

**MAYOR OF LONDON**

**London Violence Reduction Unit Strategy**

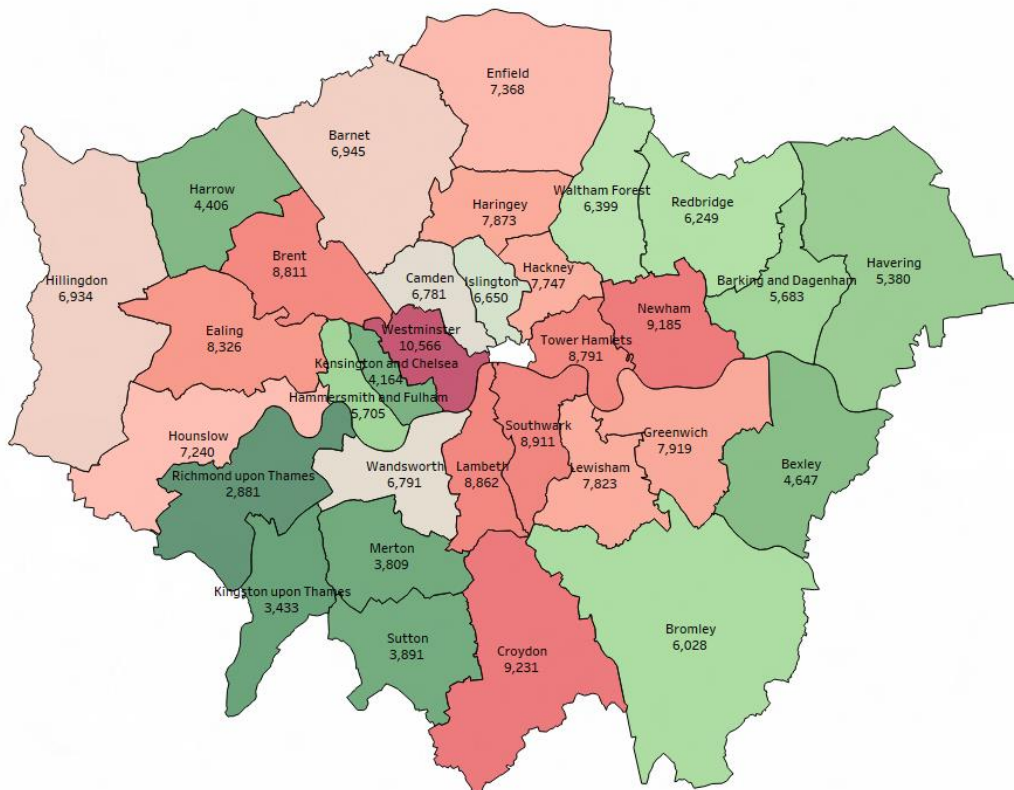
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## Violence in London

Since 2014 there has been a substantial increase in violence nationally and across London. This was across all types of crime, though media attention focused on youth-related knife crime. In London<sup>1</sup>, the boroughs most affected by knife crime which causes injury are Westminster, Lambeth, and Haringey. Across London, in the last 12 months to March 2019 there have been 1,877 victims of knife crime with injury. During the previous 12 months, to March 2018, there were 2,222. Looking at violence more broadly, we can see that Westminster, Croydon, and Newham are the most affected boroughs.

### London Violence against the Person: number of offences



This is a trend repeated in cities across the UK, with violence against the person and knife crime increasing significantly. In the 12 months to September 2018, the volume of Violence Against the Person offences increased by 20% compared to the previous year nationally. Offending increased by 6% in the MPS during this period. Additionally, Knife Crime offences increased by 8% both nationally and in the MPS.

The combination of the increased number of public attacks and homicides combined with the young age of many of the perpetrators and victims provoked national concern.

The statistics also revealed a huge disproportionality in the ethnicity of both victims and perpetrators alongside glaring disproportionality in the criminal justice system. Black Londoners are more likely to say they feel personally affected by crime, 44% of Black Londoners compared to 32% of non-black Londoners, and this is supported by evidence on knife crime, where 26% of victims and 46% of perpetrators are Black. The disproportionality is even more shocking when it comes to homicide. When considering the rate of recorded

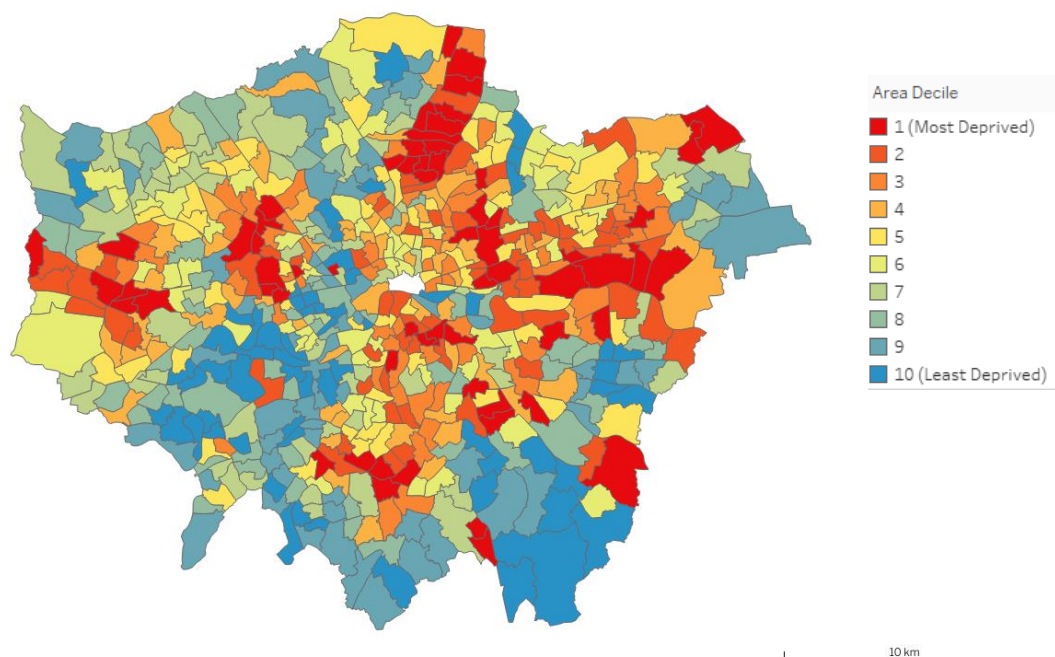
<sup>1</sup> In the 12 months to March'18

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homicides in 2018, there were 4.8 homicides per 100,000 Black Londoners compared to 0.97 per 100,000 White Londoners.

The picture of inequality exposed aligns with the areas of multiple deprivation in London; at a ward level, the areas most affected by violence are those with the most significant deprivation. The recent report published by the Office of National Statistics (ONS) into homicides to end of March 2018 indicates that there are likely to be important socio-economic factors in homicides that cannot be examined using homicide data. The report cites evidence from Leyland and Dundas (2009), for example, which investigated homicides in Scotland between 1980 and 2005, and concluded that “contextual influences of the neighbourhood of residence might be more important than individual characteristics in determining the victims of assault”. From mapping the homicides in London over the last three years to the electoral ward level, we can identify that over half of all recorded events (52%) occurred in just 12% of London Electoral wards. Furthermore, 41% of those wards were within the 20% most vulnerable wards in London<sup>2</sup>.

