

# GM Violence Reduction Unit

## A Public Health Approach

TIIG Conference  
5<sup>th</sup> March 2020



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# A PUBLIC HEALTH APPROACH

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# A Public Health Approach



Christmas, H. & Srivastava, J. (2018). *Public Health Approaches in Policing*. College of Policing:  
<https://www.college.police.uk/What-we-do/Support/uniformed-policing-faculty/Pages/Public-health.aspx>

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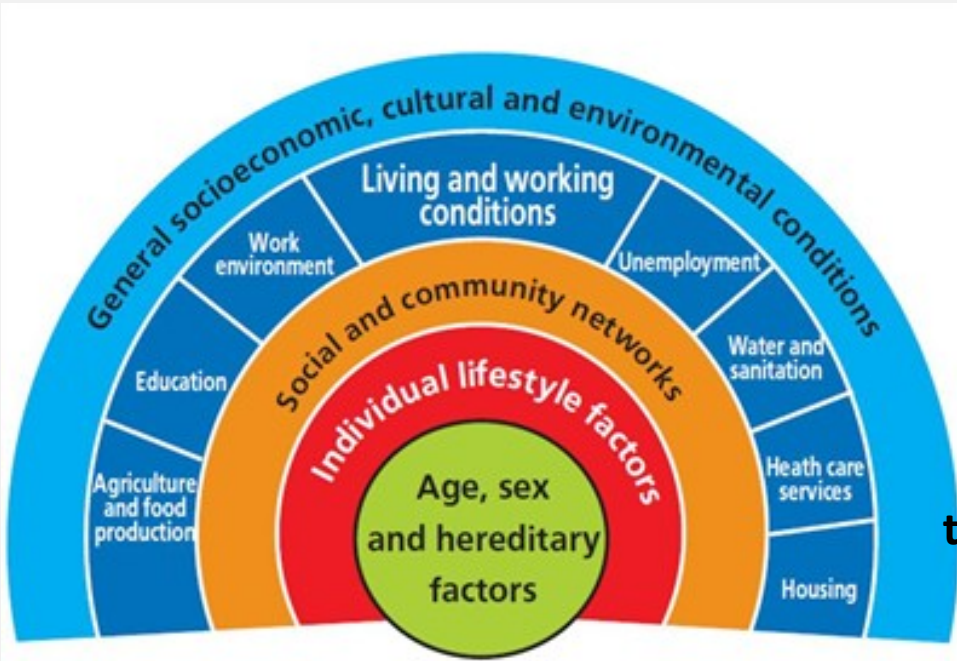
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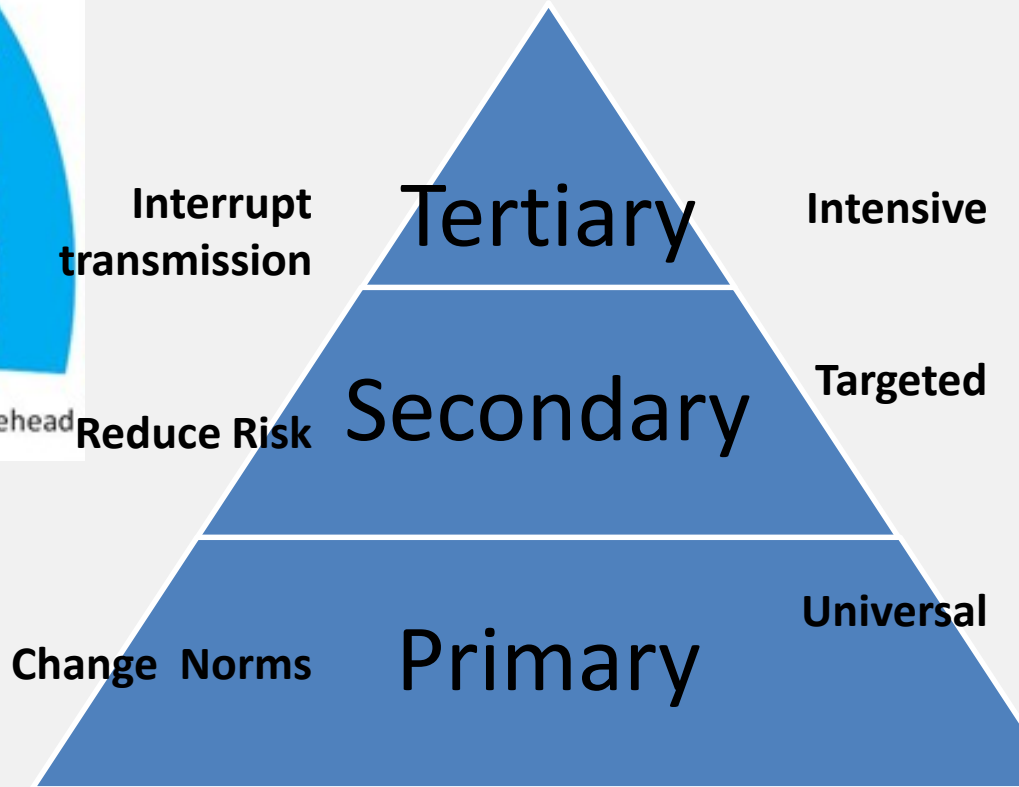


