestic-violence/>

¹¹ <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/domesticabuseinenglandandwalesoverview/november2021>

- The number of cases discussed per 10,000 adult females at multi-agency risk assessment conferences (MARACs) rose to 46 compared with 43 in the previous year.

The Local picture¹²

Note: It is important to note that due to the hidden nature of domestic abuse, it is difficult to ascertain an accurate picture of the extent of the problem. The COVID Pandemic has also impacted on figures.

- Between April 2020 and March 2021, 5284 domestic abuse crime incidents were recorded by West Midlands Police for the Dudley borough.
- Of these incidents, 74.2% of victims were female and 25.8% male.
- The MARAC¹³ team received 738 referrals.
- 271 applications presented to Dudley Council Homelessness Team where the reason for homelessness was a result of domestic abuse (both perpetrators and victims).
- Childrens Social Care received contacts for 6020 children (529 children progressing to a referral) in relation to domestic abuse.
- 34 referrals were accepted by the Child Adolescent Response team in relation to under 18s experiencing abuse in their own relationships.
- Since 2015, 9 deaths have been referred to the Community Safety Partnership for consideration to undertake a Domestic Homicide Review

Hate crimes

The law recognises five types of hate crime based on:

- Race
- Religion
- Disability
- Sexual orientation
- Transgender identity

Any crime can be prosecuted as a hate crime if the offender has either:

- demonstrated hostility based on race, religion, disability, sexual orientation, or transgender identity

Or

- been motivated by hostility based on race, religion, disability, sexual orientation, or transgender identity

Robbery

The offence is committed when someone steals from another person, while either threatening or using force against the victim.

¹² https://www.dudleysafeandsound.org/files/ugd/970b20_7ae337fb4e6045bbaa6737bb1d420fdf.pdf

¹³ MARAC = Multi-Agency Risk Assessment Conferences

Measuring the Need

Crime Survey for England & Wales

The Crime Survey for England & Wales (CSEW) provides a better reflection of the true extent of crime experienced by the population resident in England and Wales than police recorded statistics, because the survey includes crimes that are not reported to, or recorded by, the police.¹⁴

The CSEW is also a better indicator of long-term trends, for the crime types and population it covers, than police recorded crime because it is unaffected by changes in levels of reporting to the police or police recording practices.

The face-to-face Crime Survey for England and Wales (CSEW) was suspended on 17 March 2020 because of the coronavirus (COVID-19) pandemic. The survey was replaced Telephone-operated Crime Survey for England and Wales (TCSEW) in 2020 and 2021. However, Office for National Statistics (ONS) adjustments allow useful comparisons over time to be made.

Unlike the CSEW/TCSEW, recorded crime figures do not include crimes that have not been reported to the police or incidents that the police do not to record as crimes. It was estimated in the year ending March 2020 that around 42% of CSEW comparable crime was reported to the police, although this proportion varied considerably for individual offence types.

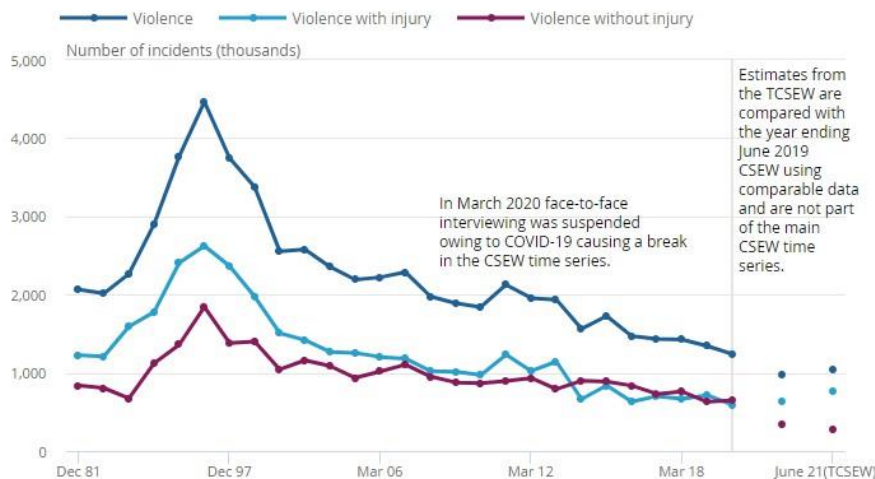
ONS survey data indicates a long term decrease in rates of violent crime from a peak in 1995 where 4.7% reported having been a victim of violent crime. The rates of reported victimisation have flattened in recent years with the latest full CSEW reporting a rate of 1.6%

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<https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/methodologies/userguidetocrimestatisticsforenglandandwales>

Figure 1: Timeseries estimates of violent crime

England and Wales, annual estimates



Source: Office for National Statistics – Crime Survey for England and Wales (CSEW) and Telephone-operated Crime Survey for England and Wales (TCSEW)

Although the TCSEW indicated no change in the total number of violence incidents, there was a 27% decrease in the number of victims compared with the year ending June 2019. This was largely driven by falls in the prevalence of violence where the offender was a stranger. This likely reflects a decrease in violence taking place in public spaces during national lockdown restrictions. However, there has been a large but non-significant increase in acquaintance violence. These estimates of violence are not indicative of levels of domestic abuse during the pandemic since the TCSEW was not able to produce such estimates.

Police Recorded Crime

Police recorded crime data showed a 4% decrease in violence with injury from June 2020 to June 2021 when 494,136 offences were recorded. Violence without injury offences remained stable at 716,521 in the year ending June 2021 compared with the year ending June 2020 (714,131).¹⁵

Homicide rates in England and Wales are low with 11.7 homicides per million population recorded in 2020.¹⁶ The trend shows that rates were increasing from the late 1960s to a peak in 2003 before falling consistently to 2015. A small increase in the rate has been observed from 2015 to 2020. The rate of homicide in the Black population in 2020 was 49.5 per million population which was approximately five times higher than the rate for the white population (9.4 per million population). The most common method of killing is a sharp instrument, highlighting the importance of reducing knife crime. Children under the age of 1 year had the highest rate of homicide (28 per million population). This was followed by those

¹⁵ ONS <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/crimeinenglandandwales/yearendingjune2021>

¹⁶ ONS <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/homicideinenglandandwales/yearendingmarch2020>

aged 16 to 24 years (23 per million population) and 35 to 44 years (18 per million population). Almost three quarters of homicide victims were male. For female victims, in nearly 35% of cases the suspect was their partner or ex-partner. For male victims the suspect was more likely to be stranger (33%) or a friend/acquaintance (23%). Of those convicted, 93% were male and 40% of male offenders were aged 16 to 24.

Offences involving a firearm make up a very small proportion of violent crime (approx. 0.2% of offences in 2020). Long term trends in recorded firearms offences show a rapid decline from 2003 to 2014 before a smaller rise between 2014 and 2019.

Police data shows an increasing trend in offences involving a knife or sharp instrument between 2015 and 2020. Hospital admissions for assault with a sharp instrument increased over the same period albeit at a slower rate and fell between 2019 and 2020.

Violence against the person offences recorded by the police in Dudley increased by 42% between 2020 and 2021.¹⁷ This was driven by increases in violence without injury and stalking and harassment offences, possibly in part due to improvements in crime recording practices. Violence with injury offences increased by 10% during the same period. The rate of violent offences in Dudley was below that for the West Midlands region in both 2020 and 2021. We would expect the trend in violent crime to be affected by COVID-19 e.g., through the closure of the nighttime economy for during various periods of 2020 and 2021.

Table 2: Violence against the person offences West Midlands authorities 2020-21

Number of violence offences 2020 & 2021			
Local Authority	2020	2021	% Change
Coventry	12,018	17,210	↑ 43.2%
Dudley	9,793	13,807	↑ 41.0%
Birmingham	49,792	69,577	↑ 39.7%
Sandwell	12,652	17,602	↑ 39.1%
Walsall	10,441	14,134	↑ 35.4%
Wolverhampton	11,668	15,792	↑ 35.3%
Solihull	5,573	7,386	↑ 32.5%
West Midlands	111,937	155,508	38.9%

¹⁷ ONS

<https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/datasets/recordedcrimedatabycommunitysafetypartnershiparea>

Figure 2: Rate of violent offences per 1,000 population, 2021

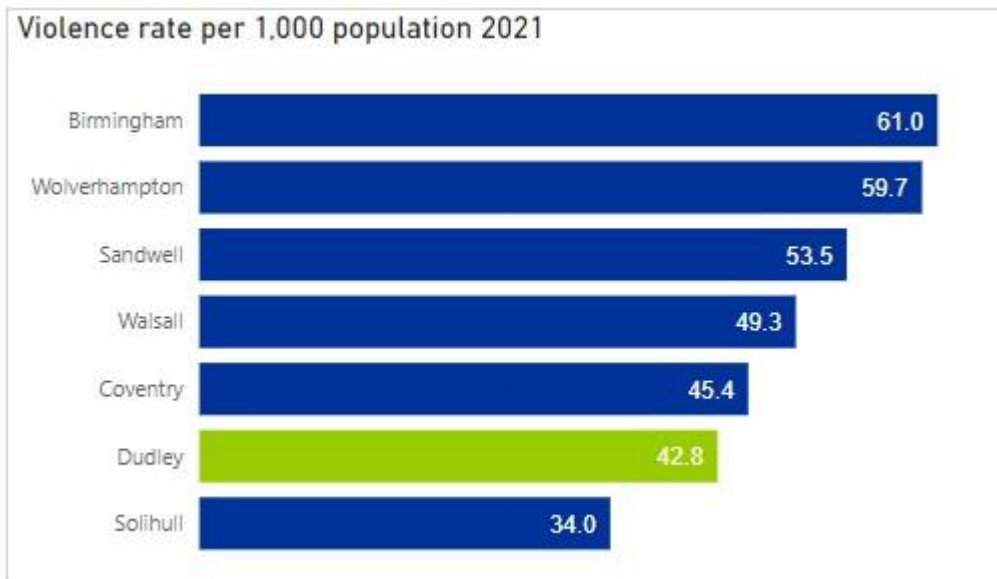
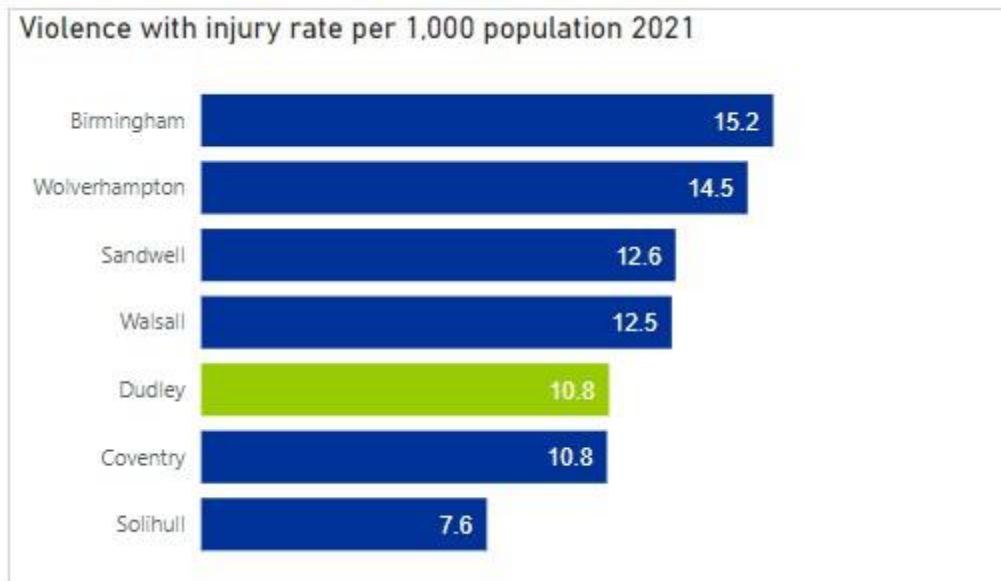


