

February 2024

Serious Violence in Lancashire

Strategic Needs Assessment

Lancashire Violence Reduction Network
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Executive Summary

Background and Aims

'A Strategic Needs Assessment (SNA) is a process where local partner organisations work together to assess the current and future health, care and wellbeing needs of a defined population. The assessment then informs decision-making and helps partners to agree on priorities and allocate resources. A serious violence SNA has a specific focus on violence-related needs within a local area. It helps local partners to identify people and groups who are most vulnerable to being or becoming victims or perpetrators of violence. It also increases understanding of the types, distribution and extent of violence in the local area' (HM Government, [2021](#)).

This SNA seeks to provide an understanding to the Lancashire Violence Reduction Network (VRN), partners – particularly specified authorities* as defined in Section 11 of, and Schedule 1 to the Police, Crime, Sentencing and Courts Act 2022, as cited in the [Serious Violence Duty Statutory Guidance 2022](#) – but also other key partners, and the public about the types, distribution and extent of violence in Lancashire, and the prevalence of the underlying risk factors of violence. This assessment will be used by partners to collectively update the Lancashire VRN Strategy 2020-2025, and subsequently revise the actions based on the recommendations from this report.

A public health approach to violence prevention and reduction underpins this needs assessment, taking into consideration best practice and evidence for population-based prevention approaches.

There are a few data sources used in the previous versions of the SNA (available through the lancsvrn.co.uk website) that have not been updated because there is no new data available to present. Rather than duplicating previous versions of the SNA, those data sources that have not been updated are not included in this 2024 version. Instead, we focus on new, available data sources, to provide an updated picture.

**Chief Officers of police, fire and rescue authorities, Clinical Commissioning Groups, Local Health Boards, local authorities, young offending teams and probation services.*

Overview

This needs assessment includes the following areas of information:

- Key findings
- A demographic overview of Lancashire;
- Epidemiology* of risk and protective factors for violence in Lancashire;
- A violent crime problem profile for Lancashire;
- Interventions and evidence to prevent serious violence;
- Recommendations.

* 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.

Risk and Protective Factors

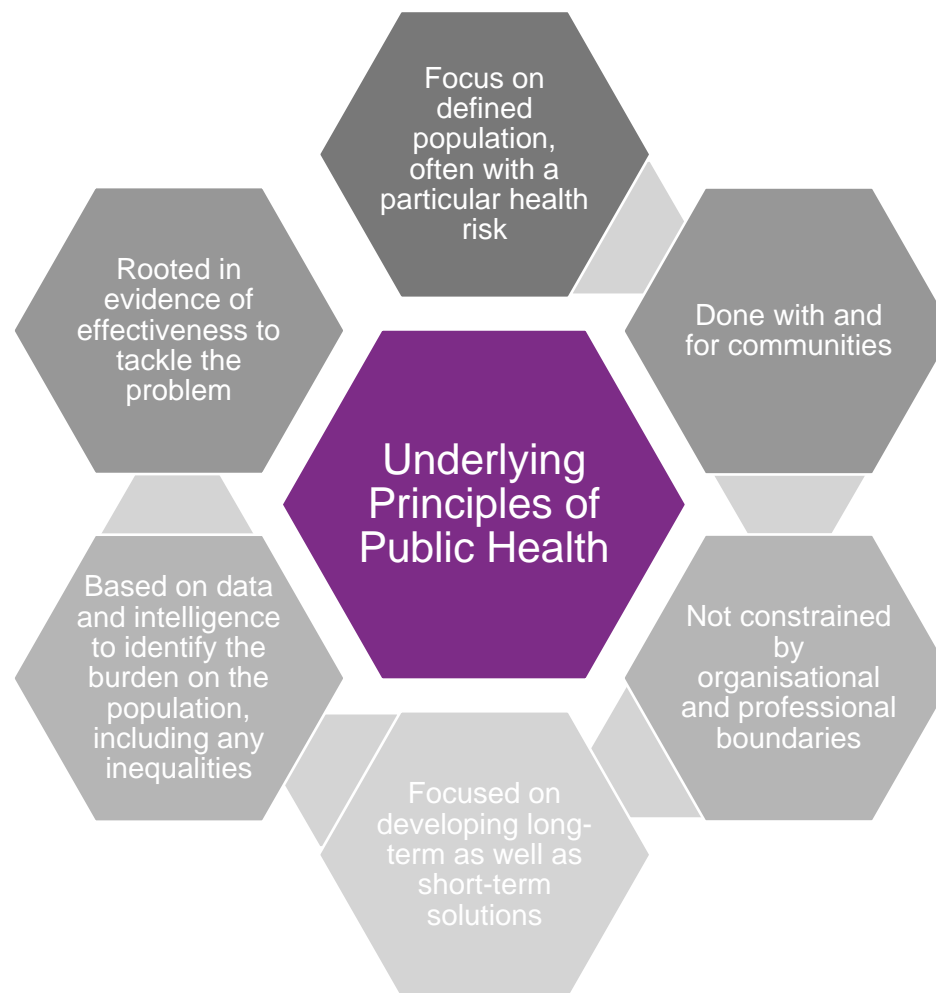
There is growing evidence to show that violence can be prevented. The World Health Organization's (WHO) report '[Violence and Health](#)' (2002) led the foundations for an ever-growing understanding about the risk factors that contribute to violence. The WHO uses an ecological model to understand and explore the relationship between individuals and contextual factors (e.g., families, communities and society), considering violence as the product of multiple levels of influence on behaviour. Similarly, at each of the levels, there are protective factors that prevent victimisation or perpetration of violence. Understanding these risk and protective factors in Lancashire can help us to identify opportunities for prevention and early intervention at each level.

