**January 2023**

Serious Violence in

Rossendale

District Needs Assessment



**Lancashire Violence Reduction Network**

Teigan Whiffing (VRN Intelligence Analyst)



# Executive Summary

The following needs assessment is one of 14 produced for each of the 14 districts within the Lancashire area. These needs assessments intend to provide an overview of the area in terms of risk and protective factors for violence to support areas in addressing this need with appropriate action, reflecting the aims and objectives of the [violence reduction network](https://www.lancsvrn.co.uk).

**Aims and Background**

This needs assessment seeks to provide an understanding to the Violence Reduction Network (VRN), partners and public about the reality of violence within each district of Lancashire, and the prevalence of the underlying risk factors of violence. This assessment is a reflection of the Pan-Lancashire ‘[Strategic Needs Assessment](https://www.lancsvrn.co.uk/wp-content/uploads/2021/02/Lancashire-Violence-Reduction-Network-Strategic-Needs-Assessment-2021-FINAL.pdf)’ for specifically Rossendale.

**A** [**Public Health Approach**](https://www.publichealth.com.ng/who-definition-of-public-health/) **to Serious Violence**

A growing body of evidence tells us that violence is preventable. Since the publication of the World Health Organization’s [World report on violence and health](http://apps.who.int/iris/bitstream/handle/10665/42495/9241545615_eng.pdf;sequence=1) in 2002, experience, research and intelligence has generated an understanding of the risk factors that contribute to violence, and the many things that can be done to prevent it. We have a growing body of knowledge regarding the impact of violence and those most at risk of being either a perpetrator and/or victim. This understanding allows us to design and implement a public health approach to violence prevention around evidence-based frameworks.

The preventable nature of violence naturally lends itself to a public health approach. Violence reflects many of the other common facets of important public health issues. There are wide inequalities in the prevalence of violence, with the greatest impacts being felt by the most deprived communities([Protecting People, Promoting Health, 2021](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/216977/Violence-prevention.pdf)). There is also a cyclic nature of violence. For example, there is sound understanding that exposure to violence in childhood (amongst other adverse childhood experiences), increases the likelihood of an individual becoming involved in violence later in life. Finally, there are masses of data sources from across a range of partners, which support the implementation of life-course prevention strategies at a universal through to a targeted level.

**Approach**

This needs assessment includes the following areas of information:

* A demographic overview of the district;
* Epidemiology\* of risk and protective factors for violence in the district;
* A violent crime problem profile for the district.

*\*Epidemiology is a quantitative public health discipline which looks at the frequency and patterns of events in a group of people and what the risk and protective factors are.*

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# Serious Violence Definition

*‘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, maldevelopment, or deprivation.’*

(World Health Organization)

At the inaugural meeting of the Lancashire Violence Reduction Network leadership board, data was presented to contextualise the local picture and the definition of serious violence was agreed. These crime types and descriptors are:

**Assault resulting in injury**

**Rape**

**Robbery**

**Aggravated Burglary**

**Domestic Abuse and Violence**

**(DAV)**

**Child Exploitation (Sexual and Criminal)**

**Homicide**

**Knife Crime**

**Gun Crime**

Using this definition means there are some crimes which will appear in multiple groups as not all crime categories are independent crime classifications. For example, an assault resulting in injury between two domestically related persons using a knife will be considered in three categories: knife crime, assault with injury and domestic abuse and violence.

# Data Sources

Data included in this needs assessment has been taken from several sources:

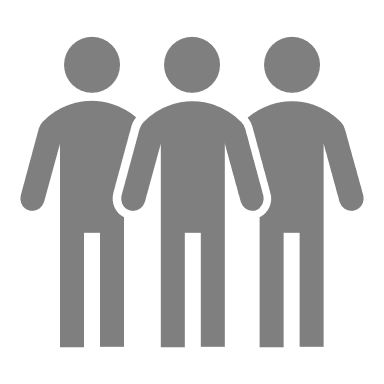
* [Public Health England (PHE) fingertips](https://fingertips.phe.org.uk/)
* [Lancashire Insight](https://www.lancashire.gov.uk/lancashire-insight/)
* [Office for National Statistics (ONS)](https://www.ons.gov.uk/)
* [GOV.uk: Home Office statistics](https://www.gov.uk/government/organisations/home-office/about/statistics)

