

DUDLEY HEALTH AND WELLBEING BOARD

Agenda Item no. 7

DATE	4th December 2019
TITLE OF REPORT	Developing a Strategy for Violence Prevention- Update
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1. Purpose

1.1. This report updates on the progress made in developing a violence prevention strategy for the borough and presents a draft 'strategy on a page' culminating from stakeholder and public engagement events, a review of the data for Dudley and a review of the evidence base in terms of what interventions work.

2. Background

2.1. Addressing violence is not a single agency issue, as it is the culmination of many different issues. A strategic, coordinated approach involving a range of stakeholders is required to effectively address violence prevention and reduction. In Dudley a public health approach to develop the strategy is being taken, establishing prevention at 3 levels:



2.2. A range of different interventions throughout the life course can reduce an individuals' propensity for violence, lower the chances of those involved in violence being involved again and ensure that those affected by violence get the support they require.

2.3. The Dudley Violence Reduction Group, now chaired by the Director of Public Health and Wellbeing (Dudley Council) is overseeing development of the strategy. The group reports to the Safe and Sound Board.

2.4. Appendix 1 details a 'strategy on a page' culminating from stakeholder and public engagement events, a review of the data for Dudley and a review of the evidence base in terms of what interventions work. Our aim is to have a full violence prevention strategy by 1st April 2020.

3. Key Points

3.1. National, regional and local data has been analysed to understand the scale and nature of violence in Dudley.

3.2. Mapping of current interventions in Dudley at the 3 prevention levels is nearing completion. This will be used to identify good practice and gaps in provision to inform commissioning and "bidding opportunities" or service redesign.

3.3. Evidence reviews in respect of "what works" supported conducted by Public Health England on behalf of the West Midlands Violence Prevention Alliance and also evidence reviews compiled by the World Health Organisation and the Early Intervention Foundation guidebook have been utilised to establish what interventions currently delivered are evidence based.

3.4. During August to October public engagement events with children, young people, adults and older people have been held through a series of world café's around the borough, drop-in events and by attending existing community groups and forums. Additionally an on-line survey was available which was completed by 100 people.

3.5. The health-related behaviour questionnaire (HRBQ) conducted every 2 years with primary and secondary school age young people and colleges has been analysed to give further insight into the behaviour and concerns of young people in relation to safety, violence and gangs.

3.6. On October 28th a whole system stakeholder event was held in order to present some of the findings from the data, evidence and engagement and to co-produce a set of high level strategic priorities for violence prevention in Dudley.

3.7. The 'strategy on the page' in Appendix 1 summarises the outcomes from this event. Key points in this are:

- The scope of the strategy is broad, taking into account the WHO definition of violence. On this basis the strategy will provide an overarching strategic framework, to align delivery which prevents and reduces all forms of violence in the borough- e.g. domestic violence, exploitation, county-lines, knife crime, modern slavery, suicide and self-harm
- Violence is preventable it is not inevitable- behind the different forms of violence there is a set of factors that are either risk factors for making violence more likely or protective factors which mitigate against victimisation

or perpetration. If these can be tackled then all forms of violence will be prevented.

- There was a mismatch between the data which shows Dudley to be a relatively safe place (and safer than our black-country neighbours in relation to violence) and how safe people actually felt in the borough. Some of this aligned to people living in high crime areas and thereby seeing, hearing about or experiencing crime or anti-social behaviour. Where people lived in low crime areas, this was more a result of the media distorting perceptions of violence. The vision for the strategy has therefore been identified in terms of how safe Dudley feels to Dudley people and it links into the Borough vision.
- Living without the fear of violence is a fundamental requirement for good health and wellbeing. – tackling violence is about getting the basics right.
- Overwhelming themes for Dudley people was that connected, active, inclusive and resilient communities feel safe.

3.8. Further engagement with communities on the identified priorities will follow prior to completing the full strategy

4. Key asks of the Board/wider system

4.1. It is asked that the Board members:

- Consider and comment on the 'strategy on a page'
- Agree to contribute to the strategic priorities going forward

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VIOLENCE PREVENTION

VISION

Overwhelming themes were about Dudley people actually feeling safe and that people feel safe where communities are connected, inclusive and involved. The vision links to the Borough vision 2030- a place of healthy, resilient and safe communities.....