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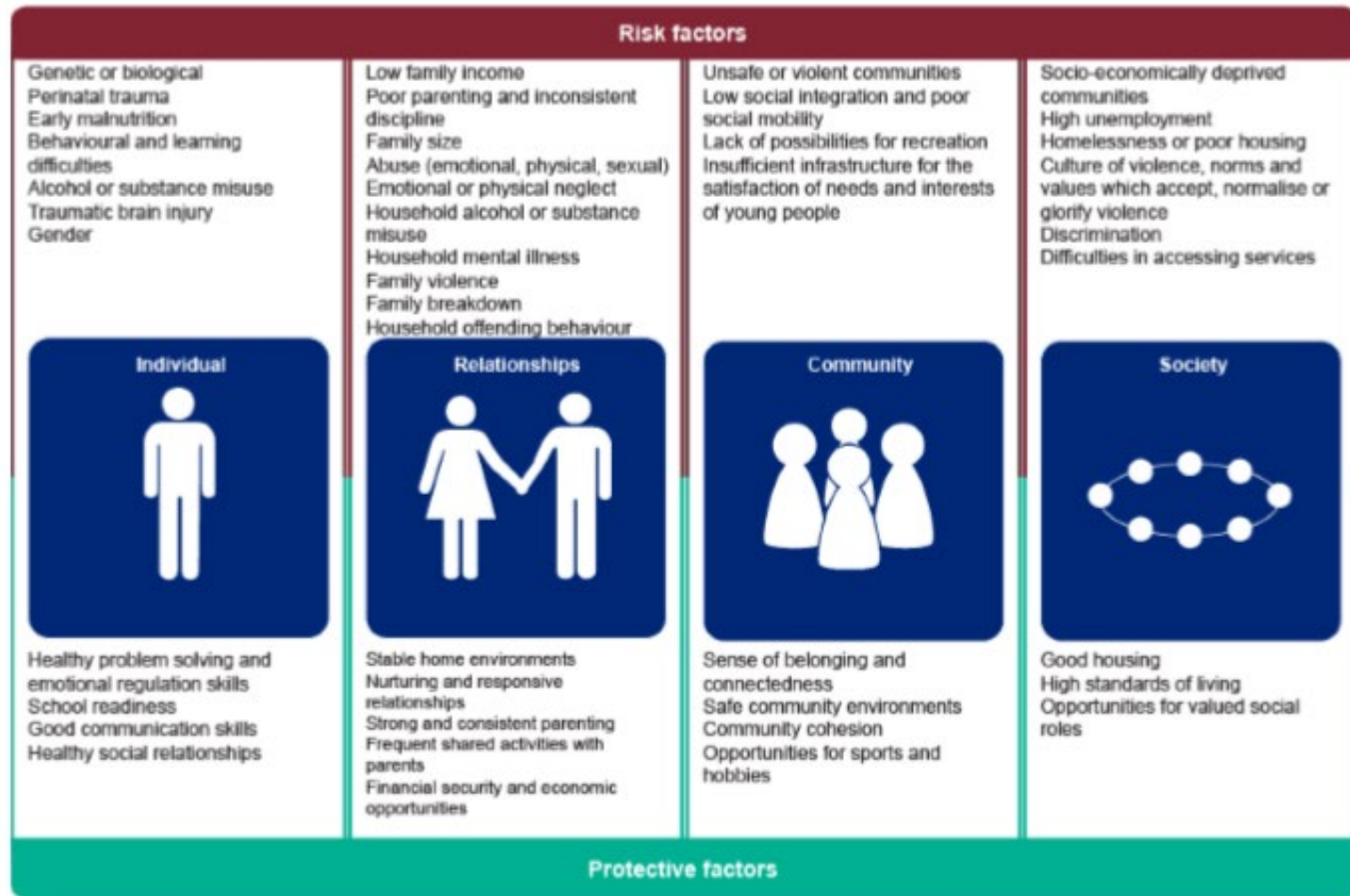
# A Public Health Approach