Table 3: Violence with injury offences West Midlands authorities 2020-21

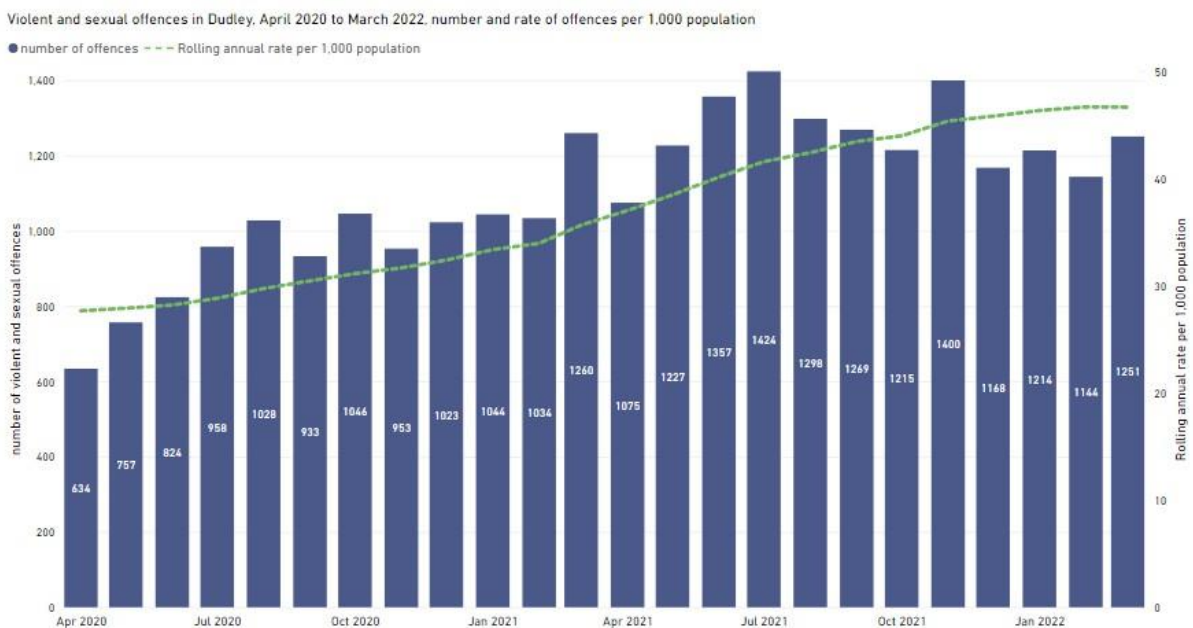
Local Authority	2020	2021	% Change
Birmingham	15,225	17,349	↑ 14.0%
Coventry	3,471	4,094	↑ 17.9%
Dudley	2,903	3,497	↑ 20.5%
Sandwell	3,818	4,150	↑ 8.7%
Solihull	1,595	1,652	↑ 3.6%
Walsall	3,246	3,588	↑ 10.5%
Wolverhampton	3,386	3,842	↑ 13.5%
West Midlands	33,644	38,172	13.5%

Figure 3: Rate of violence with injury per 1,000 population, 2021



Monthly police data shows a rapid increase in reported violence and sexual offences from April 2020 to August 2020. These rates have remained high from August 2020 onwards, possibly reflecting the impact of relaxation of COVID-19 restrictions.

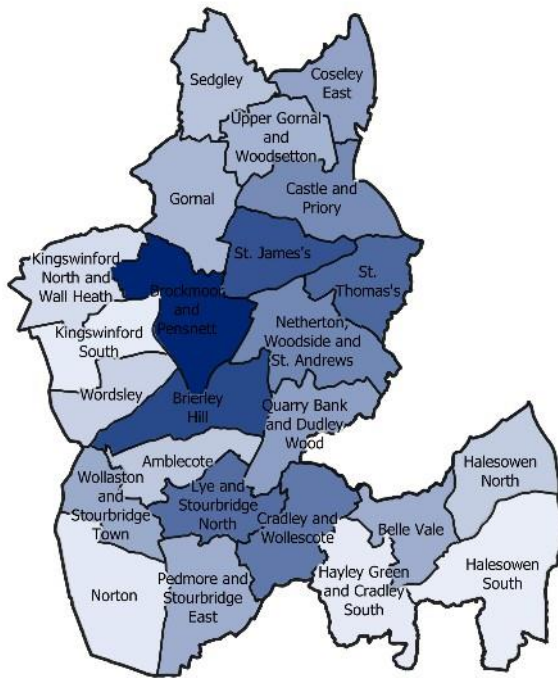
Figure 4: Violence and Sexual Offences Dudley – April 2020 to March 2022



Rates of reported violence and sexual offences were highest in the north of the borough in 2021–22 with the highest rate observed in Brockmoor & Pensnett, followed by Brierley Hill and St. James’s wards.

Figure 5: Violent crime in Dudley by ward

Rate of violence & sexual offences per 1,000 by Electoral Ward, 2021-2022



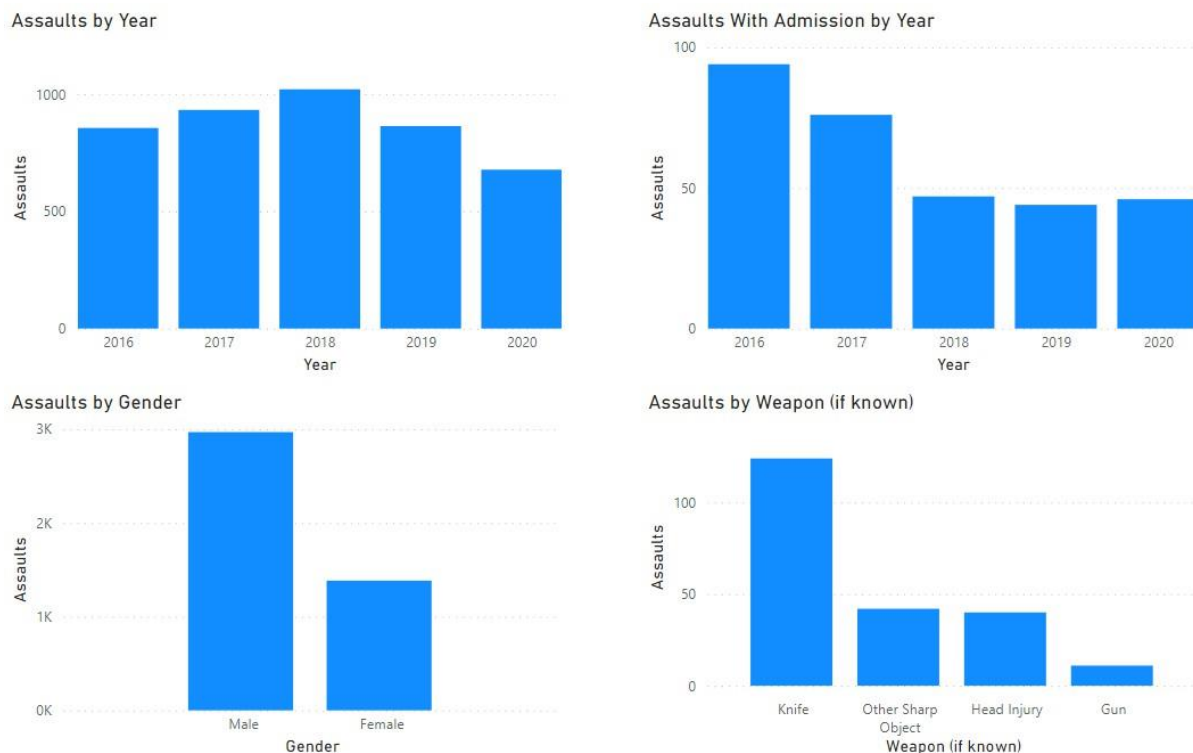
Violence & sexual offences per 1,000 by Electoral Ward, 2021-2022

Electoral Ward	incidents	Rate per 1,000 people
Brockmoor and Pensnett	1,594	117.7
Brierley Hill	1,528	100.5
St James's	1,510	95.8
St Thomas's	1,358	85.2
Lye and Stourbridge North	1,042	82.1
Cradley and Wollescote	1,041	76.9
Netherton, Woodside and St Andrews	1,082	69.3
Castle and Priory	1,036	67.8
Quarry Bank and Dudley Wood	804	57.9
Coseley East	709	55.8
Wollaston and Stourbridge Town	680	52.1
Pedmore and Stourbridge East	625	50.4
Belle Vale	717	50.3
Upper Gornal and Woodsetton	661	47.7
Gornal	605	45.5
Sedgley	476	39.7
Amblecote	487	37.3
Halesowen North	450	35.3
Wordsley	421	33.1
Kingswinford North and Wall Heath	331	27.5
Norton	260	21.7
Hayley Green and Cradley South	251	20.6
Kingswinford South	251	20.4
Halesowen South	239	19.3
Total	15,042	46.7

Health impact

Accident and Emergency (A&E) attendances at Dudley Group NHS Foundation Trust (Russells Hall Hospital) for assault increased between 2016 and 2018 before reducing during 2019 and 2020. The fall in 2020 could be partly attributed to the impact of COVID-19. Assaults with admission also fell between 2016 and 2020 but there was a small increase from 2019 to 2020. Nearly 70% of attendances for assault were male patients. Around 5% of assaults involved a weapon and of the assaults with a weapon 57% were knife related.