## Vulnerable Locality Index for London 2017

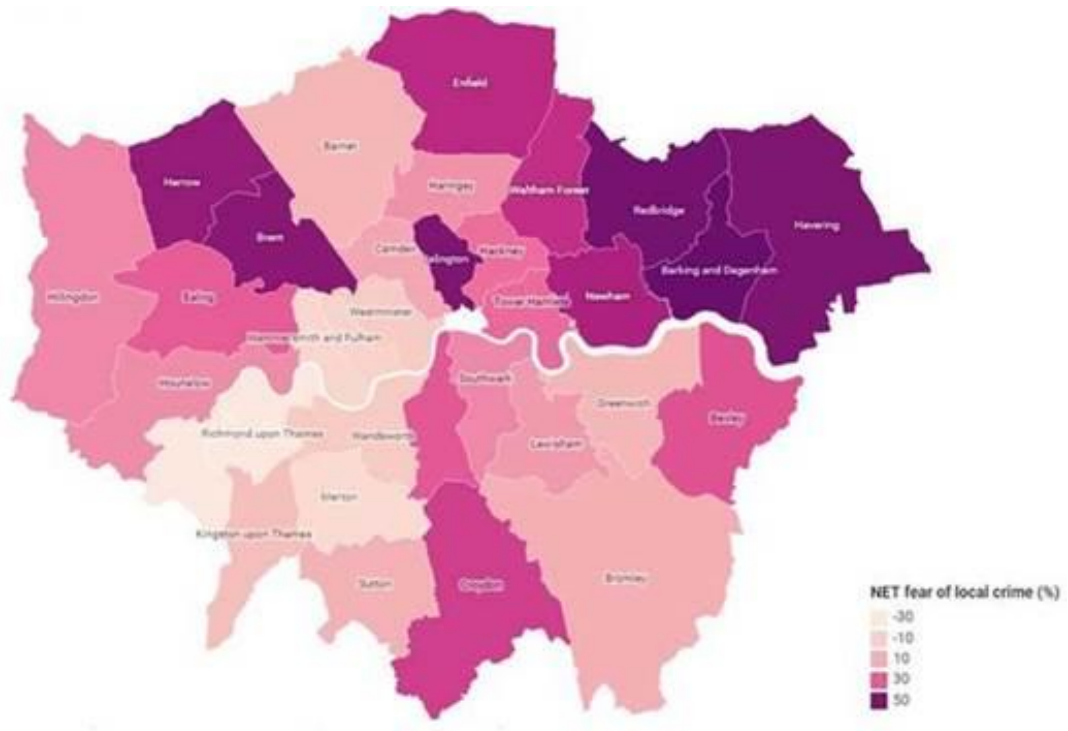


This inequality in terms of vulnerable locations has been further exacerbated by nearly a decade of austerity: London police numbers have fallen below 30,000 compared to 33,367 in 2010, and front-line services have been hit hard by cuts to local government and education, which have had a disproportionate impact on the people that had the greatest need of those services. Official government figures report that 28 per cent of Londoners live in households of below average income, the highest proportion in the UK. This amounts to 2.4 million people. The proportion of children living in poverty is higher. After housing costs, the proportion of children living in poverty in Inner London is 44 per cent and in Outer London is 34 per cent

Despite this pronounced inequality, the intense media interest provoked a substantial increase in London citizens’ fear of violent crime, which did not always correlate with the volume of violent crime in neighbourhoods and communities where they lived.

<sup>2</sup> according to the Vulnerable Localities Index.

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## The London knife crime strategy

To tackle this increasingly worrying and fatal crime the Mayor launched the London Knife Crime Strategy in June 2017 and within it was a commitment for every London borough to have a bespoke knife crime action plan created in partnership with the Met Police. Working with the 32 Community Safety Partnerships and alongside the Metropolitan Police, each local authority produced detailed knife crime plans.

One year on from the launch of the London Knife Crime Strategy, MOPAC designed a template for a new action plan built around the strands of the Knife Crime Strategy but expanding the work into broader serious violence.

The establishment of the Violence Reduction Unit has seen responsibility for overseeing and supporting development of the plans moving from MOPAC to the VRU on 1 April 2019. A further review of plans in the Summer of 2019, identified that the plans had developed well and moved forward.

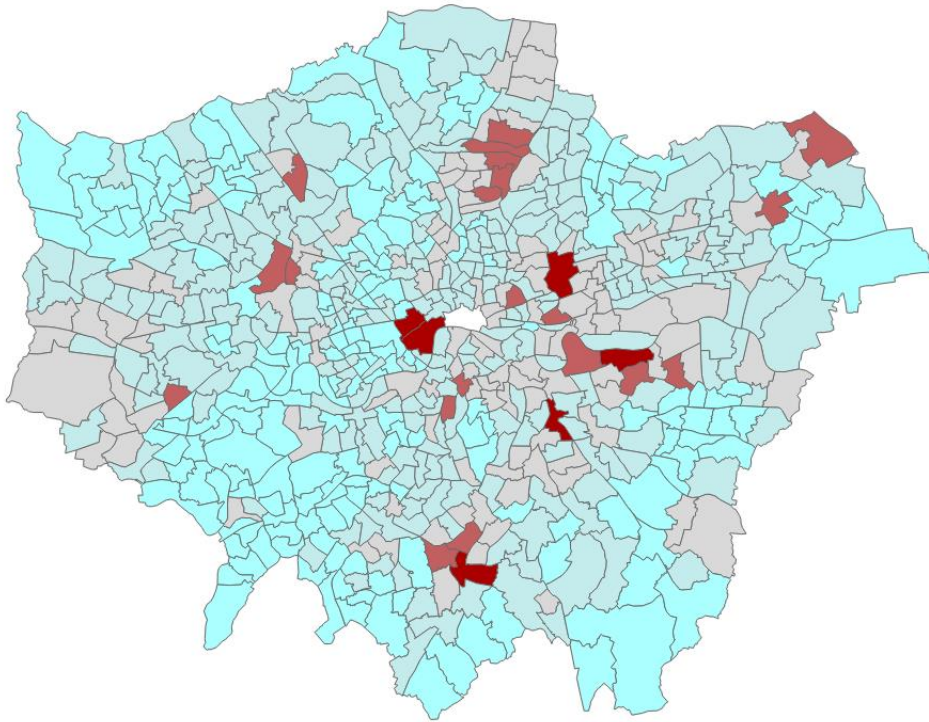
The VRU together with MPS and London Council's will continue to support London boroughs to develop and embed their action plans to tackle knife crime and violence, learning from practice identified through the VRU and elsewhere and adapting this to best suit local need.

## Violence Against Women and Girls (VAWG)

Since the start of his administration the Mayor has prioritised tackling violence against women and girls (VAWG) with the publication of an integrated VAWG strategy and record levels of investment. The map below shows combined domestic abuse and sexual offences in London in the year to March 2019.

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## Domestic Abuse and Sexual Offences in London



Most recently, the Mayor made additional £15 million of investment which MOPAC, working with the voluntary sector, is commissioning for support services. Tackling violence against women and girls will be an element of the VRU's long-term work programme. The Mayor's VAWG strategy explicitly recognises that women and girls are so disproportionately affected by domestic abuse, sexual violence and exploitation that a specific strategy is needed to address them. The approach the VRU intends to take will therefore complement, rather than replace, that essential focus on VAWG.

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## A Public Health approach

Nationally and internationally, there were strong examples of where a long-term approach towards tackling violence, based on public health principles, had brought large reductions in serious violence. Learning from Glasgow, New York, Chicago and other cities, the Mayor's Office decided to set up a Violence Reduction Unit.