The Determinants of Health (1992) Dahlgren and Whitehead



**Figure 4: Risk factors which increase the likelihood of violence and protective factors which mitigate against perpetration or victimisation of violence (11-16)**

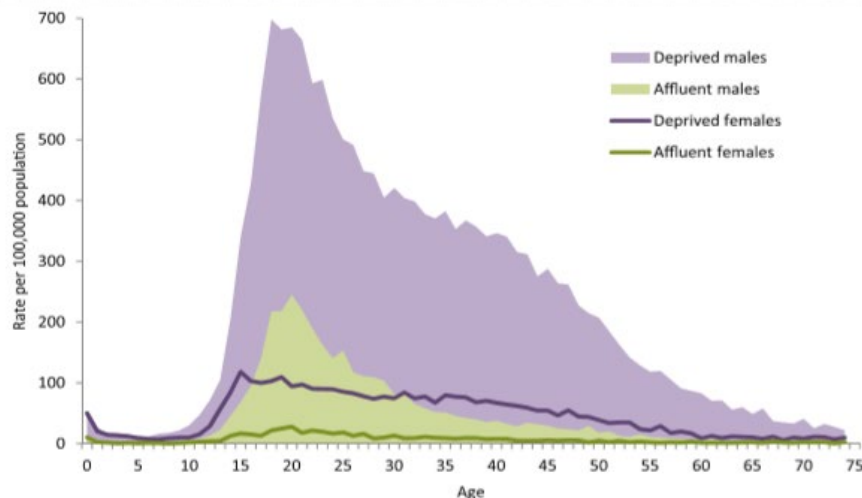


# Inequalities

- Gap in life expectancy between the most and least deprived areas in England: 9 years for males; 7 years for females (2015-17)
- Gap in years spent in good health: 19 years for males and females.
- Inequalities increased significantly since 2011-13.

*Health Profile for England 2018*

**Figure 4.2:** Annual rates of emergency hospital admissions for violence across England, by age, sex and deprivation\*



\*Most and least deprived quintiles, based on IMD

Source: Bellis et al, 2011\*

[Fair Society Healthy Lives,](#)  
[Michael Marmot, 2010](#)  
*AND 10 years on report*  
*just published...*

[Protecting People](#)  
[Promoting Health, NW](#)  
[Public Health Observatory](#)  
[\(with WHO, DoH and Home](#)  
[Office\), 2012](#)

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# Public Health Approach – What works

## Primary prevention to avoid involvement in violence in individuals not already involved

- Parenting programmes
- Good quality early education
- Life and emotional skills training
- Bullying prevention programmes
- Changes to firearms / weapons policy
- Hotspots and community or problem-oriented policing
- Reduce problem alcohol and drug use

## Secondary and Tertiary prevention interventions to lessen harm and reduce future risk of violence in those already involved in violence

- Therapeutic approaches for young people at greatest risk of becoming involved in violence
- Therapeutic approaches for young people already involved in violence
- Hotspots and community or problem-oriented policing
- Restorative justice

Roberts, S., (2019), *Approaches to prevent or reduce violence with a focus on youth, knife and gang-related violence, Literature Review*. Public Health England West Midlands / West Midlands Violence Prevention Alliance. Available at: <http://westmidlands-vru.org/wp-content/uploads/2019/10/Youth-violence-interventions-evidence-review-2019.pdf>

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# Perceptions – Community Consultation

Innovation Unit Research with 650 young people, community members, businesses, professionals in GM. Focused on young people and violence.

- 1: Social media is viewed as amplifying and exacerbating violent conflict.
- 2: There are concerns that young people are growing up in school, home and community environments in which conflict and violence are normalised.
- 3: Changes to neighbourhood policing are seen as the cause of a worsening relationship between communities and police.
- 4: Vulnerability and fear are important drivers in the increase in young people carrying weapons.
- 5: ‘Toxic masculinity’ and pressure to conform appears to increase the likelihood of young men being perpetrators or victims of violent crime.
- 6: Communities feel there is an urgent need to create safe places and strong relationships to divert young people from violent crime.