“ Dudley is a safe place and together we will keep it that way”

SCOPE

Violence is “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, mal-development or deprivation”. **The scope is broad- the strategy will provide an overarching strategic framework, to align delivery which prevents and reduces all forms of violence in the borough- e.g. domestic violence, exploitation, county-lines, knife crime, modern slavery, suicide and self-harm**

WHY- Consequences of Violence

Individual- health related, social and economic

- Death in a low number of incidents, most violence results in-
- physical injuries,
- mental health and behavioural problems - depression, drug and alcohol abuse, anxiety, disruption of daily life as a result of fears for personal safety, loneliness, suicidal behaviour
- reproductive health problems - unwanted pregnancy, sexually transmitted diseases and sexual dysfunction
- long-term health effects or permanent physical or mental disability
- financial hardship and poverty due to job loss,
- relationship breakdowns,
- poor or disrupted education,
- housing issues or loss of home

Communities and society

- health care costs,
- criminal justice system costs
- legal costs,
- social care costs
- absenteeism from work and lost productivity
- disincentives to investment and tourism- reduced economic development
- Violence becomes the norm being accepted or seen as inevitable
- Mental health of key workers dealing with the effects of violence and family members and friends
- Communities feel unsafe, so people don't connect or integrate
- Widens inequality- the costs of violence are not evenly distributed with those with the least options for protecting themselves against economic hardship being more seriously affected

Living without the fear of violence is a fundamental requirement for people to be able to live a good life and thrive. Violence is preventable it is not inevitable- behind the different forms of violence there is a set of factors that are either risk factors for making violence more likely or protective factors which mitigate against victimisation or perpetration. If these can be tackled then all forms of violence will be prevented:

Risk Factors

- Genetic or biological
- Perinatal trauma
- Early malnutrition
- Behavioural and learning difficulties
- Alcohol or substance misuse
- Traumatic brain injury
- Gender

Individual



- Healthy problem solving and emotional regulation skills
- School readiness
- Good communication skills
- Healthy social relationships
- resilience

- Low family income
- Poor parenting and inconsistent discipline
- Abuse (emotional/physical) (ACES)
- Emotional or physical neglect
- Household alcohol or substance misuse
- Household mental illness
- Family violence
- Family breakdown
- Toxic masculinity
- Household offending behaviour

Relationships



- Stable home environment
- Nurturing and responsive relationships
- Strong and consistent parenting
- Frequent shared activities with parents
- Financial security and opportunities
- Positive role models/peers

- 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

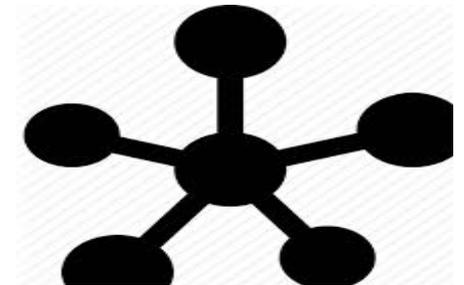
Community



- Sense of belonging and connectedness
- Safe community environments
- Community cohesion
- Opportunities for sports and hobbies
- Strong resilient communities
- Safe physical environment that allows people to connect

- Socio-economically deprived communities
- High unemployment
- Homelessness or poor housing
- Culture of violence, norms and values which accept, normalise or glorify violence
- Discrimination and inequality
- Difficulties in accessing services
- Societal desensitisation to violence

Society



- Good housing
- High standards of living
- Opportunities for valued social roles
- Gender equality

Protective Factors

LEVELS OF VIOLENCE PREVENTION- OUR STRATEGIC FRAMEWORK

INTENSIVE PREVENTING RE-OCCURRENCE WITH THOSE USING VIOLENCE	TARGETED PREVENTION WITH HIGH RISK GROUPS	UNIVERSAL KEEPING PEOPLE AND COMMUNITIES SAFE
<ul style="list-style-type: none"> • Rehabilitation- intensive support for perpetrators –jobs, housing, relationships, parenting, culture of violence, mentoring • Support for victims • Prevent violence leading to more violence • Restorative practice in the enforcement and criminal justice system (CJS) and effective use of powers • Intelligence led and community orientated policing- targeting resources at high violence areas 	<ul style="list-style-type: none"> • Stopping the progression of violence though early detection and intervention • Identification and management of risk factors through trauma informed approaches and targeted intensive nurture based interventions • Improving the inequality in school readiness and educational outcomes for high risk groups, and prevention of school exclusions • The development of positive role models for children and young people at risk • Programmes to prevent, reduce and treat alcohol and drug misuse 	<ul style="list-style-type: none"> • Stopping violence before it starts by tackling the root causes such as poverty and inequality • Enhancement of protective factors by developing strong resilient and cohesive communities and inclusive physical environments (targeting high violence areas) • Changing cultural norms that support and glorify violence • Emotional health, relationship development and resilience of children, young people and adults- (across the life-course) • Strong foundations- taking a systems wide approach