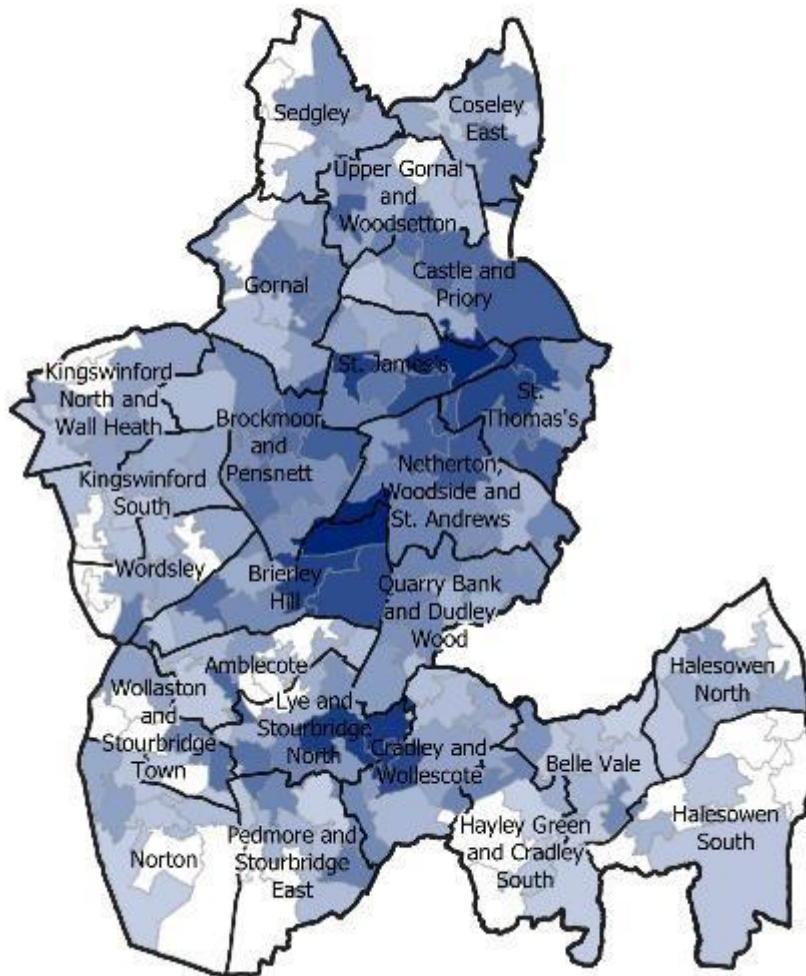
Figure 6: Russells Hall Hospital A&E Attendances 2016 to 2020



Like the police data, rates of attendances were highest for people living in the North of the borough. However, it is likely that residents in areas of the borough further away from Russells Hall Hospital might attend A&E departments outside of Dudley.

Figure 7: A+E attendances at Russells Hall Hospital for assault, per 100,000 population by LSOA 2016-2020

A+E attendances for assault, rate per 100,000, by LSOA, 2016-2020



Source: Dudley Group of Hospitals Foundation Trust

Higher rates of A+E attendances for assault can be seen in the areas around St James's ward, Brierley Hill and parts of Lye & Stourbridge North and Cradley & Wollescote.

Hospital Admissions

Admissions for assault for Dudley residents have shown a decrease in the longer term particularly for males. This is similar to the pattern observed across the whole West Midlands Police Force area.

Figure 8: Hospital admissions for assault

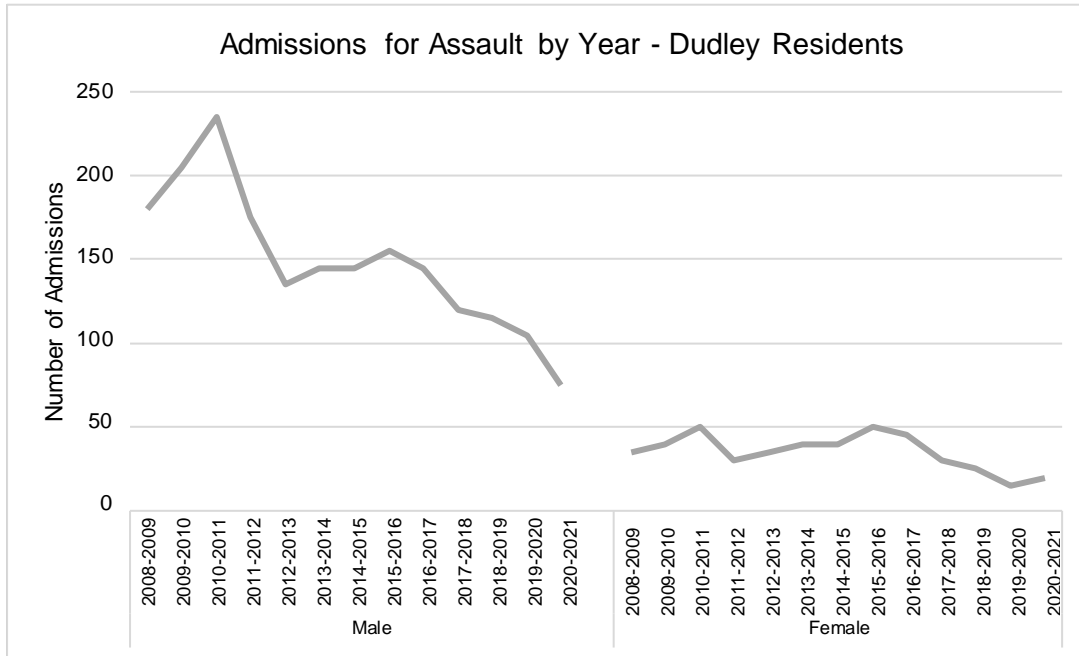
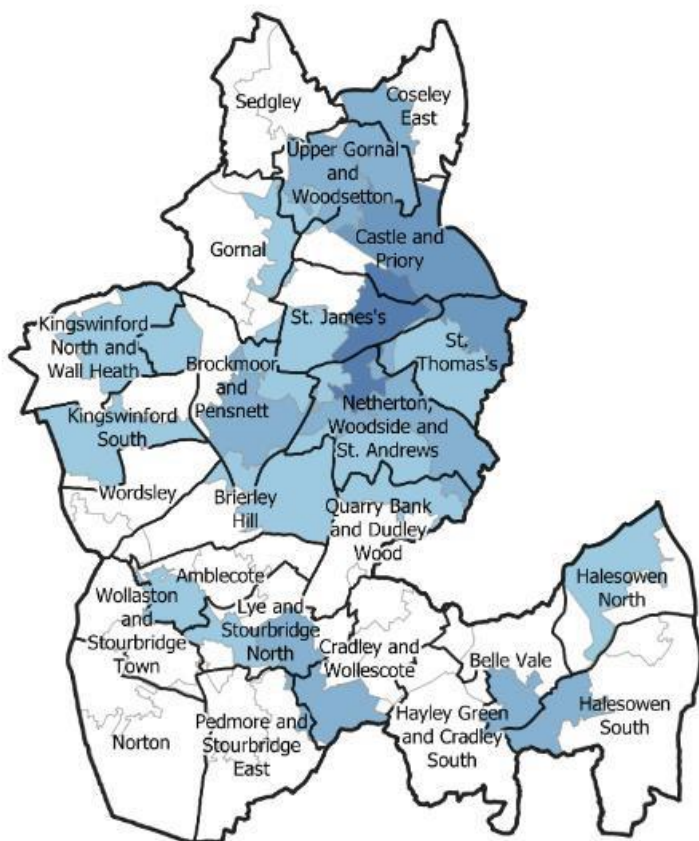


Figure 9: admissions for assault by MSOA

Hospital admissions for assault, by MSOA, 2018/19 to 2020/21



Source: West Midlands Violence Reduction Partnership

The pattern of hospital admission numbers for assault is similar to that of A+E attendances, with higher numbers around the eastern and central areas of the borough.

Knife Crime

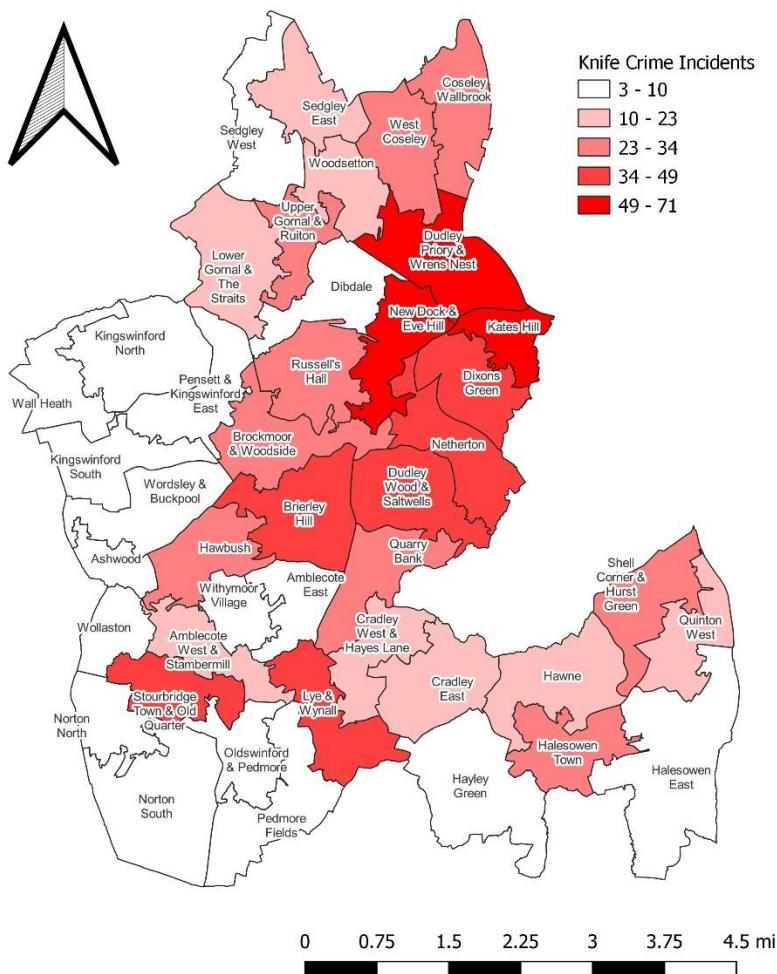
The definition of Knife Crime includes such offences recorded by West Midlands Police as Violence Against the Person, Robbery, Rape and Sexual Assault, Possession of Weapons and Public Order offences where a knife was involved.