# THE GM UNIT

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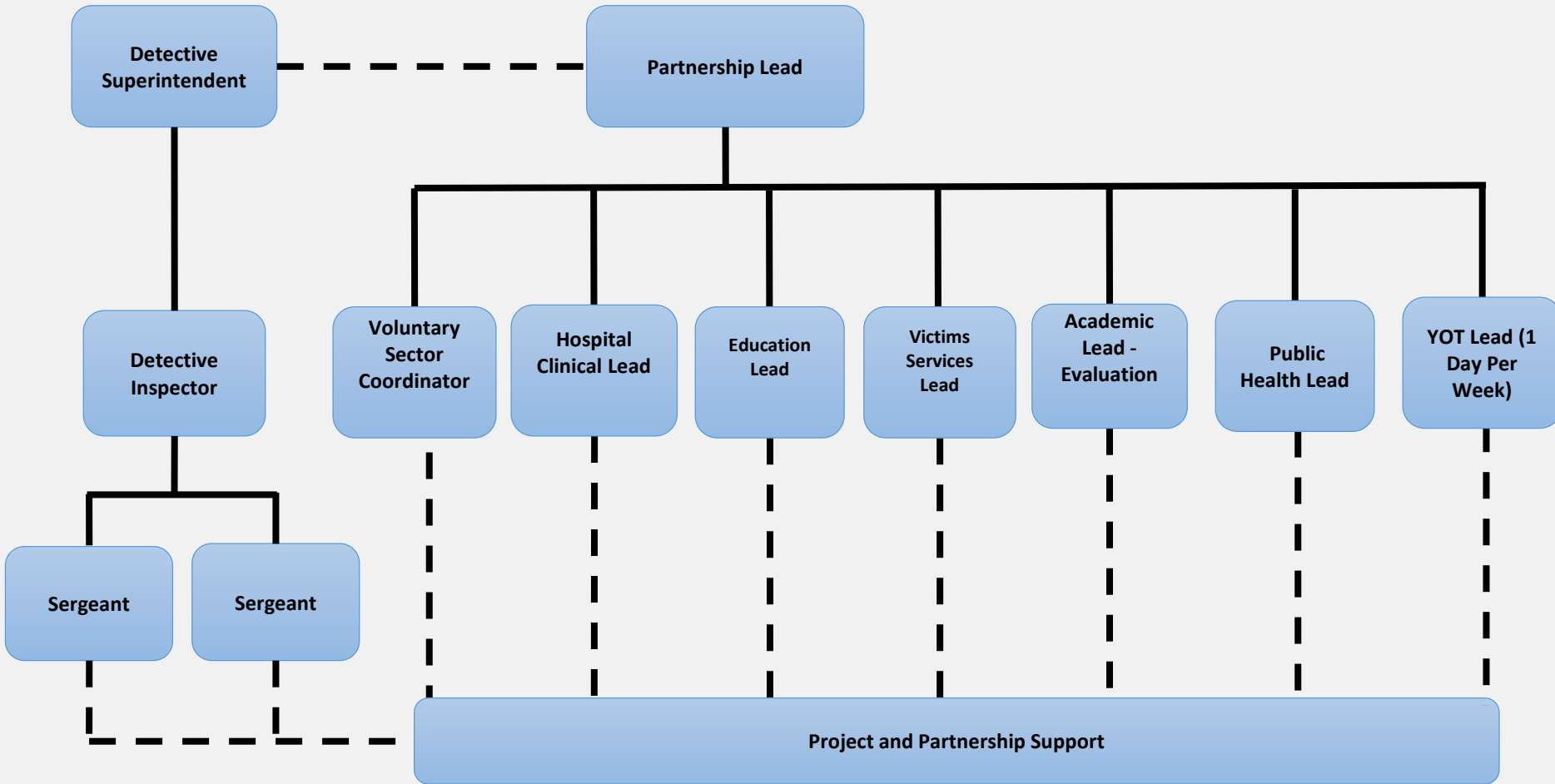


**POSITIVE STEPS**  
SUPPORT | CHALLENGE | CHANGE



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# VRU Organisational Structure



# Some GM focus so far



## Violence Interventions

Through CSPs,  
DCSs and PH  
Prevention  
Support  
Interruption  
System  
navigation

## Exclusions and support for schools

Policy  
Consistency  
Interventions

## Campaign and engagement

YP co-design  
Positive vibe  
DAX  
Web searches  
Community  
liaison and pilot

## Research and Data

Academic  
Partners –  
MMU+  
JSNA  
Health Data to  
partners  
Research  
Group