This was the first example of its kind in England and Wales bringing together representatives from the voluntary, community and youth groups, and specialists in health, education, police, probation and local government. Importantly, it was set up to deal with all aspects of violent crime

In recognition that adolescent brain development – which in turn impacts on decision-making, risk-taking, and behaviour – doesn't always correlate with the Children's Act definition of a child as under age 18, the VRU will consider young people to be up to the age of 24. This is supported and recognised by a range of academic and youth agencies including UNICEF<sup>3</sup>.

Violence can blight the lives of individuals for decades. Beyond death, physical injury and disability, violence can lead to stress that impairs the development of the nervous and immune systems. Consequently, people exposed to violence are at increased risk of a wide range of immediate and life-long behavioural, physical and mental health problems, including being a victim and/or perpetrator of further violence. Violence can also undermine the social and economic development of whole communities and societies. But violence is not an inherent part of the human condition. It can be predicted and prevented.

Violence is a criminal justice issue, a matter for law enforcement, and sometimes punishment and rehabilitation. Violence is also widely regarded as a public health issue in that it impacts on the health and wellbeing of the population as well as individuals:

- It causes ill-health through fear, injury and loss, affecting individuals and communities;
- It is contagious, with clusters of incidents linked in time, by place, or by the groups of people affected;
- It is distributed unequally across population groups, and contributes to health inequalities (as identified in the London Health Inequalities Strategy);
- There are known risk factors for involvement in violence, which overlap with risk factors for other adverse physical and mental health outcomes; and
- Violence has root causes, it can be treated, and it can be prevented.

Reducing violence and its population and community impact are longstanding priorities of both the World Health Organisation and the United Nations, be that violence in conflict, against children, against women and girls, sexual violence, or gun and knife crime.

In light of this, several cities have adopted strategies to tackle violence that have been successfully adapted from those used to tackle other public health problems, like communicable diseases. At the most basic level this involves:

- Defining and monitoring the problem;
- Identifying risk and protective factors;

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<sup>3</sup> <https://www.unicef-irc.org/article/1149-the-adolescent-brain-vulnerability-and-opportunity.html> ; <http://clbb.mgh.harvard.edu/juvenilejustice/>

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- Developing and testing prevention strategies; and
- Ensuring successful ones are widely adopted.

The London VRU is committed to developing and adopting a public health approach. The outline of what a public health approach means for London<sup>4</sup> is set out below:

<b>Public Health Approach Principle</b>	<b>What does this mean?</b>	<b>What does this mean for the London VRU?</b>
<b>Focused on a defined population, often with a health risk in common.</b>	Connectors could be geography, common experience, diagnosis or demographic characteristics.	*Geographical connectors are London focused, the common feature for an initial point of intervention will be an experience of violence.
<b>With and for communities.</b>	Focused on improving outcomes for communities by listening to them and jointly designing interventions with them.	*Community at the heart of what we do. *Community in its broadest sense – residents, families, businesses, institutions. Not just the loudest voices or the gatekeepers. *Community and youth involvement at all levels and at all stages. Decision-making and governance structures relating to the VRU include community and youth voice, consistently. *Community engagement needs to be outreach based and integrated with local community partners. *This is not about reinventing services – we have strong community-based services and excellent practice in London – this is about system change.
<b>Not constrained by organisational or professional boundaries.</b>	People’s needs often do not neatly sit within a service user grouping, looking across organisations means that we can look across the system for solutions and not be too narrow in our approach.	*The approach needs to be ‘top down and bottom up’ – the leadership of the Mayor and others, combined with the change from within in communities and services. *It also needs to be ‘sideways along’. So that every single partner in London agrees that: reduction of violence will be embedded in their practice: <ul style="list-style-type: none"> <li>○ in their own programmes of work;</li> <li>○ in how they work with others; and</li> <li>○ in how they work with the public and communities.</li> </ul> *Shared accountability
<b>Focussed on generating long term solutions as</b>	Acting on the causes and determinants as well as controlling the immediate impact of the problem.	*To achieve a long-term reduction in violence in London, through a partnership public health approach – with a focus on prevention and early intervention.

<sup>4</sup> As outlined in the GLA Health ‘Public Approach to Serious Youth Violence’ report, published here <https://www.london.gov.uk/moderngovmb/ieListDocuments.aspx?CId=443&MId=6332&Ver=4>

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<p><b>well as short term responses and containment.</b></p>	<p>Identifying actions to be taken now to put solutions in place.</p>	
<p><b>Based on data and intelligence to identify the burden on the population, including any inequalities.</b></p>	<p>Analysis of the differences between our population of interest and their peers gets to their real story and the challenges faced. It also tells us about the impact across the system, underlying causes and protective and risk factors.</p>	<p>*The VRU will use a Strategic Needs Assessment to inform areas/populations of focus. *The Homicide and Serious Case Review will inform pan-London areas of priority for system change.</p>
<p><b>Rooted in evidence of effectiveness to tackle the problem.</b></p>	<p>Learning, where we can, from the experience of others and evaluating new approaches. This is important so interventions can be replicated if they work or revised if they don't.</p>	<p>*The VRU will use data and information from a range of sources to inform and shape practice. For example, health principles such as 'First, Do No Harm' will be adopted alongside community involvement principles such as 'Asset Based Community Development' and commissioning principles (see below). *The VRU will be iterative – we will learn as we go.</p>



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## Listening to partners and Londoners

Since the creation of the VRU in September 2018, listening to and learning from those affected by and working to address violence has been a top priority in developing the work programme. This has been undertaken through a variety of methods.

### Partnership Reference Group

This group of strategic partners was set up to provide strategic direction, support and challenge the work of the Violence Reduction Unit. The group is chaired by the Mayor and meets every six weeks. It is made up of representatives from community groups and specialists in health, education, police, probation and local government.

### Practitioner workshops

Input and guidance from experts working on the frontline has been fundamental to the development of this work programme. A range of individuals representing the Local Authorities community safety and VAWG practitioners, health, youth workers, police, probation, voluntary and community sector and education experts met over a period of four months to explore issues such as how the VRU could work across London's geography, governance, identifying gaps and opportunities, and exploring issues such as staffing and commissioning.

### Community meetings

Community and youth involvement is a core principle of the VRU and we place huge value in keeping connected to on-the-ground activity through a programme of engagement. In January approximately 150 community organisations came together to discuss the establishment of the VRU and were able to input ideas. Since the VRU Director took up post in March the VRU team has visited, spoken to and engaged directly with over 50 community organisations, visited Newham, Tower Hamlets, Lewisham, Croydon and Lambeth with future visits planned as part of the VRU's ongoing engagement programme.

### Targeted events

The VRU has also held bespoke events, such as a health roundtable and a voluntary and community sector and commissioning event, co-hosted a black male identity seminar, bringing together 25 leading community activists who spoke of their experiences, as well as attending sessions of existing fora to engage with partners and stakeholders. These include the London Safeguarding Children Board, London Safeguarding Adult Board, Met Police Management Board, London Heads of Community Safety, London Councils Chief Executives, Chairs of Health and Wellbeing Boards, and more.

The Mayor and his team also embarked on an engagement programme, to enhance City Hall's understanding of the community's experience of serious youth violence and working locally to tackle it. This included a summit at City Hall in April, information sessions for VCS organisations delivering applying to the Young Londoner's Fund, and a series of roundtable discussions across the boroughs led by the Deputy Mayor for Social Integration, Social Mobility and Community Engagement.