The following map shows West Midlands Police recorded knife crime from November 2018 to October 2021 aggregated to neighbourhood level.

Incidents are highest in the North East of the borough. The three neighbourhoods (MSOAs) with the highest number of incidents recorded are New Dock & Eve Hill, Dudley Priory & Wrens Nest and Kates Hill. Analysis by the West Midlands VRP show a correlation between knife crime, deprivation and ethnic diversity.

VRP analysis also shows that 28% of victims of recorded knife crime assaults in the West Midlands are known to be between 16 and 24 years old. Around two-thirds are under 35 years old and 12% of victims of knife crime - about one in eight - are under the age of 16.

Figure 10: knife crime incidents by neighbourhood, November 2018 to October 2021.



Youth Offending

The number of offences recorded in Dudley between April 2018 and March 2021 has reduced significantly. In 2018/2019, there were 388 offences compared with 225 in 2020/2021, a reduction of 163. This follows a reduction in the number of offences between 2019/2020 and 2020/2021 of 73.

The number of young people offending has also decreased year on year, from 165 in 2018/2019 to 146 in 2019/2020 and 95 in 2020/2021. (19 less, then 51).

First time entrants to the youth justice system in Dudley have fallen between 2016 and 2019. Dudley's rate per 100,00 for the latest data is lower than that of the national average and the West Midlands average.

The wards with the highest numbers of youth offenders in 2021/22 are concentrated in the central and north regions of the borough and contain areas with high levels of income deprivation affecting children.

Figure 11: first time entrants to the youth justice system

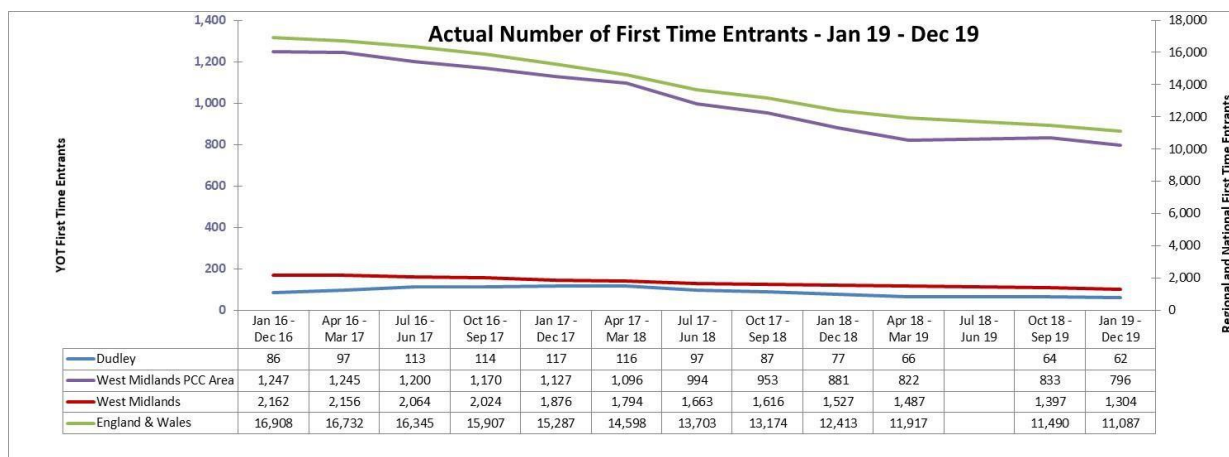


Table 4: Youth Offences by Ward 2020/21

Ward Name	Cluster	Count	%
St Thomas's	Dudley Central	7	9%
Castle & Priory	Dudley North	6	7%
Lye & Stourbridge North	Stourbridge	6	7%
Netherton, Woodside & St Andrew's	Dudley Central	6	7%
Upper Gornal & Woodsetton	Dudley North	6	7%
Amblecote	Stourbridge	5	6%
Cradley & Wollescote	Halesowen	5	6%
Pedmore & Stourbridge East	Stourbridge	5	6%
Quarry Bank & Dudley Wood	Dudley Central	5	6%
Belle Vale	Halesowen	3	4%
Brockmoor & Pensnett	Brierley Hill	2	2%
Gornal	Dudley North	2	2%
Hayley Green & Cradley South	Halesowen	2	2%
Sedgley	Dudley North	2	2%
St James's	Dudley Central	2	2%
Brierley Hill	Brierley Hill	1	1%
Coseley East	Dudley North	1	1%
Wordsley	Brierley Hill	1	1%
Halesowen North	Halesowen		
Halesowen South	Halesowen		
Kingswinford North & Wall Heath	Brierley Hill		
Kingswinford South	Brierley Hill		
Norton	Stourbridge		
Wollaston & Stourbridge	Stourbridge		

Violence against the person was the most common recorded offence in 2020/21 although the number of offences fell from 105 in 2019/20 to 65 in 2020/21

Table 5: type of offence committed by youth offenders 2020/21

Offence Type	Count	%
Violence Against the Person	64	28%
Motoring Offences	33	15%
Drugs	28	12%
Criminal Damage	15	7%
Domestic Burglary	14	6%
Breach Of Bail	11	5%
Theft And Handling Stolen Goods	10	4%

Locally restricted data in the Serious Youth Violence Data Toolkit produced by the Youth Justice Board (YJB) show that the rate of serious youth violence offences in Dudley have fallen from 2016. In 2020/21 the rate was below the national and regional rates but above the rate in the comparator group of similar Youth Offending Teams. The number of knife and offence weapons offences have also seen a slight reduction over the period from 2016/17 to 2020/21.

County Lines¹⁸

County Lines drug distribution sees organised criminals from the big urban centres, such as London, Liverpool and Birmingham, using children and vulnerable people to transport drugs to smaller cities, towns and rural areas. Children and vulnerable adults are often targeted to be used as couriers as they are less likely to be suspected.

County Lines is a growing issue. In January 2019, the National Crime Agency published a report that suggested the estimated number of County Lines had more than doubled in a year from 720 in 2018 to more than 2,000 in 2019. This is likely to be a conservative estimate and to have increased since 2019.

Involvement in County lines in Dudley is relatively low in comparison to some other areas in Birmingham and Sandwell, but the map below shows that the worst affected areas are New Dock & Eve Hill and Dixon's Green.

¹⁸ West Midlands Violence Reduction Unit, Strategic Needs Assessment, January 2022

Figure 12: County Lines Involvement, by MSOA, January 2019 to October 2021

County Lines Involvement, by MSOA, January 2019 to October 2021



Source: West Midlands Violence Reduction Partnership

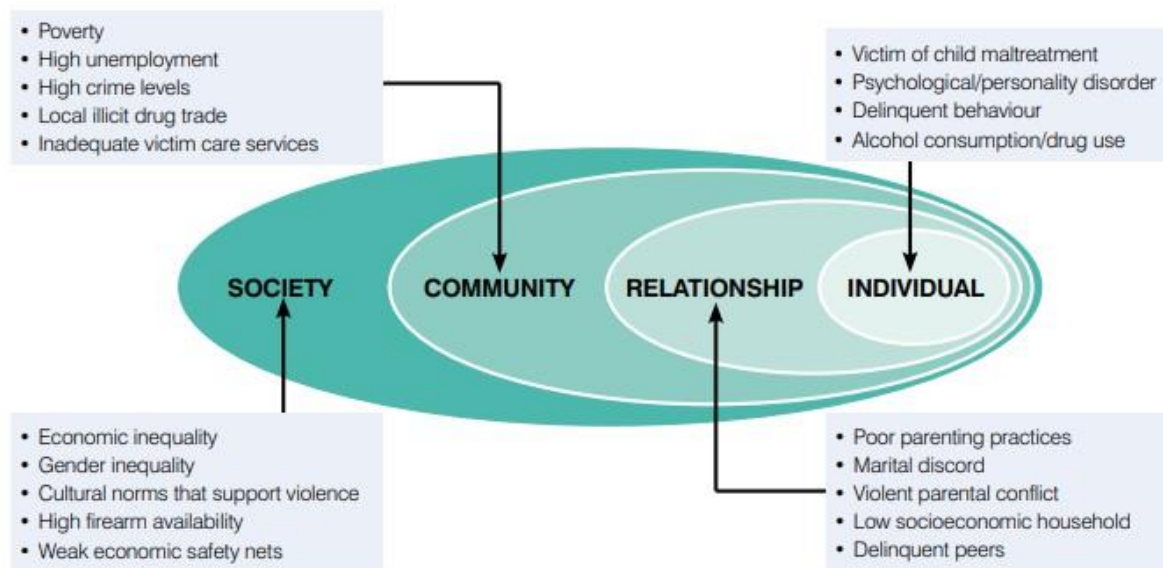
Determinants & Risk Factors for Violence

A wide range of factors can affect individuals' risks of involvement in violence. These risk factors can be cumulative in effect and can interact in different ways to affect vulnerability to violence. They can also be moderated by various protective factors. For example, children who grow up in neighbourhoods where there are high levels of crime and socio-economic deprivation can be at increased risk of involvement in violence. However, supportive parenting, strong social cohesion, and individual factors such as high resilience can moderate this risk.

The World Health Organization uses an ecological model to show the interaction between risk factors for violence at the individual, relationship, community, and societal levels. Different types of violence also have specific risk factors.