Note – whilst there is more data available than that included in this needs assessment, only those updated since 2020/21 have been included to ensure relevancy (several from an earlier period are included, where relevant). A previous version was produced in 2021 and should be referred to for additional data prior to 2021 (please contact the VRN for this previous version).

All of the data used and discussed within this needs assessment is public-access, population level data. For this reason, this needs assessment can be distributed and shared with those necessary with reference to the original data sources as outlined prior. Any data caveats or data quality issues are listed within the original data sources and should be reviewed before any interpretations are made of the findings.

# Demographic of Rossendale

Rossendale is an authority area in East Lancashire (policed by East division of Lancashire Constabulary) that covers 138 square kilometres. Rossendale is made up of 14 wards (at the time of the 2011 Census).

**Population**

Rossendale had an above national average rate of deliveries to teenage mothers (12–17-year-olds) at 1.0% compared to 0.7% (2020/21). Similarly, Rossendale had more babies (7.9%) born at a lower birth weight compared to 6.8% nationally (2020).

The population of Rossendale (‘mid-year estimate’, Census 2021) was 71,432. This was the 2nd lowest recorded of the 14 districts in Lancashire.

The population of Rossendale is estimated to increase by 12.6% between 2018 and 2043. This is the 4th highest rate for all 14 districts.

Rossendale had an estimated population density (number of people per km2) of 513. This was the 6th lowest across the 14 districts.

**Age and Sex Structure**

Rossendale has a near equal split of sex within the district, with a 50.7% female population, and a 49.3% male population. For both females and males, the highest recorded age band was 50- to 54-year-olds.

**65+**

**20-64**

57%

20%

57%

23%

25%

18%

**Male**

**Female**

****

**0-19**

****

****

**Housing**

****

£168,000 median house price (£285,000 England average)

1.5 homeless households per 1,000 (lowest in Lancs)

1,068 vacant dwellings (3rd lowest in Lancashire)

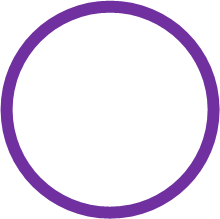
32,320 dwelling stock (2nd lowest in Lancashire)

11 households in temporary housing (6th lowest in Lancs)

50.5% of housing in council tax band A (40% in the North West)

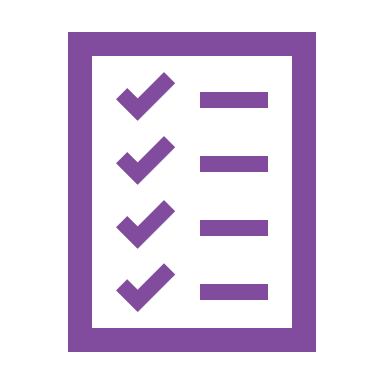
# Risk and Protective Factors for Serious Violence

**Education**



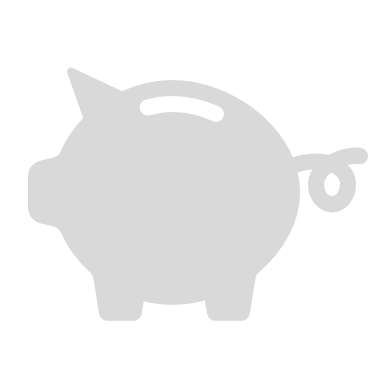
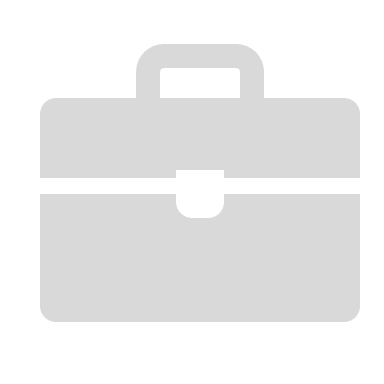
2.8%

of young people (known to local authority) in Rossendale were NEET (not in education, employment or training) during 2020/21. This is lower than the North West total rate (3.4%), but the same as the England total rate (2.8%).