DELIVERY PLAN- (evidenced based)

GOOD PRACTICE (more to come from mapping)

<ul style="list-style-type: none"> • BBR and resolve programmes- tackling aggression and conflict resolution for perpetrators referred through the CJS • Domestic violence strategy and directory of services • Mentoring programmes 	<ul style="list-style-type: none"> • Primary school interventions- nurture programme with targeted children • Whole system trauma informed practice- trauma strategy • ACE coordinators – pilot in Banardos • Triple P parenting programme 	<ul style="list-style-type: none"> • Mitigating the impact of poverty strategy • Credit union providing low cost loans • Innovation fund approach with the voluntary sector
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<ul style="list-style-type: none"> • Personality disorder pathway • Support for people leaving custody • Youth offending team • Neighbourhood policing- Named officers • Safer estates programme • Street doctors programme 	<ul style="list-style-type: none"> • Family nurse partnership programme • Mentors in violence prevention with YP at-risk • CRUNCH programme • Group based interventions- CGL service for substance misuse including dual support for those also mental health. • Diversion approaches to gang involvement for young people • Child sexual exploitation strategy • Suicide prevention strategy/delivery plan • Troubled families team • Liscensing 	<ul style="list-style-type: none"> • Community development work e.g. in Lye- getting the basics right in terms of cohesion, intergenerational work • Nurture based school settings • Trauma informed schools and emotional resilience coaching • First 1001 days programme- Early years transformation academy • Holiday activities for C&YP in place in some areas • OPLL active citizen fund • Police guardian activity
<p>GAPS (more to come from mapping)</p>		
<ul style="list-style-type: none"> • Sustainability and scale of programmes long term, access to support programmes • Support to offenders not referred to BBR/resolve type programmes • Support to offenders to enable them to maintain their family relationships • Recovery/restitution model in CJS • Education and support to those using and carrying weapons • More knife amnesty bins and campaigns • Support and work with victims in A/E to prevent reoccurrence of violence – reachable/teachable moments • PHE Injury Surveillance data from A&E at Russell’s Hall 	<ul style="list-style-type: none"> • Sustainability and scale of programmes long term • Capacity to offer role model mentoring and experts by experience- need more of this and it is short term funding- sustainability and scale • Gambling related harm • Relationships education- in place but need to make sure it takes a trauma informed approach and is good quality • Roll out of approaches to prevent school exclusion • Adult exploitation • Substance misuse prevention strategy • Programmes targeted at specific types of violence e.g. knife crime • Key risk group- LGBTQ 	<ul style="list-style-type: none"> • Sustainability and roll -out • Lye community resilience approach needs rolling out to other high violence areas • Lack of space for communities to come together- mobilisation and use of community buildings • Celebrate Dudley as a place- love where you live • Clear public narrative of what is good/positive reinforcement- language to prevent intolerance-simple, relatable messages brought to life through storytelling etc • Planning of public and community spaces- lighting, green space, connected, maintenance

<ul style="list-style-type: none"> • Targeted approach to neighbourhood policing resources- high violence areas and promote extensively in those areas • Issues in terms of reporting and timely response from police • Dudley specific reducing re-offending group needs to be reinstated • Lack of awareness across the borough of what services agencies are available, what they do and for whom- platform/media method • Tools/products for evaluation of programmes 		<ul style="list-style-type: none"> • More general education and awareness in relation to violence • More ability to offer diversionary activities especially in school holidays • Nurture programme only in primary schools and only a pilot- sustainability and scale up and an approach for transition/secondary school required • Communication in general between communities and agencies • Implement Street watch - targeted to high violence areas
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KEY OUTCOMES		
<ul style="list-style-type: none"> • “Lowest levels of domestic violence since records began” • “knife amnesty a massive success” • “Street watch in every ward 	<ul style="list-style-type: none"> • Trauma informed practice in place • Reduced school readiness gap • “No children excluded from Dudley schools this year” 	<ul style="list-style-type: none"> • Generations working together to make Dudley residents feel safer” • Community festival in XX a great success