Early life experiences

Figure 13: cross cutting risk factors for violence



Adapted from World Health Organization, 2004

Many of the factors that affect individuals' risks of violence arise through their circumstances and experiences in early life. For example, children can be at greater risk of maltreatment if they are born to parents that are young, single, who suffer from mental health conditions or substance abuse, or that have violent relationships. The links between these early life risk factors and child abuse can arise from poor bonding between parents and children and poor parenting skills and resources.

The experiences that children have early in life also impact on their risks of involvement in violence in adolescence and adulthood. Particularly during the first few years of life, children's brains are shaped by their experiences and the environments in which they grow up. Exposure to abuse or severe neglect can cause the brain to develop with a focus on short term survival, at the cost of longer-term well-being. Abuse and neglect in childhood can contribute to children having lower self-esteem, poorer social skills, poorer mental wellbeing and to consider violence as a normal way of resolving conflict.

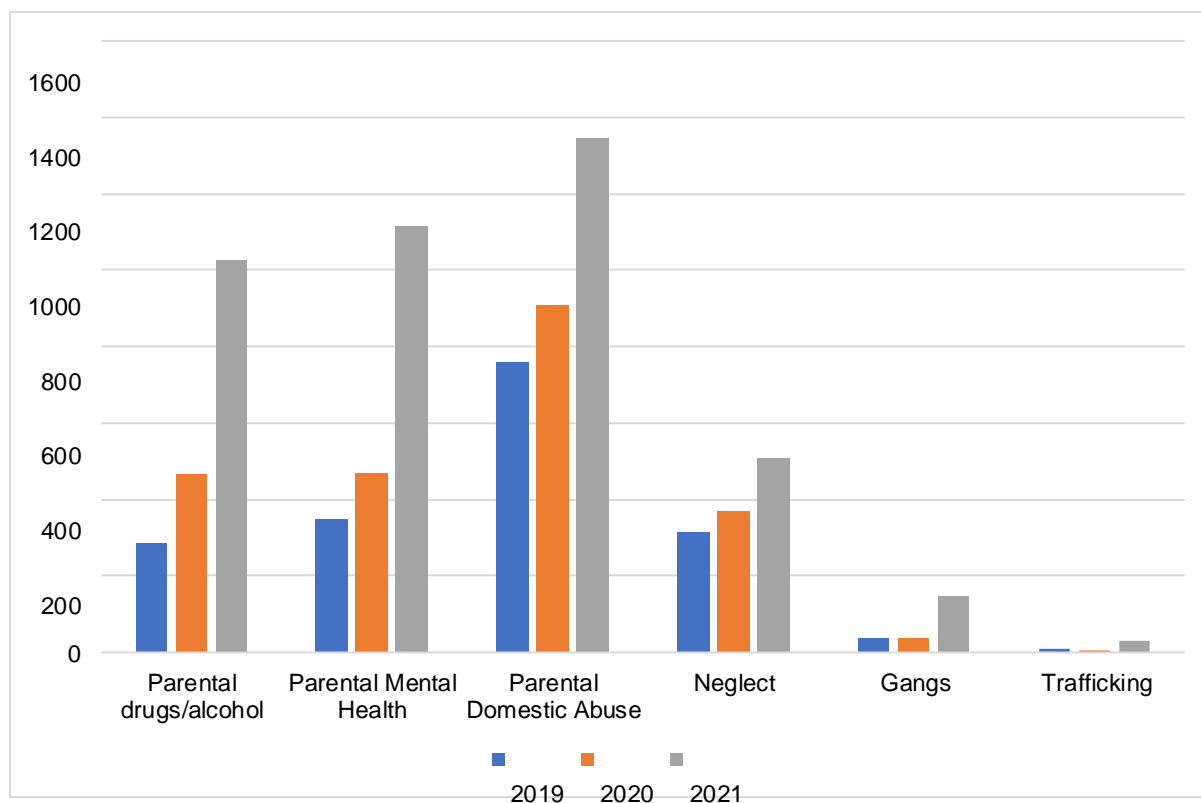
A wide range of studies have shown that children who suffer violence and other adverse childhood experiences (ACEs) are at increased risk of further victimisation and of becoming perpetrators of violence in later life.¹⁹

ACEs include:

- Emotional, physical, or sexual abuse
- Emotional or physical neglect
- Violence against household members
- Living with household members who were substance abusers, mentally ill, suicidal, or imprisoned
- Having one or no parents, or experiencing parental separation or divorce
- Bullying, or exposure to community or collective violence

In Dudley, ACEs identified by children’s social services have increased in several categories between 2019 and 2021. The most common types of ACEs recorded were parental drug/alcohol abuse, parental mental health issues and parental domestic abuse. There were also increases in reports of neglect, involvement with gangs and trafficking.

Figure 14: Adverse childhood experiences identified by children’s social services by type and year



The rates of children identified with either parental alcohol/drug abuse, parental mental health issues or parental domestic abuse (known as the toxic trio) were highest in children under 5 in Dudley between 2019 and 2021. The rate of children in need due to neglect in Dudley is higher than the regional and national averages (234.0 per 100,000 persons aged <18 vs 193.5 for the West Midlands Region and 181.4 for England).

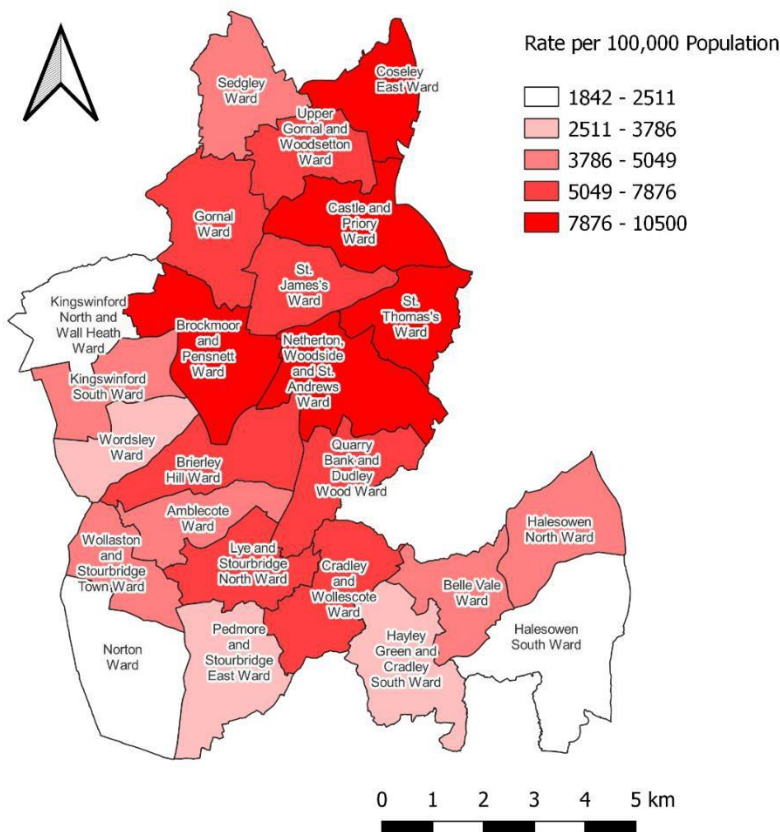
¹⁹ <https://www.gov.scot/publications/understanding-childhood-adversity-resilience-crime/>

Table 6: numbers and rates of children and young people exposed to “toxic trio” of parental risk factors

Age Group	Count	Population (2020 MYE)	Rate per 100,000 Population
Unborn*	160		
Under 5	1,555	18,466	8,420.9
5 to 9	1,392	20,128	6,915.7
10 to 14	1,133	19,718	5,746.0
15 to 17	535	7,742	6,910.4
Total (exc unborn)	4,615	66,054	6,986.7

Rates of the toxic trio by ward between 2019 and 2021 were highest in central and northern wards within the borough. The same wards identified as having higher levels of deprivation.

Figure 15: Rates of the "Toxic trio" of parental risk factors, 2019-2021



Deprivation and social inequality

There are strong relationships between deprivation and violence, which are likely to reflect a clustering of risk factors for violence in poorer areas such as low educational attainment, unemployment, teenage parenting, single parent families, higher crime rates and substance

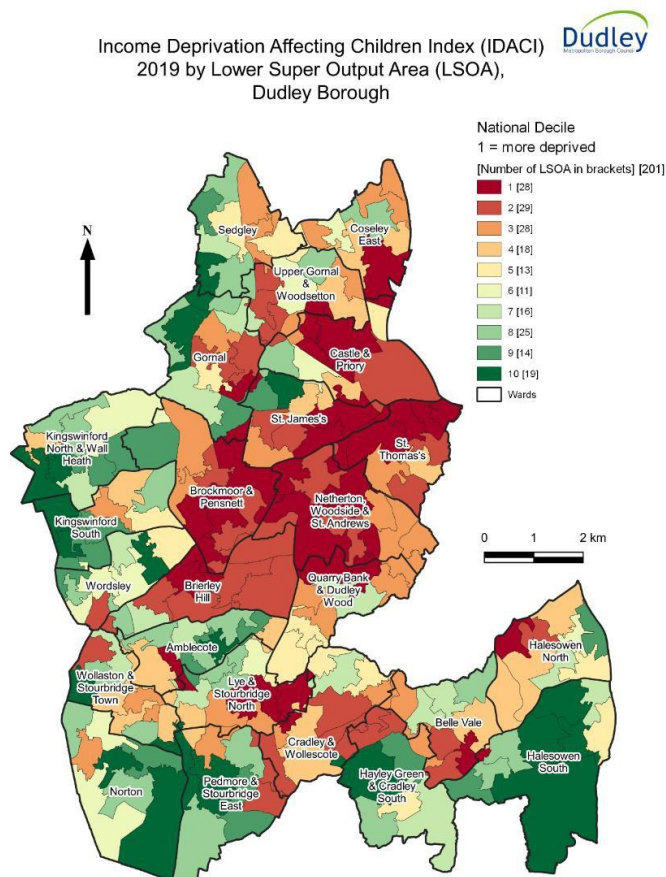
misuse. Across England, emergency hospital admission rates for violence are around five times higher in the most deprived communities than the most affluent.

Research carried out by the Greater London Authority (GLA) in collaboration with the Mayor’s Office of Policing & Crime (MOPAC) in 2018 reveals a strong statistical association between rates of serious youth violence and social, economic and health inequalities.