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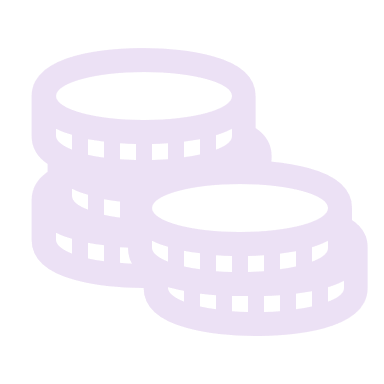
In the year 2020/21, Rossendale made 11 permanent exclusions – this equates to a rate of 0.09 (5th highest in Lancashire). There were also 402 suspensions – this was a rate of 3.4 (5th lowest in Lancashire).

The average attainment 8 score (measure across 8 core qualifications scored at the end of key stage 4 for state-funded school pupils) in Rossendale is 51.2, this is higher than the North West average score of 49.6 (2020/21).

**Employment and Income**

Rossendale had the 7th lowest rate of persons on universal credit (13.6%). This was also lower than the North West rate of 15.9%.

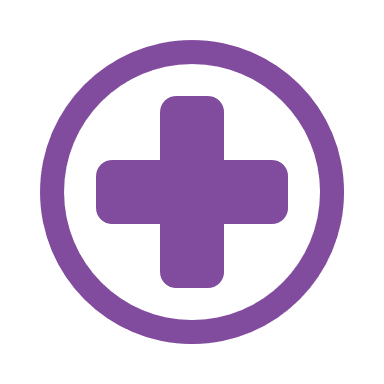
Rossendale has an above North West rate (73.2%) of the working age population in employment at 81.7%. This is the 2nd highest employment rate across the Lancashire districts.

****

Rossendale has 20.5% of under 16’s living in ‘relative’ low-income families (7th highest in Lancashire), this is however lower than the North West rate of 21.2%. Similarly, Rossendale has 16.6% of under 16’s living in ‘absolute’ low-income families (7th highest in Lancashire), which is the same as the North West rate of 16.6% (2020/21)

**Health and Wellbeing**

The life expectancy of males born in Rossendale is 77.6 – this is between the North West life expectancy of 77 and 78.7 in England. Similarly, the life expectancy of females born in Rossendale is 81.0 – this is also between the North West life expectancy of 81 and 82.6 in England (2020).



Below North West rate (500) for admission episodes for alcohol-related conditions at 420 per 100,000 (2020/21)

Above the North West rate (64.5%) for physically active adults at 67.2% (2020/21)

Above the North West rate (11.0%) for smoking status at time of delivery at 14.6% (2020/21)

Above the North West rate (11.4) of suicide at 16 per 100,000 (2021)

# Violent Crime Profile

**Serious Violence**

Whilst the focus of the LVRN is on the underlying drivers of serious violence as depicted prior, it is also important to understand where serious violence is taking place within a locality. When referring to serious violence here, this is reflective of the Home Office Crime types – violence against the person, and sexual offences as opposed to the [LVRN serious violence definition](#_Serious_Violence_Definition).

****As you can see in the right-hand side graph, the annual volume of serious violence has been increasing in Rossendale, to over 2,000 recorded crimes in 2021/22. In addition, the left-hand side image shows Rossendale separated by lower super output areas ([LSOAs](https://www.data.gov.uk/dataset/c481f2d3-91fc-4767-ae10-2efdf6d58996/lower-layer-super-output-areas-lsoas)). From this heat map, you can see the LSOA that has the highest volume of serious violence is 004G (Rawtenstall).

Map

Description automatically generated

Rossendale had the 6th lowest rate (18 per 1,000) for hate crime (2021/22).