## Enforcement and Justice

Access to  
weapons  
Out of Court  
Disposals  
Cohorts at risk  
Probation

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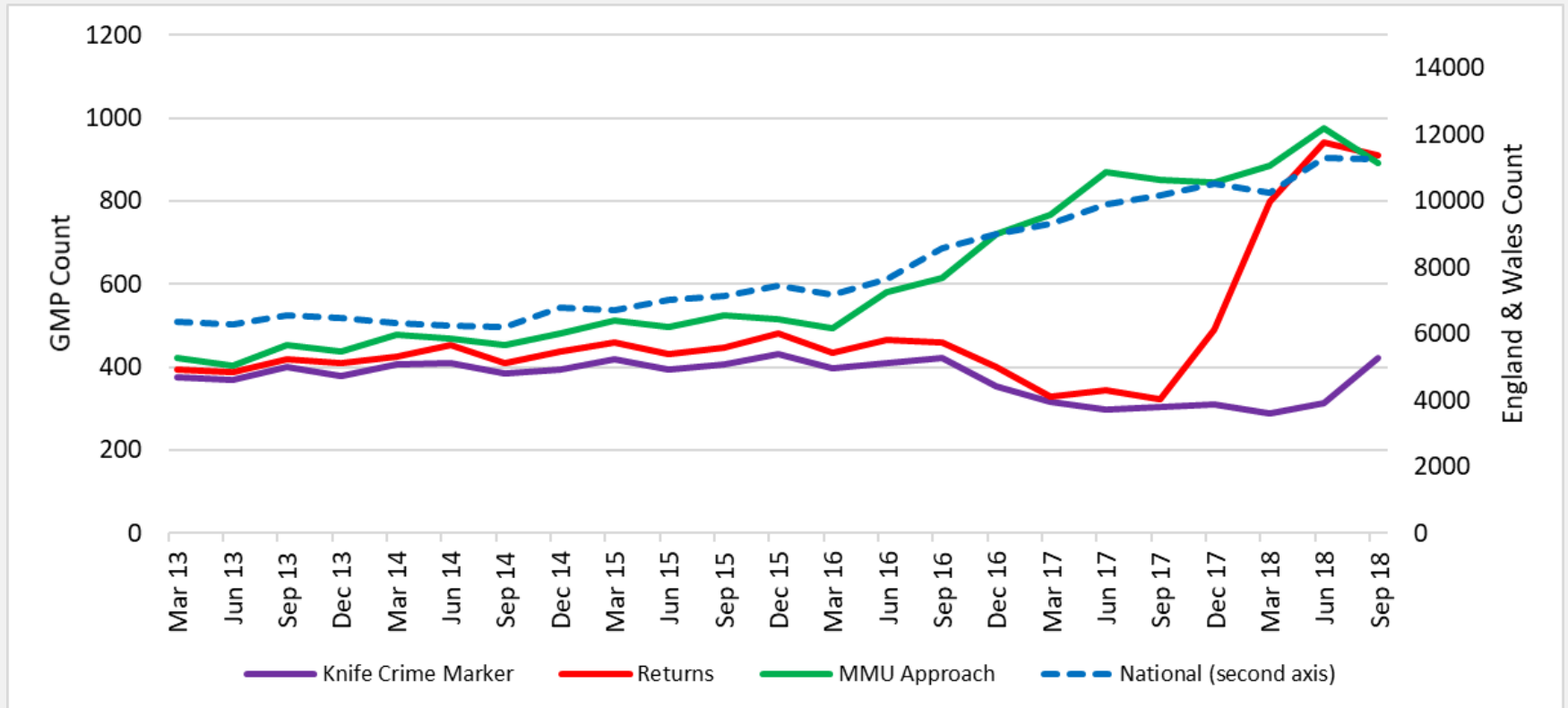