Poverty and deprivation feature prominently in the analysis and may well be the biggest determining factor in explaining the prevalence and risk of violence in populations and communities.

Dudley is the 9th most deprived local authority area in the West Midlands region based on IMD 2019 rankings and 22 of the 201 Lower-layer Super Output Areas (LSOAs) are amongst the 10% most deprived in England. The most deprived areas in Dudley are in the main concentrated in the northeast of the local authority area and in the wards of Castle & Priory, St James’s, St Thomas’s, Brockmoor & Pensnett, Netherton, Woodside & St Andrews and Brierley Hill. There are also areas of high deprivation in the Lye area, Coseley East and Belle Vale. The pattern of deprivation affecting children (Income Deprivation Affecting Children Index (IDACI)) is very similar across Dudley.

Figure 16: Map of Dudley borough showing the Income Deprivation Affecting Children Index (IDACI)



Source: Indices of Deprivation 2019, MHCLG
Produced by: Intelligence Team, Dudley MBC, 2019
© Crown Copyright and database right 2019. Ordnance Survey 100019566.

2019

Dudley has a higher percentage of children (aged under 16) in low-income families than the national average (20.7% vs 17.0% for England 2016)

Early Years Development

The proportion of children in Dudley reaching a good level of development in the Early Years Foundation stage (end of reception) is below the national average (67.1% vs 71.8% for England). The percentage is lower for boys (59.5%) than girls (74.8%). Dudley attainment in Early Learning goals is below the national average in areas of learning (see table below). Low attainment in communication and language is particularly concerning given the links with emotional and behavioural disorders, school exclusions and youth offending.

Table 7: Early years development

LA/region name	Dudley	WEST MIDLANDS	ENGLAND
Number of children reception age	3,890	71,248	638,995
Percentage of children achieving expected attainment in early learning goals			
Communication and Language	77.0%	79.8%	82.2%
Physical Development	80.7%	84.9%	87.1%
Personal, Social and Emotional Development	80.0%	82.8%	84.8%
Literacy	65.9%	69.3%	71.4%
Mathematics	73.8%	76.0%	78.5%
Understanding the World	77.6%	81.2%	83.9%
Expressive arts and design	80.5%	84.3%	87.2%
All prime areas of learning	74.2%	77.2%	79.2%

Analysis of early year development goals by ward of residence shows that wards in the North of the borough, where deprivation levels are higher, have lower percentages of pupils achieving a good level of development.

Table 8: Pupils achieving good level of development by ward in 2019

Resident Ward Name	Percentage of Pupils Achieving Good Level of Development
Castle and Priory	56.7%
Coseley East	58.0%
St Thomas's	58.3%
Brockmoor and Pensnett	61.0%
Netherton, Woodside and St Andrews	62.7%
St James's	63.1%
Cradley and Wollescote	63.8%
Belle Vale	64.0%
Lye and Stourbridge North	64.7%
Gornal	65.8%
Upper Gornal and Woodsetton	66.2%
Quarry Bank and Dudley Wood	66.7%
Brierley Hill	67.0%
Halesowen North	68.5%

Wollaston and Stourbridge Town	71.0%
Wordsley	72.2%
Sedgley	72.6%
Kingswinford South	73.2%
Kingswinford North and Wall Heath	73.3%
Norton	76.2%
Hayley Green and Cradley South	76.4%
Amblecote	77.9%
Halesowen South	78.3%
Pedmore and Stourbridge East	82.9%
Dudley LA	67.1%

School Years

There is no evidence that permanent school exclusion directly causes violent behaviour or involvement in crime, but there are strong correlations.

The Timpson Review (2019)²⁰ highlighted that “23% of young offenders sentenced to less than 12 months in custody (in 2014) had been permanently excluded from school”. That is one in four young people in custody that have been permanently excluded from school, which compares to one in 1,000 of the whole secondary school population who become excluded.

There were 9 permanent exclusions in Dudley primary schools (0.03 per 100 pupils) and 40 in secondary schools (0.22 per 100 pupils) in 2019/20. The rates were above the rates for primary and secondary schools in England for the same period (0.02 and 0.13 per 100 pupils respectively).²¹

Some secondary schools had exclusion rates more than 3 times the national average rate in the period from 2019-21. Some primary schools had exclusion rates more than 10 times the national average rate. However, in primary schools 1 or 2 exclusions are enough to increase the rate above the national average.

Table 9: Rates of Exclusions 2019 – 2021 in Secondary and Special Schools

School Name	Type	Exclusions	Rate per 1,000 Pupils
Beacon Hill Academy	Secondary	23	0.93
Pegasus Academy	Secondary	15	0.85
St James Academy	Secondary	14	0.74
The Pedmore High School	Secondary	11	0.64
The Link Academy	Secondary	17	0.63
Thorns Collegiate Academy	Secondary	15	0.59
The Dormston School	Secondary	9	0.37
Ellowes Hall Sports College	Secondary	12	0.37
Leasowes High School	Secondary	5	0.33
The Earls High School	Secondary	9	0.32

²⁰

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/807862/Timpson_review.pdf

²¹ <https://explore-education-statistics.service.gov.uk/>

Bishop Milner Catholic College	Secondary	7	0.32
The Crestwood School	Secondary	6	0.23
Ridgewood High School	Secondary	5	0.22
The Wordsley School	Secondary	5	0.21
Kingswinford Academy	Secondary	4	0.15
Windsor High School and Sixth Form	Secondary	6	0.13
Summerhill School	Secondary	3	0.10
Redhill School	Secondary	2	0.06
Old Swinford Hospital	Secondary	1	0.05
Rosewood School	Special	4	3.42
The Sutton School and Specialist College	Special	2	0.43
Pens Meadow School	Special	0	0.00

Table 10: Rates of Exclusions 2019 – 2021 in Primary Schools

School Name	Type	Exclusions	Rate per 1,000 Pupils
The Bromley-Pensnett Primary School	Primary	3	0.37
Dingle Community Primary School	Primary	2	0.36
Thorns Primary School	Primary	2	0.35
Hawbush Primary School	Primary	2	0.33
Tenterfields Primary School	Primary	1	0.18
Beechwood Church of England Primary	Primary	1	0.18
Caslon Primary Community School	Primary	1	0.16
Brierley Hill Primary School	Primary	1	0.16
Blowers Green Primary School	Primary	1	0.16
Hob Green Primary School	Primary	1	0.14
Colley Lane Primary Academy	Primary	2	0.13
Priory Primary School	Primary	2	0.12
St Mark's CofE Primary School	Primary	1	0.12
Olive Hill Primary Academy	Primary	1	0.10
Red Hall Primary School	Primary	1	0.10
Withymoor Primary School	Primary	1	0.08
Queen Victoria Primary School	Primary	1	0.07
St James's CE Primary School	Primary	1	0.07
Jessons CofE Primary School (VA)	Primary	1	0.05
Peters Hill Primary School	Primary	1	0.04

Pupil absence is 4.9%, the same as the West Midlands average and slightly above the England average of 4.7% (2020/21).

VRP Risk Index

In 20/21 the West Midlands VRP developed a risk index based on three factors with the strongest correlations towards violence:

- Deprivation affecting children

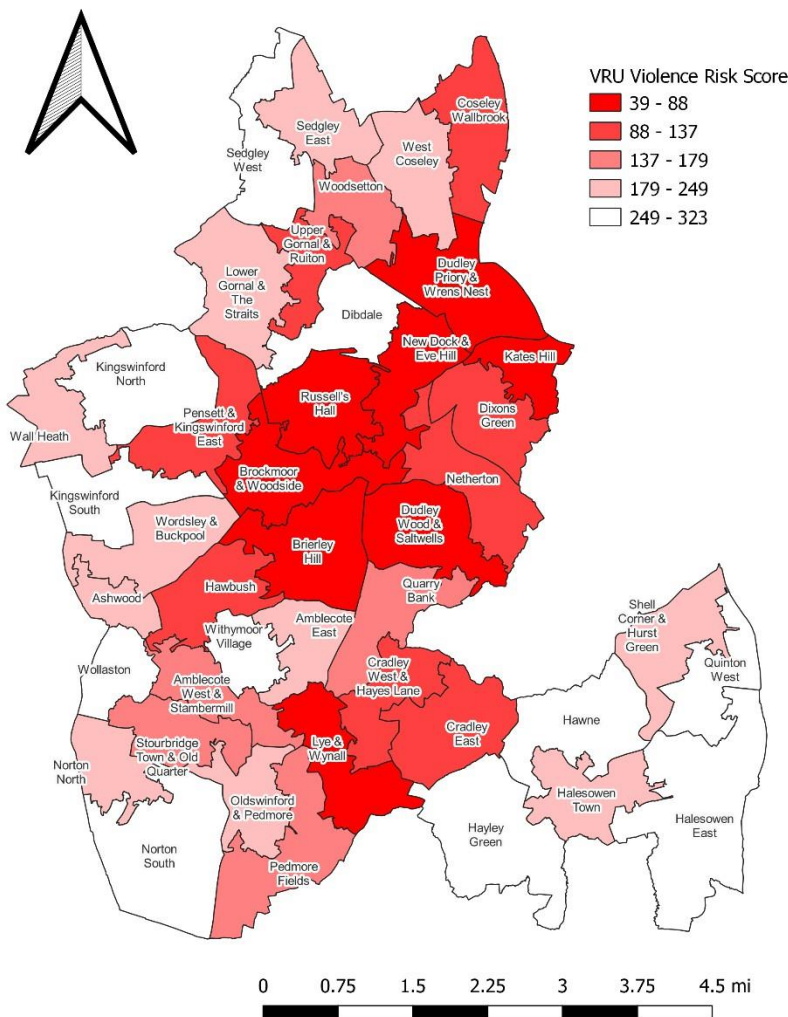
- Rates of mental health
- Lack of educational development in early years

This index is based on established research and draws on data highlighted by the London based GLA/MOPAC report.²²

Whilst the index cannot identify causation between the factors used and violence it is intended to indicate how the risk factors vary at a local geographic level and potential risk at neighbourhood level to help prioritise violence prevention work.

The map below shows that the violence risk score is highest in the northwest of the borough. The three Middle Super Output Areas (MSOAs) with the highest risk score are Brockmoor and Woodside, Brierley Hill, and Kates Hill.