The most common motivation for hate crime being race/ ethnicity/ nationality

In 2021/22 Rossendale had the 3rd lowest volume of serious violence in Lancashire, with a rate of 28.0 violent offences per 1,000 population compared to 29.5 nationally, and 34.5 regionally (2020/21)

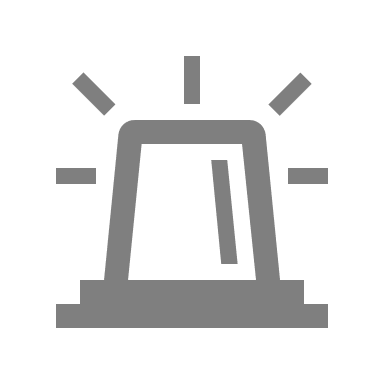
Between 2021/22 Greensclough Ward had the highest number of domestic abuse incidents in Rossendale at 18.1 per 100,000 (47th highest ward in Lancashire), followed by Worlsey Ward (17.3), and Longholme Ward (12.8)

**Perpetrators and Offending**



Rossendale had the 2nd lowest volume of juvenile reoffenders (2019/20). These were most commonly White males, aged 10 to 14.

Rossendale had the 4th lowest volume of adult reoffenders (2019/20). These were most commonly White males, aged 30 to 34.

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Male and female offenders of violence were most commonly aged 15 to 19. Whilst male and female victims were most commonly aged 30-34.

*See ‘*[*Lancashire Strategic Assessment’*](https://www.lancashire.gov.uk/media/929934/lancashire-strategic-assessment-2022.pdf) *(Partnership Intelligence, 2022-2025) for further detail on the long-term issues and threats from crime and antisocial behaviour across Lancashire (by district area).*

**Health Demand of Violence**

The below outlines the standardised rate (per 100,000) of hospital admissions for violence (including sexual violence) during the years 2020/21. As you can see, the rate for Rossendale was below the North West and England rate.

**47.8**



**41.9**

**Rossendale**

**61.6**

**North West**

**England**

Stacksteads Ward had the highest number of ambulance call outs at 146.7 per 1,000 population (70th highest ward in Lancashire), followed by Hareholme Ward (136.6), and Greensclough Ward (123.8).

Rossendale also has a below average rate of emergency hospital admissions for intentional self-harm. During 2020/21, the rate per 100,000 population was 202.6, compared to 225 in the North West, and 181.2 in England.

*See ‘*[*Demonstrating the Costs of Violence to the Healthcare System: Development of a costing tool*](https://www.lancsvrn.co.uk/wp-content/uploads/2021/09/Costs-of-Violence-to-the-Healthcare-System-Lancashire.pdf#:~:text=Demonstrating%20the%20Costs%20of%20Violence%20to%20the%20Healthcare,A%20report%20for%20the%20Lancashire%20Violence%20Reduction%20Network.)*’ (Liverpool John Moores University, Lisa Jones, 2021) for further detail on the financial demand that violence places on the healthcare system within Lancashire.*

**Cost of Violence**

To calculate the cost of serious violence within Lancashire, the ‘[Home Office Economic and Social Cost Estimates](https://www.gov.uk/government/publications/the-economic-and-social-costs-of-crime)’ were used, multiplying the recorded crime (robbery, homicide, rape and violence with injury) in that district between June 2021 and July 2022, by the estimate unit cost. The below infographic shows these costs per district to the nearest million.

A picture containing diagram

Description automatically generatedAs shown, serious violence in Rossendale was estimated to cost approximately £14 million between 2021 and 2022, making it the 3rd lowest costing district in Lancashire.



**+44 (0)1772 537 026**

**@LancsVRN**

**LancsVRN.co.uk**

[**LancsVRN@lancashire.pnn.police.uk**](mailto:LancsVRN@lancashire.pnn.police.uk)

**Lancashire Violence Reduction Network**

**County Hall, Preston, PR1 8XB**