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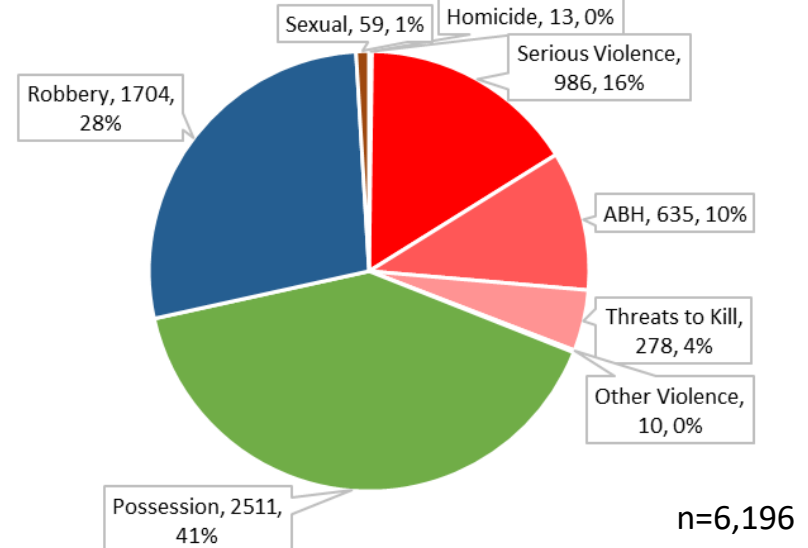
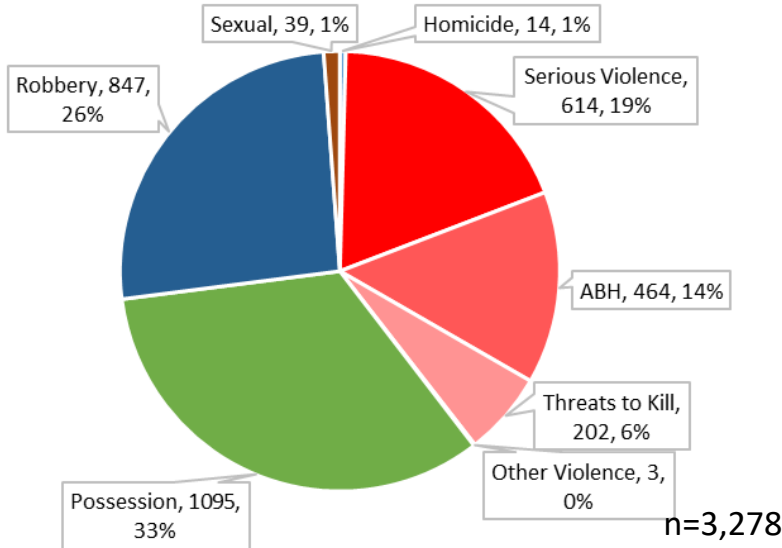
# Knife Crime – MMU Analysis of GMP data



# Types of Knife Crime -GMP data

12mths to Nov. 2015

12mths to Nov. 2018

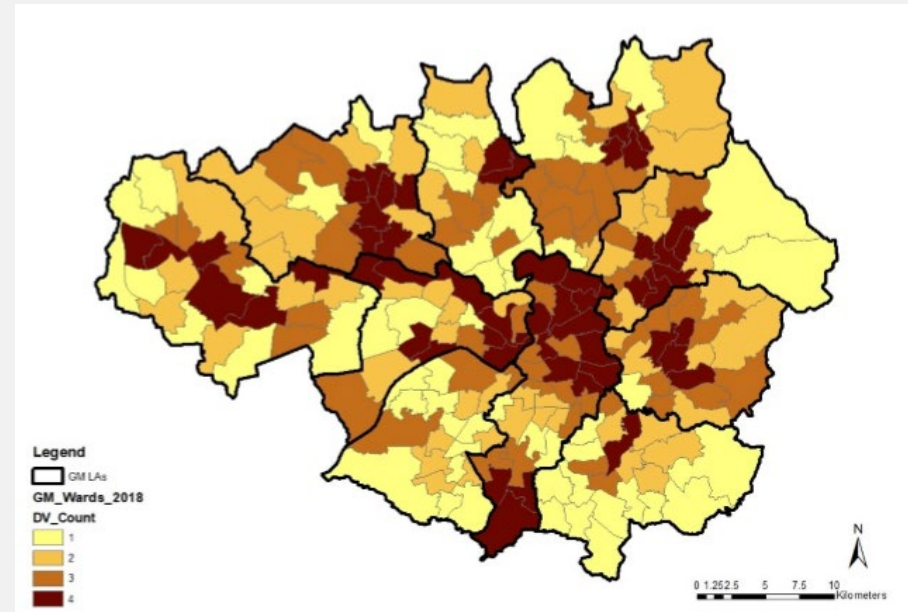
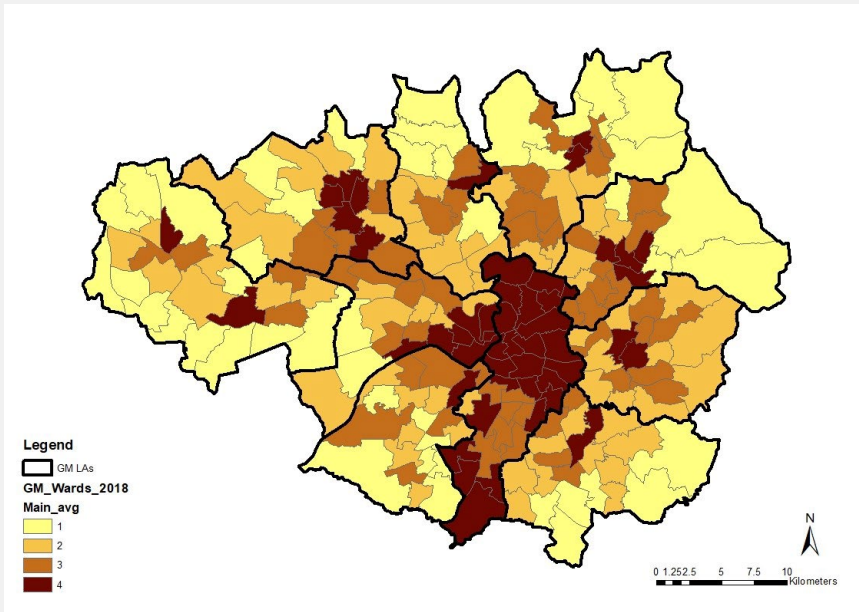