Figure 17: VRP violence risk score by MSOA



Alcohol and drugs

Alcohol consumption is a risk factor for many types of violence, including child abuse, youth violence, intimate partner violence, sexual violence, and elder abuse. Around half of all violence in England and Wales is thought to be committed by individuals who are under the

²² <https://data.london.gov.uk/dataset/a-public-health-approach-to-serious-youth-violence>

influence of alcohol (44% in 2010/1117), while a fifth of all violent incidents occur in or around drinking premises.

Individuals who start drinking at an earlier age, who drink frequently and who drink in greater quantities are at increased risk of involvement in violence as both victims and perpetrators. Importantly, alcohol has a dose responsive relationship with violence, with the acute risks of violence increasing with the amount of alcohol consumed.⁸⁰ Violence that occurs under the influence of alcohol can also result in more serious injury.

Alcohol and violence can be linked in many ways, including:

- Alcohol consumption can affect physical and cognitive functioning, reducing self-control, the ability to process information and the ability to recognise warning signs for violence;
- Beliefs that alcohol causes aggression can lead to the use of alcohol as preparation for violence, or to excuse violent acts;
- Dependence on alcohol can mean individuals neglect care responsibilities;
- Poorly managed pubs, bars and nightclubs (e.g. crowding, poor staff practice, poor cleanliness, cheap drinks) can create environments where violence is more likely;
- Alcohol can be used as a coping mechanism by victims of violence;
- Alcohol and violence can be linked through shared risk factors that make people vulnerable to both behaviours.

The availability and accessibility of alcohol within society contributes to levels of violence. For example, communities that have a greater density of alcohol outlets typically see higher levels of violence.

Alcohol related admissions and mortality in Dudley are above the national average.

Figure 18: Alcohol related public health indicators ²³

Indicator	Period	Recent Trend	Dudley		Region England		England		
			Count	Value	Value	Value	Worst	Range	Best
Alcohol-related mortality: New method. This indicator uses a new set of attributable fractions, and so differ from that originally published.	2020	➔	156	48.2	42.9	37.8	68.9		21.5
Alcohol-specific mortality	2020	➔	62	19.7	16.1	13.0	29.3		5.5
Admission episodes for alcohol-related conditions (Narrow): New method. This indicator uses a new set of attributable fractions, and so differ from that originally published.	2020/21	➔	1,559	490	515	456	805		251
Admission episodes for alcohol-related conditions (Broad): New method. This indicator uses a new set of attributable fractions, and so differ from that originally published.	2020/21	➔	5,177	1,601	1656	1500	3,459		962
Admission episodes for alcohol-specific conditions	2020/21	➔	1,845	594	581	587	2,276		298

Dudley has higher percentage of regular drinkers at age 15 than regional and national averages (8.9% vs 5.5% for the West Midlands Region and 6.2% for England. Data from 2014/15). More positively, admissions for alcohol specific conditions in under 18s in Dudley are below the national average (19.2 per 100,000 population in 2018/19 to 2020/21 vs 29.3 for England).

Illicit drugs are also strongly linked to violence. In around a fifth of all cases of violence in England and Wales, victims perceive the perpetrator to have been under the influence of drugs. Drug use can increase individuals' risks of both perpetrating and being a victim of violence, while victims of violence can be at increased risk of drug use.

²³ Office for Health Improvement & Disparities. Public Health Profiles. [accessed 04/07/2022] <https://fingertips.phe.org.uk>
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Different drugs have different effects. Some, such as cocaine and other stimulants, can be associated with increased aggression while others may increase risks of victimisation, for example with sedative effects putting people at risk of sexual assault.

Violence is also an inherent part of illicit drug markets, which lack legal means of resolving business conflicts. For example, violence can be used in the drug trade to enforce the payment of debts, resolve competition between dealers and punish informants.

Local data shows that in 2018 8% of year 10 pupils reported having tried cannabis, 1% had tried cocaine, 1% ecstasy, 1% solvents and 1% novel psychoactive substances (NPS).

The Percentage of children (aged 15) in Dudley who had taken drugs (excluding cannabis) in the last month was below the national average (0.4% vs 0.9% for England 2014/15). The percentage that had ever tried cannabis at age 15 was similar to the national average (10.1% vs 10.7% for England 2014/15).²⁴

Peer relationships and gangs

The relationships that young people form with peers can impact on their risks of violence. Having delinquent friends increases a person's risk of involvement in violence as well as other anti-social behaviour, while disengagement from delinquent peer groups can reduce violent behaviour. There are two types of delinquent youths: early onset delinquents, who have conduct disorders from early childhood and whose aggressive and antisocial behaviour can persist into adulthood; and a larger group of late onset delinquents who adopt delinquent behaviour in adolescence but generally grow out of this as they become young adults.

Examples of risk factors for youth violence:

- Male gender
- Neglect and abuse in childhood
- Personality traits e.g., hyperactivity/conduct disorder
- Poor family functioning
- Domestic violence in the home
- Delinquent peers and gang involvement
- Living in a high crime area
- Alcohol consumption
- Social inequality

Cultural and social norms

There are many different cultural and social norms that can contribute to violence. For instance, traditional beliefs that men have a right to control or discipline women through physical means make women vulnerable to violence by intimate partners and place girls at risk of sexual abuse. Cultural acceptance of violence as a private affair hinders outside intervention and prevents victims from gaining support, while in many cultures victims of violence feel stigmatised, stopping incidents from being reported. Cultural intolerance, dislike, and stereotyping of 'different' groups within society (e.g., based on nationality, ethnicity, sexual orientation) can also contribute to violent or aggressive behaviour towards such groups.

²⁴ What About YOUth (WAY) survey 2014/15

Disability

Factors such as exclusion from education and employment, stigma and discrimination, a need for personal assistance with daily living, reduced physical or emotional defences and communication barriers can make disabled individuals vulnerable to violence. This can include, for example, abuse and neglect in homes and community care settings, bullying in schools and hate crime in communities. Systematic reviews have shown that both disabled children and adults are at increased risk of violence, and have suggested that those with mental health or intellectual impairments can be particularly vulnerable

Adult psychiatric disorders, childhood conduct disorder and violence

As well as being vulnerable to victimisation, research shows that adults with psychiatric disorders can be at increased risk of perpetrating violence. Personality disorders are associated with violence and are highly prevalent among violent offenders. An English study of incarcerated serious violent offenders found 62% had antisocial personality disorder.

The Small Area Mental Health Index (SAMHI) is a composite annual measure of population mental health for each Lower Super Output Area (LSOA) in England. The SAMHI combines data on mental health from multiple sources (NHS-Mental health-related hospital attendances, Prescribing data – Antidepressants, QOF - depression, and DWP - Incapacity benefit and Employment support allowance for mental illness) into a single index.

The index points to the central and northern LSOAs in Dudley as having the highest levels of mental health need. It should be noted that this index can be affected by the propensity of the population to seek treatment for mental health problems.

The estimated prevalence of emotional and conduct disorders in children (aged 5-16) in Dudley is slightly higher than the national average. These estimates are only adjusted for age, sex and social class and are based on a 2004 survey and therefore should be treated with caution.

The percentage of pupils with a learning disability is higher in Dudley than the national average (7.0% vs 5.6% for England 2017).

Risk factors and Protective Factors for Violence

	Individual	Relationships	Community	Society
Protective factors	Healthy problem solving and emotional regulation skills School readiness Good communication skills Healthy social relationships Personal resilience	Stable home environment Nurturing and responsive relationships Strong and consistent parenting Frequent shared activities with parents Financial security and opportunities Positive role models/peers	Sense of belonging and connectedness Community cohesion Opportunities for sports and hobbies Strong resilient communities Safe physical environment that allows people to connect	Good housing, jobs, and education High standards of living Opportunities for valued social roles Gender equality
Risk factors	Genetic or biological Injury during birth Early malnutrition Behavioural and learning difficulties Alcohol or drug misuse Mental illness Traumatic brain injury Gender Victimization Risk taking Early puberty Isolation	Low family income Poor and inconsistent parenting Childhood abuse and neglect Household alcohol or drug misuse Household mental ill-health Family breakdown Domestic abuse Culture of male aggressive behaviour Household offending behaviour Large number of siblings	Unsafe or violent communities Low social integration and poor social mobility Lack of possibilities for recreation Insufficient infrastructure for the satisfaction of needs and interests of young people Fragmented communities – lack of cohesion	Deprived communities - poverty, poor Education High unemployment Homelessness and poor housing Culture of violence, norms and values which accept, normalise, or glorify violence and societal desensitisation Discrimination and inequality Difficulties in accessing services

Dudley is generally below the national average on school readiness and attainment but above the national average for a few of the wellbeing measures.

Figure 19: Protective factors for violence²⁵

Indicator	Period	Dudley		Region England			England		
		Recent Trend	Count	Value	Value	Value	Worst	Range	Best
School readiness: percentage of children achieving a good level of development at the end of Reception (Persons, 5 yrs)	2018/19	↑	2,611	67.1%	70.1%	71.8%	63.1%		85.1%
School readiness: percentage of children achieving the expected level in the phonics screening check in Year 1 (Persons, 6 yrs)	2018/19	→	3,194	79.3%	81.7%	81.8%	77.1%		87.1%
School Readiness: percentage of children with free school meal status achieving a good level of development at the end of Reception (Persons, 5 yrs)	2018/19	→	278	48.2%	57.2%	56.5%	41.4%		75.0%
Average Attainment 8 score (Persons, 15-16 yrs)	2019/20	→	163,593	48.0	49.0	50.2	42.9		60.0
Average Attainment 8 score of children in care (Persons, 15-16 yrs)	2020	→	1,190	22.9	23.1	21.4	10.6		35.2
Educational attainment (5 or more GCSEs): % of all children (Persons, 15-16 yrs)	2015/16	→	1,709	50.0%	54.8%	57.8%	44.8%		74.6%
GCSE achieved 5A*-C including English & Maths with free school meal status (Persons, 15-16 yrs)	2014/15	→	148	28.6%	33.4%	33.3%	20.5%		60.0%
GCSEs achieved (5 A*-C inc. English and maths) for children in care (Persons, 15-16 yrs)	2015	→	-	*	14.3%	13.8%	6.4%		34.6%
Mean score of the 14 WEMWBS statements at age 15 (Persons, 15 yrs)	2014/15	→	-	48.3	47.8	47.6	45.4		48.9
Self-reported well-being - high happiness score: % of respondents (Persons, 16+ yrs) ⚠	2015/16	→	-	71.9%	74.3%	74.7%	66.0%		80.8%
Self-reported well-being - high satisfaction score: % of respondents (Persons, 16+ yrs) ⚠	2015/16	→	-	81.1%	80.5%	81.2%	67.3%		88.1%
Self-reported wellbeing - people with a high anxiety score (Persons, 16+ yrs)	2019/20	→	-	16.5%	20.6%	21.9%	29.2%		14.5%
Utilisation of outdoor space for exercise/health reasons (Persons, 16+ yrs)	Mar 2015 - Feb 2016	→	-	20.5%	17.7%	17.9%	5.1%		36.9%

²⁵ Office for Health Improvement & Disparities. Public Health Profiles. [accessed 04/07/2022] <https://fingertips.phe.org.uk> © Crown copyright [2022]

Evidence on Interventions to Reduce Violence

What is a public health approach to reducing violence?