### **Who is 'the community'?**

- Voluntary and Community Sector organisations i.e. not-for-profit and non-governmental organisations delivering social activity across a range of issues. This includes advocates, campaigns and service providers, of all sizes.
- Youth-led organisations.
- Faith organisations.
- Community Activists.
- Concerned citizens of all ages, persuasions and backgrounds – including parent and families.

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Community feedback throughout this process was crucial for developing our understanding of some of the key issues facing communities including the lack of trust in institutions and a desire for asset based, locally informed support and delivery.

## Community Involvement Planning group

An informal community involvement planning group has been created to help to steer and shape the VRU's plans for ongoing community involvement, whilst it is being set up. The group has met four times between December 2018 and May 2019. In addition, there have been a series of formal and informal meetings, workshops and discussions with various community partners, to inform the design and development of all elements of the VRU, including its delivery model and early priorities.

The Community Involvement Planning Group worked with the VRU to develop a set of commitments for the VRU in its operations across London, with Londoners. These are:

- **Work with a wide range of community voices:** we know that some voices are louder than others and that institutions can sometimes seem to be listening to the same small groups of voices. We will work to ensure we are reaching out beyond the most established voices, including by working with partners to draw on their expertise and access their networks.
- **Be as accessible as possible and create meaningful opportunities for involvement:** we recognise that institutions like the VRU can be hard to reach and can feel inaccessible for many groups. We will work to reduce as many of those barriers as possible by getting out of City Hall and creating clear and varied avenues to engage with this work, so that no one is excluded. We will always consider the scheduling of meetings etc to best enable a range of partners as well as young people to participate. We will ensure there is the necessary time and space to work together.
- **Recognise where communities are coming from:** the community is not one homogenous block. Different sets of issues and inequalities create different challenges. We know that there is no one-size-fits-all approach and we must recognise different groups' needs and perspectives.
- **Be transparent about the decisions we are making and the impact of community involvement:** we will be open and transparent about decisions that are being made and how community input has shaped them. We will always be clear why we are asking for your input and what we have done as a result. Where appropriate, we will publish as much of your input as possible, so you can hold us to account.
- **Amplify community voice:** The VRU's purpose is to change the story in London, for Londoners, but we will take part in the national debate too and when we do, it will be informed by the unique expertise and experiences of London's communities.
- **Ensure community involvement is sustained over the long term:** we commit to creating regular opportunities for structured community involvement, alongside ongoing dialogue. This will take various forms including but not limited to meetings and events.
- **Involve young people:** we commit to putting youth voice and representation at every level of the VRU working including its decision-making and we will pay young people for their time.

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- **Enable opportunities:** we will play our part in enhancing opportunities for the communities we work with, including looking for routes to employment and skills development and utilising opportunities that may arise within the GLA family.
- **Tackle stereotypes:** we will seek not to perpetuate damaging stereotypes of the communities we work with; we will work to consider how we are using our channels to share positive stories of the communities we work with, alongside more challenging ones.

From the above, the Unit has developed three strategic aims:

- To reduce and stabilise violence across London– violence is a concern for us all; we will all play our part to reduce it.
- To increase feelings of safety – recognising that London is one of the safest cities in the world.
- To put community at the heart of our work – only by doing so do we have a sustainable long-term approach towards reducing violence.

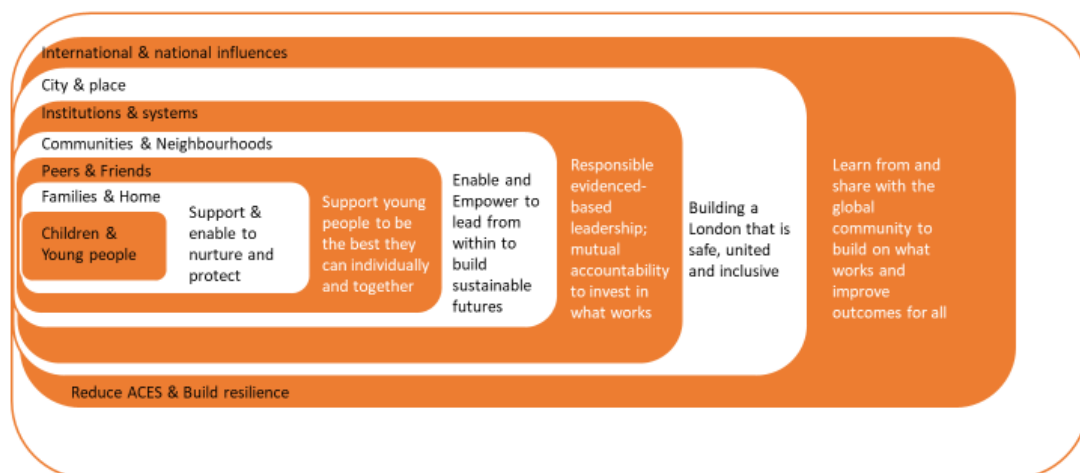
## Approach and principles

### A contextual violence reduction approach

A public health approach means no more looking at violence as an isolated incident. It doesn't mean excusing criminality, but it does mean to genuinely change behaviour we need to look at the context and influences that impact on individuals at significant points in their life; acknowledging that no individual operates in a vacuum but is both part of and influenced by a huge range of other contexts.

The VRU will adopt a contextual violence reduction approach which focuses on:

- Children and Young People – reducing Adverse Childhood Experiences and building resilience
- Families and Home – Support & enable them to nurture and protect young people
- Peers and Friends - Support young people to be the best they can individually and together
- Community and Neighbourhoods - Enable and Empower communities to lead from within to build sustainable futures
- Institutions & Systems - Institutions providing responsible leadership; London partners having mutual accountability to invest in what works
- City and Place - Building a London that is safe, united and inclusive
- National and International context - learn from and share with the global community to build on what works and improve outcomes for all



This approach translates into the child's journey through life with each young person's interaction with different levels of society expanding as they grow older. As they move from the home into the community, there are a broader range of influences and experiences which can impact on them. For most children growing up in London, these experiences reflect the fantastic range of culture, diversity and opportunity available. no individual lives in a vacuum but within the circumstances in which they are born, live, work and age.

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The term adverse childhood experiences (ACEs) is used to describe experiences that directly hurt a child (e.g. physical, sexual or emotional abuse) or affect them through the environment in which they live. This includes growing up in a household where: domestic violence, parental separation, mental illness, alcohol abuse, or drug abuse is present, or where someone has been incarcerated, as well as being excluded from school or suffering other social exclusion. Suffering four or more of these experiences in childhood has been shown to increase the chance of high-risk drinking in adulthood by four times, being a smoker by six times and being involved in violence in the last year by around 14 times<sup>5</sup>.

ACEs and their negative effects can extend beyond a single generation, with their replication driven by complex interactions between personal and social environmental factors, leading to a broader impact across generations<sup>6</sup>. Therefore, addressing the consequences of ACEs in adults may have the potential to also prevent exposure to ACEs for their children, hence the Mayor's long-term commitment to address not just youth violence but all violence.

The distribution of Adverse Childhood Experiences in London will broadly align with areas of affluence and deprivation, with higher prevalence of ACEs found in more deprived areas.

The 'pair of ACEs' tree below<sup>7</sup> illustrates not only the ACEs referenced above but also the community context.