Knife crime offences have almost doubled between 2015 and 2018. However, the proportion of violence offences have fallen (40% to 30%), with a corresponding increase in the proportion of possession offences (33% to 41%).

# Local area / type analysis Jan 2020

**Violent crime composite** – nominal residence and location of incidents

**Domestic Abuse**





# BUT... Police data

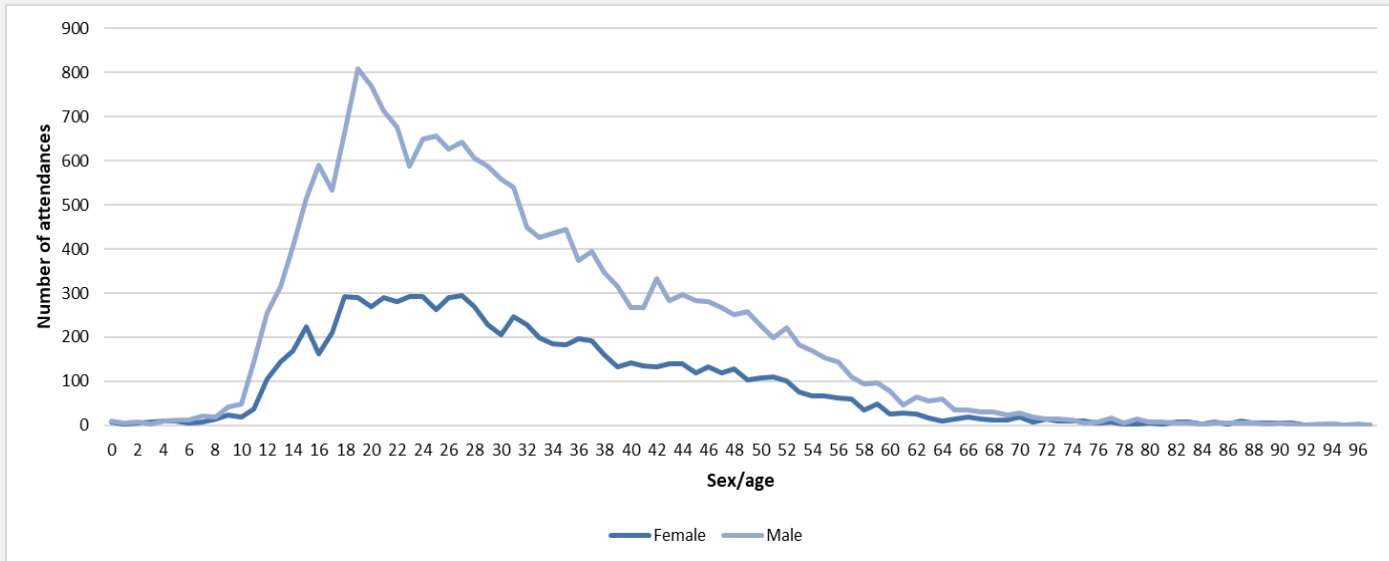
- Not classified as Official Statistics due to influence of recording and practice
- Around 23% of people injured by violent assault report this to the police.
- Better for low volume, high impact incidents
- Often show different trends to Crime Survey for England and Wales on high volume crime
- Needs corroboration and 'rest of the picture'...