The World Health Organisation²⁶ defines a public health approach to reducing violence as one that: ‘Seeks to improve the health and safety of all individuals by addressing underlying risk factors that increase the likelihood that an individual will become a victim or a perpetrator of violence. Public health aims to provide the maximum benefit for the largest number of people. Programmes for primary prevention of violence based on the public health approach are designed to expose a broad segment of a population to prevention measures and to reduce and prevent violence at a population-level.’

Public health approaches can be identified by the following characteristics:

- defining and monitoring the problem
- identifying causes of the problem, the factors that increase or decrease the risk of violence, and the factors that could be modified through interventions
- designing, implementing, and evaluating interventions to find out what works
- implementing effective and promising interventions on a wider scale, while continuing to monitor their effects, impact, and cost-effectiveness.

The following interventions have all been identified in this review as having evidence at level 3 on the Standards of Evidence scale used in this review, i.e., there is good evidence that they may work in reducing violence.

According to the Early Intervention Foundation the “key principles of effective programmes” for preventing youth violence include:

- Strategies that seek to create positive changes in the lives of youth and/or their families, as well as reduce risk factors and prevent negative outcomes
- The involvement of trained facilitators who are experienced in working with children and families
- Working with young people in their natural setting (e.g., school or home)
- Ensuring that programmes are delivered as originally designed, specified, and intended (i.e., high implementation fidelity)
- Regular and/or frequent contacts (e.g., regular weekly contact delivered over the school term or year)
- Encouraging positive interactions between young people, families, and teachers/schools (i.e., addressing violence at individual and relationship levels)
- Regular and/or frequent contacts (e.g., regular weekly contact delivered over a school term, the school year or longer)
- Delivery through interactive sessions that provide the opportunity for skills-based demonstrations and practice

Interventions aimed at supporting parents and families:

- The Family Nurse Partnership – Support for young, vulnerable first-time parents from early pregnancy to child’s second birthday. Parents learn parenting skills, learn about their child’s health and receive support for their own wellbeing.

²⁶ World Health Organisation The VPA Approach [Online] <https://www.who.int/groups/violence-prevention-alliance/approach> Accessed 24th May 2022

- Incredible Years Preschool – An intervention for parents who are concerned about the behaviour of a child aged 3-6 years. Parents learn strategies for positive interaction with their child and for discouraging unwanted behaviour. Delivery includes videos, group discussion, problem solving exercises and structured practice activities.
- Family Foundations – A group-based programme for couples expecting their first child, aiming to improve the interparental relationship. During pregnancy, parents learn strategies for communication, conflict resolution, and sharing childcare duties. After birth, the parents learn strategies for communicating effectively and supporting the child's development.
- Triple P – A parenting programme offering different levels of support, from level one (providing information) to level five (addressing severe childhood problems). It aims to create stable and supportive families equipped to deal with family problems including problematic child behaviour.
- Empowering Parents Empowering Communities – Groups of parents from disadvantaged families, who are experiencing behavioural difficulties with a child aged 2-11 years, learn strategies for improving parent-child interactions, reducing negative behaviour, and improving their parenting confidence and effectiveness. Sessions involve group discussions, demonstrations, role play and homework assignments.

Developing life skills in children and young people:

- There is evidence to suggest that school and education-based approaches are effective in reducing youth violence²⁷. These include both bullying prevention programmes (e.g., Olweus Bullying Prevention Program, KiVa) and social and emotional learning programmes (e.g., PATHS).
- The Good Behaviour Game – A universal preventive programme for primary school students, to encourage prosocial behaviour and reduce disruptive behaviour in the short and long term
- Incredible Years Child Training (Dinosaur School) – Group-based programme for children with behavioural difficulties aged 4-8 years, teaching self-regulation and problem-solving skills in small groups. Parents and teachers are recruited to help reinforce good behaviour
- Incredible Years Teacher Classroom Management – Universal classroom management programme for teachers of children aged 4-8 years, aiming to improve teachers' ability to support children in developing their social, emotional, and problem-solving skills.
- Promoting Alternative Thinking Strategies (PATHS) - A social and emotional development programme for primary school children. It aims to promote emotional and social competencies and reduce aggression and behaviour problems.
- Let's Play in Tandem – A school readiness programme for children aged three years living in disadvantaged communities, aiming to improve cognitive development and self-regulation.

²⁷ Kirsten Russell and the Scottish Violence Reduction Unit (2021) What works to prevent youth violence: evidence summary [Online] <https://www.gov.scot/publications/works-prevent-youth-violence-summary-evidence/>

Working with high-risk youth and gangs/community interventions

- Deterrence and fear-based approaches have been identified as having no effect on youth violence outcomes and, at worse, are potentially harmful to young people.
- Community Initiative to Reduce Violence (CIRV) – Multidisciplinary intervention based on the Cincinnati Initiative to Reduce Violence and implemented in Glasgow. Engages youth gang members to reduce physical violence and weapon possession, offering support, services, and opportunities in exchange for a ‘no violence, no weapon’ pledge.²⁸

Identification, care, and support

- Identification and referral to improve safety (IRIS) – An intervention to improve identification and referral of cases of domestic violence without screening. It includes a practice-based training programme for primary health care staff, a prompt in the medical record system to ask about abuse, and referral pathways to a domestic violence advocate.

Multi-component interventions

- Multisystemic therapy – An intervention for high risk 11-17-year-olds and their families and communities, to improve parenting skills and school engagement, and to intervene in delinquent peer association, with the aim of preventing reoffending and out of home placements. Involves the use of evidence-based approaches like CBT
- Sure Start local programmes – Works with families/ children from pregnancy to age 14. For preschool children (up to age five) and their families, Sure Start bring together child education, childcare, health services and family support within dedicated children’s centres.

²⁸ Engel RS, Tillyer MS and Corsaro N (2013) Reducing Gang Violence Using Focused Deterrence: Evaluating the Cincinnati Initiative to Reduce Violence (CIRV), *Justice Quarterly*, 30:3, 403-439, DOI: 10.1080/07418825.2011.619559

Interventions to Reduce ACEs

Preventing Aces²⁹

Strategy	Approach
Strengthen economic support to families	<ul style="list-style-type: none"> • Strengthening household financial security • Family-friendly work policies
Promote social norms that protect against violence and adversity	<ul style="list-style-type: none"> • Public education campaigns • Legislative approaches to reduce corporal punishment • Bystander approaches • Men and boys as allies in prevention
Ensure a strong start for children	<ul style="list-style-type: none"> • Early childhood home visitation • High-quality childcare • Preschool enrichment with family engagement
Teach skills	<ul style="list-style-type: none"> • Social-emotional learning • Safe dating and healthy relationship skill programs • Parenting skills and family relationship approaches
Connect youth to caring adults and activities	<ul style="list-style-type: none"> • Mentoring programs • After-school programs
Intervene to lessen immediate and long-term harms	<ul style="list-style-type: none"> • Enhanced primary care • Victim-centred services • Treatment to lessen the harms of ACEs • Treatment to prevent problem behaviour and future involvement in violence • Family-centred treatment for substance use disorders

²⁹ Centers for Disease Control and Prevention (2019). Preventing Adverse Childhood Experiences: Leveraging the Best Available Evidence. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

Dudley Services and Interventions to Reduce Violence

There appears to be numerous support services operating in Dudley, including

- Statutory education, health, and social care
- Community, voluntary and faith sector organisations
- Specialist services, including youth justice and probation.

These services work with families, children and young people to prevent, divert and intervene where people may become involved in serious violence.

However, the operational and commissioning landscape is complex, with services commissioned via

- NHS
- Public Health
- Children's Services
- Community Safety Partnership
- West Midlands Violence Reduction Partnership
- West Midlands Police and Crime Commissioner
- Home Office

Many services are currently receiving short term funding, creating uncertainty and change in the system. There seems to be system confusion about service availability, purpose, referral mechanisms and contract management.

It is therefore difficult to identify gaps in provision, though a notable gap identified by the system is post 16 educational provision for young people with Special Educational Needs.

Recommendations

- Ensure development of **Child Friendly Dudley** considers the needs of adolescents and addresses potentially negative stereotypes about Young People.
- Promote wider use of a “**child first**” approach when working with children and young people with challenging behaviour. This approach is already embedded across the Youth Justice Service, and other organisations may benefit from considering children and young people as children first and foremost when making decisions around discipline and exclusion.
- Improve **data** access, timeliness, sharing & linkage for serious violence and underlying risk and protective factors. System partners collect significant data, but this is not always linked, and is not always shared with partner organisations.
- Regular review and update of the **needs assessment**, to ensure any emerging issues are addressed. Create an action plan to ensure scheduled data review and update.
- Facilitate system wide decisions regarding requirements **for long term** funding for evidence-based programmes. This may require lobbying, as some elements of funding are dependent on Home Office funding decisions.
- Further **public consultation** around violence and perceptions of violence, specifically with young people who may be least likely to engage with police surveys.
- Undertake or commission **detailed mapping** of current service provision, including accessible information for young people, families, and professionals. This should include, as minimum, details of services offered, client group, contact details and referral mechanisms. This would require regular updating due to the frequent changes in provision.