<sup>5</sup> Public Health Wales (2015)

<sup>6</sup> Responding to Adverse Childhood Experiences, Public Health Wales (2019)

<sup>7</sup> Milken Institute for Public Health <https://publichealth.gwu.edu/departments/redstone-center/resilient-communities>

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## Building the evidence base

At the first meeting of the Partnership Reference Group, the Mayor commissioned four key pieces of work to help build the evidence base for the VRU and track its impact. These were:

1. A Strategic Needs Assessment

This will help inform the VRU priorities by setting out the strategic needs and requirements across London that will help to deal with violence.

2. A Review of Homicides and Serious Case Reviews

A thematic review of homicides across London, to establish key causation factors, common patterns and to help bring forward recommendations for the VRU and partners to consider in developing a longer-term strategy.

1 and 2 are being delivered through a partnership of Social Care Institute for Excellence, the University of Bedfordshire, and the Behavioural Insights Team. They will be working alongside MOPAC Evidence & Insight to produce published reports in September 2019.

Looking at the most serious violence across London is a core function of the VRU. For the first time, Domestic Homicide Reviews, Serious Case Reviews (now known as child safeguarding practice reviews), Safeguarding Adults Reviews, and Independent Investigation Reports (formerly known as Mental Health Homicide Reviews) will be brought together to review learning across the statutory review process.

3. A Performance Framework

An outcome-based performance framework will be developed with support from MOPAC's Evidence & Insight Team and the GLA Intelligence Team.

4. A Delivery Model

The VRU will adopt a hyper-local, place-based approach to direct support and investment to particular areas of London which are either experiencing significant increases in violence (in which case we want to invest in community-led, innovative solutions) or decreases in violence (in which case we want to learn from the activity and share that with other areas). This means that in the first instance some of the VRU's delivery will focus on priority areas of London and not cover all of London. However, the work programme includes both local delivery and pan-London activity.

A key aspect of a public health approach is the understanding of the evidence base. Colleagues at City Hall (covering GLA and MOPAC) have pooled skills, resource and data with the aim of developing a flexible and innovative data tool that will enable the evidence-based prioritisation of geographic areas that have greatest need in terms of crime, public perceptions and public health measures. The tool should act as a decision-support system that will inform a range of VRU strategic and commissioning decisions going forward.

The GLA's City Intelligence Unit (CIU) has gathered data from a range of sources for this tool. This includes a range of crime statistics from the MPS incident records; perceptions of crime, local areas and the police from the MOPAC Public Attitudes Survey; and public health data from the Office for National Statistics, Public Health England and a number of Central Government departments to include figures on deprivation, mental health, and issues for

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children at home and at school. These data have been formatted to electoral ward where possible and London borough elsewhere.

The main output of this tool is a simple score that ranks areas on need in terms of crime, public perceptions and public health. This scoring system sets a threshold (for example the top 10%) for each measure and then assigns a score by counting the number of measures for which each ward is above that threshold. For example, if a given ward is in the top 10% in 7 of the 16 measures, that ward is assigned a need score of 7.

Users can adjust the threshold and assign a weight for each variable. For example, if knife crime and deprivation are most important to a decision to target a programme, a higher weight can be given to those measures – which gives a more nuanced score and a ranking that is more relevant to the project they are working on. The scores for each ward can be viewed on a searchable table and on a zoomable map alongside other relevant data visualisations.

The aim of the tool is to bring different data sets together using a simple and flexible scoring system, specific to the needs of the user's project. It should not be thought of as an index or composite measure of a given concept that can or should be used more widely.

## 5. Ensuring the VRU is a hub of learning for London

One of the key requests from the VRU community and stakeholder engagement conversations was the request for the VRU to act as a hub of good practice and facilitate sharing, networking, capacity building. One of the key roles of the VRU will be to enable and support front-line professionals to access information, both at an academic and practitioner level, to ensure they are best equipped to ensure London is a compassionate, resilient city.

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## **A sustainable, long-term approach**

We recognise that the aim of a public health approach is to include both short-term and long-term solutions. To create system change, we need to test our approaches and learn from them. The activity outlined in this report will be initiated over the next two years.

### **Commissioning framework**

The Mayor has been very clear that the vast majority of the funding for the VRU is to be spent locally and in a rapid, transparent and accountable way.

Through a series of meetings with community practitioners, sessions with the Voluntary Community Sector, and discussions with London local authority Chief Executives, the VRU is proposing that a Commissioning Framework should be drawn up with regard to:

- Clear and transparent criteria for funding which in the first phase will focus on where the problem is most intense and where community activity is strongest;
- That there is a proven and strong connection between VCS and local authority in the geographical areas in order to ensure that smaller, localised service providers have a stronger chance of being able to participate fully in the delivery of local solutions;
- That there would be a clear correlation between the interventions developed through evidence and encouraged at a regional level and those working at a local level; and
- That the commissioning will be distributed at an appropriate level be that ward, borough or multi borough approach.

We are working with London Funders, a well-regarded consortium of funders, to incorporate their principles of good practice commissioning into a future commissioning framework. The commissioning framework will be underpinned by the objectives outlined below.



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## Objectives and work programme

Our work programme will follow the path of a child's journey through life, recognising that young people can be exposed to vulnerable situations in a range of social contexts that go beyond the family. As they move from the home into the community, there are a broader range of influences and experiences which can impact on them. For most children growing up in London, these experiences reflect the fantastic range of culture, diversity and opportunity available. But for some, there are more challenging or problematic experiences.

There are points along this journey where we need to use the evidence to inform what interventions will change the direction for that young person. And it is not enough to build resilience around the individual; we must also be vigilant of the places and experiences with which young people interact and ensure we make them positive and safe places to be. That includes schools, town centres, housing estates, their networks, friends and the family home. Adopting the contextual framework and aligning that with the journey of a child our work programme encompasses the following eight core objectives:

1. Supporting individuals to be more resilient.
2. Supporting stronger families.
3. Young people leading change.
4. Enabling communities to be strong, safe and resilient.
5. Prioritising wellbeing and achievement in schools.
6. Giving young people every chance to succeed.
7. Making London a more compassionate and safer city.
8. Increasing confidence in public institutions and changing the message around violence.

In the first year of operation the VRU will prioritise the following key areas of work for funding:

- Expanding after-school provision in high-crime areas - following data showing that violent incidents involving young people aged 10-16 are more likely to happen at the end of the school day.
- Supporting the often-difficult transition from primary to secondary school.
- Supporting schools to reduce school exclusions - create a programme to reduce school exclusions by piloting a programme of inclusion and nurturing as developed in Glasgow where exclusions were reduced by 81 per cent over the last decade.
- Extra support for young people affected by domestic violence – following evidence of the link between involvement in violence and children witnessing violence in the home. The VRU will work with women and girls' networks to work towards equity of provision and access for young people aligned with support services for adults on a pan-London level.
- Supporting parents – expanding access to parenting programmes to support parents who are concerned about their children - enabling them to access information and good practice, share their concerns and support each other. The VRU will also invest in supporting vulnerable parents and carers including those who are victims of crime and in the Criminal Justice System.
- Invest in London's youth workers by co-producing a programme of training and development to support and grow their profession – recognising the relationship between youth workers and young people is often the relationship that means most

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to a young person and is so often the relationship they point to as the moment they were introduced to new opportunities and diverted away from crime.

- Working with young people on establishing a Young Persons' Action Group to inform the Unit's work – a Young Persons' Action Group will be representative of young people across London and will make decisions to inform the work of the Unit, backed up with funding to put those actions into practice to make a real difference in communities.
- Piloting programmes in prisons and young offender institutions.
- Working at a neighbourhood level and with local Community Safety Partnerships continue developing best practice and multi-agency action plans to address violence and knife crime in their areas.
- Investing in grassroots initiatives to combat knife crime and ensure sustainable investment in effective programmes of voluntary and community sector activity to address violence in those areas most affected.