# TIIG – A&E

...Also not perfect data! But part of the picture of the ‘other 70%’.

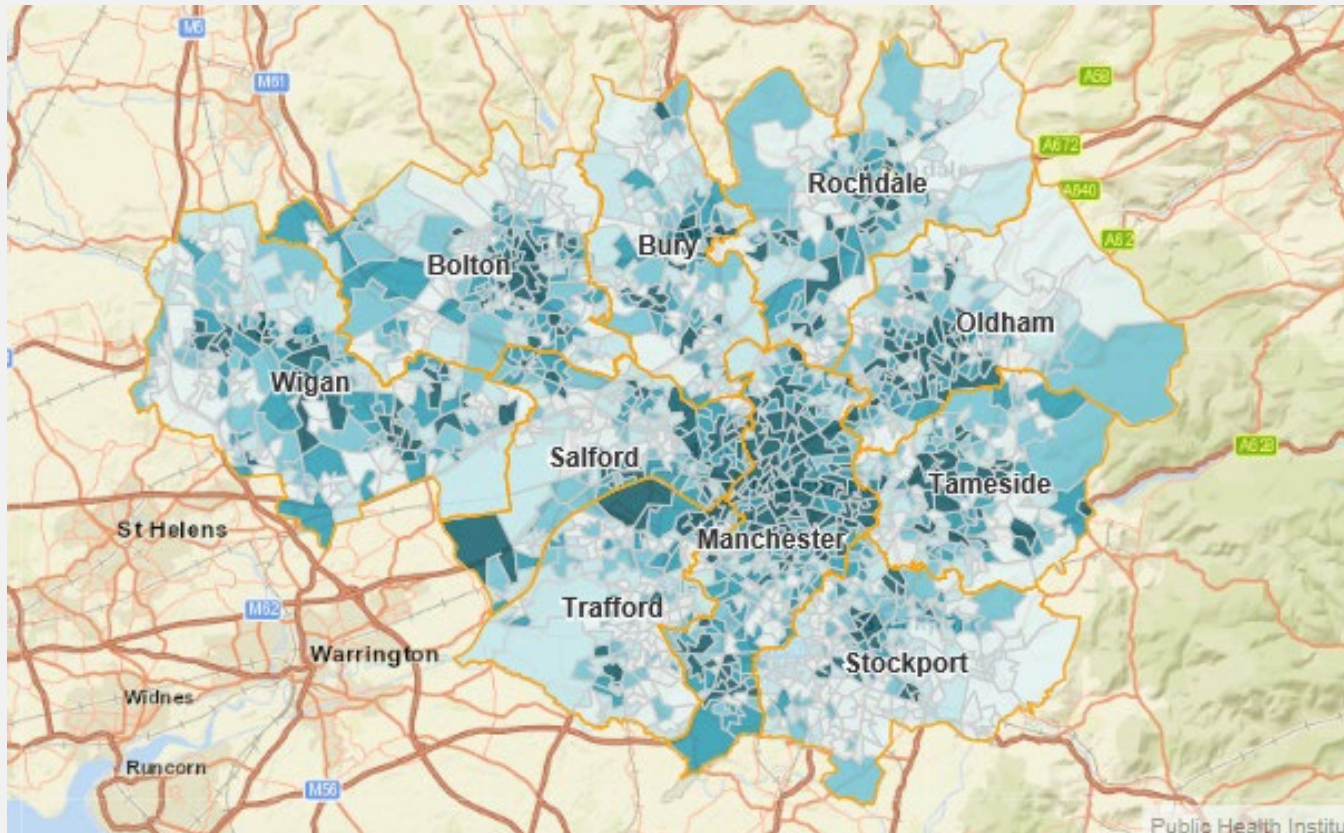
In other areas, data sharing achieved a **30%** reduction in attendances for assaults if utilised...

- A&E assault attendances at GM hospitals increased from 10,500 in 2016/17 to 11,500 in 2018/19
- Early signs that figures for 2019/20 (to Nov) are lower than previous period
- 70% male; men aged 15 to 29 comprised 47% of all assault attendees (10% of the GM population)



# TIIG - NWA5

- Slightly older cohort?
- Link to night time economy
- Analyse 'transfer to hospital' to establish crossover with A&E cohort



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# Hospital Admissions

Admissions due to Assault with a Sharp Object (ICD-10 X99) across Greater Manchester