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## Objective 1 - Supporting individuals to be more resilient

*Reduce Adverse Childhood Experiences and build resilience*

### Our Commitments

- Working with a coalition of women's groups ensure there is support for young people affected by domestic violence. The VRU aims to work towards equity of provision and access for young people aligned with support services for adults on a pan-London level.
- Working with health partners, professionals and the voluntary sector the VRU aims to reduce the barriers preventing young people accessing mental health services.

### Why

The role of resilience as a protective factor to mitigate against the impact of ACEs is increasingly evident. Recent studies have shown that resilience resources in childhood and adulthood can moderate the negative outcomes associated with ACEs and show protective effects on mental ill health, and childhood health and educational attendance<sup>8</sup>. The most common factor found in people acknowledged to have demonstrated resilience following adverse events is the presence of at least one stable and committed relationship with a supportive parent, caregiver, or other adult

Witnessing domestic abuse within the home is one of the Adverse Childhood Experiences. A Vulnerable Adolescents Review recently undertaken by Croydon Council aimed to identify patterns in the 60 children's experiences. The report found 72 per cent had an absent father, 42 per cent were exposed to domestic abuse, 28 per cent suffered homelessness and 27 per cent the absence of a mother.

We know that confidence in public services is one of the biggest deterrents to people using them, in particular young people. The Care Quality Commission<sup>9</sup> identified a range of barriers preventing young people from accessing mental health support. Only 50% of young people have a 'good opinion' of the Met police<sup>10</sup>, and only 44% of young victims reported their crime to the police. Through the practitioner workshops, frontline experts told us that parents sometimes avoid seeking help from social services for fear of being drawn into 'the system' and being blamed.

The Big Lottery<sup>11</sup> stress the importance of extending support to places and spaces where young people feel comfortable – designing service provision around users rather than asking individuals to fit with systems and processes. We need to support services to adapt to this change.

An increased understanding of the interconnectedness of the causes of violence and the complexity of social issues (violence, mental health, drug and alcohol abuse, marginalisation,

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<sup>8</sup> Responding to Adverse Childhood Experiences, Public Health Wales (2019)

<sup>9</sup> Review of children and young people's mental health services, CQC (2017)

<sup>10</sup> MOPAC Youth Voice Survey (2018)

<sup>11</sup> Preventing Serious Youth Violence – what works? Big Lottery Fund (2018)

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socio-economic inequalities to name a few) should provide the drive for services to collaborate<sup>12</sup>.

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<sup>12</sup> Law enforcement and public health: recognition and enhancement of joined up solutions, The Lancet, January 19, 2019

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## Objective 2 - Supporting stronger families

*Supporting parents and carers to nurture and protect*

### Our Commitments

- To develop resilient families through programmes which support parents who are concerned about their children – enabling them to access information and good practice, share their concerns and support each other.
- Supporting vulnerable parents and carers by expanding access to parenting programmes for those who are victims of crime and in the Criminal Justice System.

### Why

There is considerable evidence that supporting whole family approach should be part of a holistic approach to reducing violence, not just a focus on young people.

A recent Vulnerable Adolescent Review published by Croydon found that 42% of children classified as vulnerable had grown up in homes where domestic abuse was an issue. The Early Intervention Foundation 'Commissioning Parenting and Family Support for Troubled Families' states that when evidence-based parenting interventions are implemented at scale, significant population-wide benefits can be achieved.

The 2017 report on the Joint Targeted Area Inspections (JTAs) of children and Domestic Abuse (DA) recommends paying more attention to the emotional, psychological and practical needs of children, moving away from a 'failure to protect' discourse with victims (as a result of which children and their non-abusive parent can become alienated from the services which aim to support them) and having greater focus on the attitudes and behaviour of perpetrators. It must be stressed here that the VRU recognises the gendered nature of domestic abuse, and that the non-abusive parent is most often the mother. Therefore, any intervention piloted must take into account the gender inequality inherent in the context of the majority of domestic abuse.

As well as the community trust issues noted above, our consultations with practitioners identified that engagement with statutory services can be stigmatising and can lead to those needing help avoiding statutory intervention.

In Edinburgh, an audit of children's social care response to domestic abuse cases indicated that the response to domestic abuse has several characteristics:

- an overemphasis on singular incidents of physical violence, rather than recognition of a wider pattern of abuse and control;
- an assumption that separation or removal of the perpetrator will automatically reduce risk, placing responsibility for care of the children and for ending the abuse primarily with the victim, whilst superficially engaging with perpetrators; and
- explicitly encouraging separation, without addressing significant risks to the victim, ensuring safe contact or the ongoing disruption to family life.

The findings reflected a significant and growing body of research pointing to the need for a change in the way child protection systems deal with domestic abuse. Edinburgh has joined a number of US states in implementing the Safe & Together programme, aimed at addressing

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the above issues. The model ensures that children's social care works in partnership with the non-offending parent as a default position and acknowledging their protective efforts.

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## Objective 3 – Young people leading change

*Support young people to be the best they can individually and together*

### Our Commitments

- To establish a strand of work, led entirely by young people, which develops a peer-to-peer response to violence.
- The VRU will place young people at the heart of decisions through establishing a young persons' action group and enabling young people to lead programmes of change.

### Why

In all of the consultation with communities and young people undertaken thus far, the need to have young people shaping and designing the response to violence in London has been highlighted time and time again.

*What Works to Prevent Gang Involvement, Youth Violence and Crime*, Early Intervention Foundation (2015) found that addressing wider factors such as the peer group increase the likelihood of programmes having positive effects.

London Funders 'Begin at the Beginning' report into responses to Serious Youth Violence in London emphasises the need for co-production, facilitating the genuine participation of young people and communities working as equals with power alongside other professionals, academics and policy makers.

For the VRU to develop a unique approach to violence affecting young people, we recognise that this needs to be led by young people and we will provide the resources, support, and infrastructure to enable this to happen. As per our community commitments above, this will not be exclusively linked to this objective alone but threaded throughout our work and decision making.

Again, there will often be a difference in the way that young people – boys and girls – experience and indeed commit peer-to-peer violence. Analysis of MPS data in 2015 indicated that peer on peer abuse accounted for over half (55%) of all CSE cases in London. Any response to peer-to-peer violence must therefore take into account this context, alongside the complex nature of the 'victim-perpetrator' relationship.

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## Objective 4 - Enabling communities to be strong, safe and resilient

*Enabling and empowering communities to lead from within to build sustainable futures*

### Our Commitments

- Investing in grassroots initiatives to combat knife crime and ensure sustainable investment in effective programmes of voluntary and community sector activity to address violence in those areas most affected.
- In consultation with communities and London local authorities ensure that there is a comprehensive package of support and good practice for communities to access in the aftermath of a serious violence incident; and roll out a community fund to support local neighbourhoods to deal with trauma and rebuild community pride.
- To build and empower communities to use existing assets and overcome structural or systematic barriers. The VRU will work with voluntary and community sector partners to identify the barriers facing small community organisations in accessing premises, financial support and capacity building.

### Why

Strong communities are at the heart of our strategy to tackle violence in both the short and long term. Through working with and listening to the VCS, front-line practitioners and the police we are aware that finding, supporting and promoting best practice is one of the key asks of the VRU. The Big Lottery report<sup>13</sup> into preventing serious youth violence highlighted the need to train and support the community in identifying risk factors and supporting trusting relationships with young people.

We know that trust between communities and statutory services, in particular the police, is not where we would like it to be. 12,800 Londoners are interviewed each year about their experiences and attitudes towards policing and this Public Attitude Survey has found:

Over the most recent two financial years, there has been a sharp decline across most public perceptions of the police. Results are now at the lowest point since 2012-13, with large reductions have been seen in the proportion of Londoners feeling the police deal with the issues that matter (-11 percentage points), do a good job locally (-9 percentage points), can be relied on to be there when needed (-8 percentage points), and listen to local concerns (-8 percentage points). The Youth Voice Survey (2018) of 7,832 young people in London found that only 50% of young people have a 'good opinion' of the police. However, the survey also found that those young people who have a known Safer Schools Officer are more likely to have stronger feelings of safety and more positive opinions of the police.

This concerning decline in satisfaction is not confined to policing; the Kings Fund assess satisfaction in the NHS and social care and in 2017 found public satisfaction with the NHS overall was 57% in 2017 – a six percentage point drop from the previous year. At the same time, dissatisfaction with the NHS overall increased by seven percentage points to 29% – its highest level since 2007. However, there is an opportunity to use NHS clinicians in community-led solutions as medicine is seen as being a trusted profession.

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<sup>13</sup> *Preventing Serious Youth Violence – what works?* Big Lottery Fund (2018)



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Community Links held a range of community conversations<sup>14</sup> which identified a range of structural and systemic factors which affected community perceptions of Local Authorities and other public services.

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<sup>14</sup> *Community Conversations: Unearthing community-led ideas for tackling youth violence*, Community Links (2019)

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## Objective 5 - Prioritising wellbeing and achievement in schools

*Institutions providing responsible leadership; London partners having mutual accountability to invest in what works*

### Our Commitments

- To reduce the number of young people excluded and missing from mainstream education by developing programmes in partnership with local authorities and educational establishments that value inclusion and nurturing.
- Delivering a programme of support for young people at difficult points in their school journey, particularly those with special educational needs, and to support successful primary and secondary transition.
- To expand and promote after-school provision, especially activity for young people during the times of 4-7pm during the weekdays.

### Why

Schools have a clear duty to keep students safe, and there is substantial evidence that schools are one of the safest places for young people. School is a place where the consequences of ACEs experienced at home may play out a child's behaviour. ACEs may affect a child's ability to concentrate and/or to engage positively with others, which can contribute to disruptive behaviour. So can begin a cycle of exclusion, where a child is addressed as a problem and withdrawn from classes, activities, other children and potentially school itself.

Croydon's Vulnerable Adolescent Review found that exclusion from school was a common factor in the most vulnerable young people in the borough. All of those excluded from primary school went on to be involved in the criminal justice system. Exclusion from school is one of several adverse childhood experiences which can increase the likelihood of being involved in or affected by violence in later life.

In Glasgow school exclusions have been reduced by 81% over the last 10 years that has been linked with a 48% fall in violent youth crime. There has only been one permanent exclusion over the last two years. Key to their success was establishing a vision of a nurturing City, and setting out what that means for education and schools. Glasgow have around 70 nurture classes which meet the needs of vulnerable children in primary schools. They are taught by staff trained in nurture. The guidelines for nurture classes provide clear advice on the criteria for children joining the nurture classes and equally for children re-joining their mainstream peers. The Executive Director of Education Services believes this approach enables young people to contribute more to their local communities because they have confidence in themselves.

A longitudinal cohort study of 1,435 adult prisoners in the UK reported that 63% said they were excluded from school temporarily, and 42% were excluded permanently.

The transition from primary to secondary school is a period of significant change in the lives of young people. Many children embrace and adapt to these changes, particularly when they are well supported by parents, families and school. There is, however, a significant minority of students who experience uncertainty, risk, and anxiety around transition, or who are not

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equipped with the necessary skillset to navigate this change successfully. This can adversely impact on educational outcomes including behaviour, attendance and attainment<sup>15</sup>.

A recent Ofsted report<sup>16</sup> outlined that schools were sometimes wary of directly addressing the issue of knife crime, in case they were seen to be less safe than other schools in the area. By creating a best practice standard for schools to adopt, they can demonstrate that they are prioritising safety and wellbeing of students.

A study from a Major Trauma Centre published in the British Medical Journal over 11 years looking at 1800 young people found that the majority of stabbings occurred in males from deprived communities, with a sharp increase in incidence between the ages of 14 and 18 years. Among children (age <16), a significant peak in injuries occurred between 16:00 and 18:00 hours, accounting for 22% (38/172) of injuries in this group compared with 11% (182/1652) of injuries in young adults. In children, stabbings occurred earlier on school days (hours from 08:00: 11.1 vs non-school day 13.7,  $p<0.01$ ) and a greater proportion were within 5 km of home (90% vs non-school day 74%,  $p=0.02$ ). Mapping individual incidents demonstrated that the spike in frequency in the late afternoon and early evening was attributable to incidents occurring on school days and close to home.

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<sup>15</sup> Evaluation of the Stepping Stones pilot, OPM Group (2018)

<sup>16</sup> Safeguarding children and young people in education from knife crime, Ofsted, 2019

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## Objective 6 – Giving young people every chance to succeed

*Institutions providing responsible leadership; London partners having mutual accountability to invest in what works*

### Our Commitments

- The VRU will invest in London’s youth workers by co-producing a programme of training and development to support and grow their profession.
- To support initiatives across the criminal justice system to reduce violence in prisons and provide support to offenders.
- To recognise the disproportionate number of young black men in the criminal justice system and target supportive interventions towards them.
- Working with the business community to expand London’s offer in training, mentoring and work placements for young people building on successful summer programmes in the sport culture and creative sectors.

### Why

In London, reoffending rates for adults have remained steady for a decade at around 27%. Adults who served sentences of less than 12 months reoffended at a rate of 64.6%, compared to 29.9% for those who served sentences of 12 months or more. For those who are in prison, we need to create safe spaces for them to be rehabilitated. Where they are in the community, we need to ensure joined up service provision, targeted at those who need the most support to turn their lives around.

From the work on ACEs, we know that young people who are involved in offending and violence have often experienced harm and are themselves victims. The ‘victim-offender overlap’ is a widely acknowledged and has become one of the most empirically supported and established findings in the field of criminology<sup>17</sup>.

In the follow up to the Lammy Report<sup>18</sup>, the Ministry of Justice note that 24% of first time entrants to the Youth Justice system were BAME and 54% of the remand population was BAME, 46% were white. Analysis of custodial sentences received by children and young people that built on that of the Lammy Review showed that, in 2016, BAME young people were more likely to be sentenced to custody than their White counterparts. In the year ending 2017, 45% of children sentenced to custody were BAME.

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<sup>17</sup> Oxford Bibliographies; Some of these efforts include chapters/entries by criminologists such as [Berg and Felson 2016](#), [Jennings 2016](#), and [Schreck and Stewart 2011](#) which summarize the recurring themes on the victim-offender overlap and [Moore 2013](#) which explores victim identities as both victims and offenders. [Jennings, et al. 2012](#) provides a systematic review of the relevant literature testing the existence of the victim-offender overlap and its etiology through recent years. [Cuevas, et al. 2007](#) provides an excellent overview of the overlap among adolescents aged ten to seventeen.

<sup>18</sup> Tackling Racial Disparity in the Criminal Justice System: 2018 Update, Ministry of Justice 2018

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The relationship between youth workers and young people is often the relationship that means most to a young person and is so often the relationship they point to as the moment they were introduced to new opportunities and away from crime.

104 London youth clubs and council youth projects have closed their doors since 2011, with a reduction in investment of £145m. Those that remain are embedded in communities and are trusted by them in ways that statutory services are not. Nine in ten UK households have used a charity at some point, and around three quarters (74%) have used a charity service in the last 12 months<sup>19</sup>. In a survey of 2,901 people<sup>20</sup>, responses showed that charities are best placed and most trusted to speak on behalf of the disadvantaged – 67% felt that charities were best placed to speak on behalf of disadvantaged people and 56% said they most trusted charities to do this.

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<sup>19</sup> Charity Street, Charities Aid Foundation (2018)

<sup>20</sup> Ibid

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## Objective 7 – Making London a more compassionate and safer city

*Building a London that is safe, united and inclusive*

### Our Commitments

- Deliver a coordinated pan-London approach to community and workforce trauma-informed practice and training for frontline professionals.
- Working at a neighbourhood level and with local Community Safety Partnerships continue developing best practice and multi-agency action plans to address violence and knife crime in their areas.
- To work with young people on how we can make local places and transport hubs safer.

### Why

This is a key tenet of implementing a public health approach. A trauma-informed approach is defined<sup>21</sup> as follows; A program, organization, or system that is trauma-informed:

- Realizes the widespread impact of trauma and understands potential paths for recovery;
- Recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system;
- Responds by fully integrating knowledge about trauma into policies, procedures, and practices; and
- Seeks to actively resist re-traumatization.

A trauma-informed approach can be implemented in any type of service setting or organization and is distinct from trauma-specific interventions or treatments that are designed specifically to address the consequences of trauma and to facilitate healing. The VRU will therefore develop plans to provide trauma informed training so there is a network of support in communities, our voluntary sector, schools, business and our public services (such as police, prisons, children's social care, tenants and residents associations) to help those who are affected by trauma.

This will require close partnership working with the health sector, and we will build on the commitments and support pledged by senior stakeholders in health during the Health Roundtable in May 2019. These will include supporting Local Authority health and wellbeing boards to work closely with Community Safety Partnerships to develop the action plans above, working closely with the newly appointed clinical director for violence reduction.

The statistics around knife crime and domestic abuse are most concentrated in school holiday periods. Young people are most often at risk during travel home from school<sup>22</sup>. The GLA Health report on Serious Youth Violence found that the violence affecting school age children taking place in the afternoons/early evenings and during the week. We also know

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<sup>21</sup> Mentalhealth.org

<sup>22</sup> S Mayor, 'Under 16s are at highest risk of being stabbed going home from school, UK study finds', British Medical Journal, November 2018

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from scrutinising data maps that certain transport hubs in London are much more likely to be the scene of violence.

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## Objective 8 – Increasing confidence in public institutions and changing the message around violence

*Tackling and changing international and national influences, building on what works and improve outcomes for all*

### Our Commitments

- To identify and work to overcome the key barriers to community trust and work with the police and other public services to foster greater openness and transparency to inspire greater confidence in public institutions.
- Develop a clear, simple and jargon free language around violence that can be a positive message of hope to both reassure and encourage London citizens.
- To develop a movement against violence that draws on ambassadors to promote positive messages and activities for London citizens to get involved to support local communities.
- To challenge the existing narrative of violence in three key ways;
  - To discourage the imagery of knives and other shocking newspaper and social media headlines that spread fear rather than understanding about the causes of violence;
  - To confront head-on the visible but inaccurate idea that youth violence is black on black violence; and
  - To make sure that domestic violence is a key part of the narrative and not eclipsed by national focus on street/knife crime.

### Why

The way in which issues are presented by the media, politicians and others, shapes our views, and as a result, can shape our behaviour.

Work underway in Scotland<sup>23</sup> indicates that images of knives and weapons can induce fear in young people, leading to a greater likelihood of feeling that they need to protect themselves by carrying a weapon themselves. MOPAC's 2018 Youth Voice Survey<sup>24</sup> found that young people reported feeling more worried about knife crime on seeing an image that featured a knife than they did on seeing the same image but without the knife. Fear of crime has been linked to knife carriage. Taken together, these suggest that knife imagery may contribute to knife carriage. Catch22<sup>25</sup> outlined a range of ways in which social media influence young people and can increase the likelihood of violence.

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<sup>23</sup> No Knives, Better Lives, <https://noknivesbetterlives.com/wp-content/uploads/2019/03/Media-Guidanceonline.pdf>

<sup>24</sup> MOPAC Youth Voice, 2018

<sup>25</sup> Social Media as a Catalyst and Trigger for Youth Violence, Catch 22, 2017



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The Runnymede Trust<sup>26</sup> found that four out of every five people (78%) thought that the way that the media portrays ethnic minorities promotes racism. This concern was not just expressed by respondents who were from minority ethnic backgrounds; over two-thirds (76%) of White British respondents thought that the media's representation of minority ethnic groups fuelled racism. Community groups report the impact that the perception of black men as solely the victims and perpetrators of crime can have on their own perceptions and aspirations, and that of others.

MOPAC's Public Attitudes Survey found that 67% of Londoners living in vulnerable areas are concerned about drugs. In *Drugs Prices and Systemic Violence: An Empirical Study* (2008), Sarrica maps drug prices against criminal activity; there is strong evidence that the price of heroin drives greater violence. On one hand, some Londoners are concerned about drug use and sale in their areas; on the other, drug use can be seen as a 'victimless' crime.

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<sup>26</sup> The Runnymede Trust, January 2014

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## **Governance and Partnerships**

The Partnership Reference Group has been invaluable in providing strategic direction, support and challenge to the Violence Reduction Unit. While the PRG was originally envisaged as a temporary working group, the Community Involvement proposal recommends its continuation into a quarterly meeting as well as an expansion of its membership, redefined terms of reference and a different way of working.

Throughout the development of the VRU community engagement has been essential. Community involvement will be integral to the VRU's future success. The PRG Governance paper outlines proposals for how this will be taken forward, as well as the approach for involving young people in both design and delivery.

## **Finance and Resources**

The Violence Reduction Unit has a budget of £6.8 million for 2019–2020. The operating cost of the VRU to allow a small directly funded directorate operating from City Hall, with the vast amount of the budget being spent on direct services across London.

In addition, funds from across MOPAC and the GLA are supporting VRU activities, notably in the case of MOPAC the £1m safer schools funding. and the GLA's £45 million Young Londoners Fund which is supporting local networks tackling youth violence alongside projects increasing opportunities and activities for young people.

In addition to the £6.8 million from the Mayor, the Home Office has provisionally awarded the London VRU £7 million. This is subject to an application process which requires confirmation of the VRU partnership, allocation of spend, and commitment to developing a strategy, meeting high-level outcomes and supporting an evaluation. The deadline for submission of applications to the Home Office was 8 July and we are awaiting a response. The proposed elements of the funding bid correlate to the objectives set out in the VRU strategy and aligns with the year one work programme.

Going forward we intend to make sure there is an even greater alignment of strategic funding across City Hall, and beyond with London partners. The VRU is working closely with the London Funders about both increasing the amount of funding and the alignment of funders to support the work of the Violence Reduction Unit; and has started conversations with the Mayor's Fund.