The Centers for Disease Control and Prevention provides more information on [risk and protective factors of youth violence](#). Also, the Early Intervention Foundation's report on [preventing gang and youth violence](#) reviews the risk and protective factors practitioners working with children and young adults should look out for when assessing the likelihood of young people becoming involved in youth violence and gangs. See p.13 onwards of this SNA for further information on risk and protective factors of serious violence.



A Public Health Approach to Preventing Serious Violence

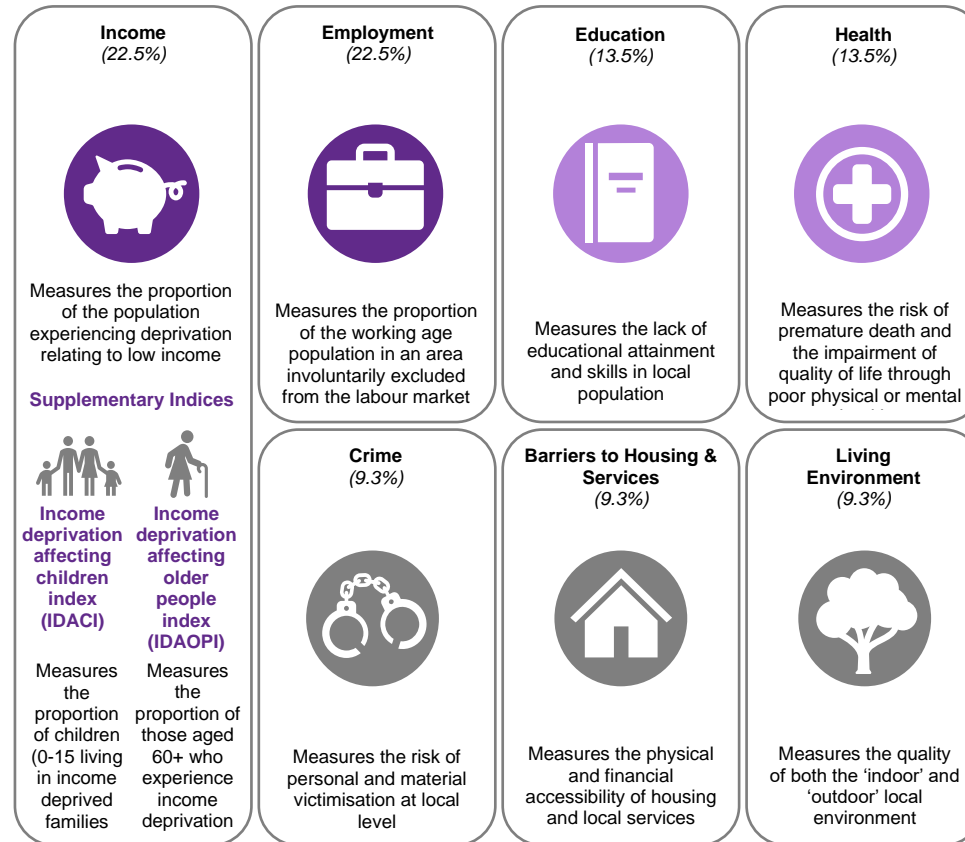
A multi-agency or partnership approach to tackling local health issues is often called a 'public health approach'. There are six guiding principles of public health, which use a broader set of skills alongside partnership working.



Health, Social and Structural Inequalities and Serious Violence

Inequalities are key determinants of everything including serious violence. The place in which a person is born and lives matters fundamentally to their life chances. People living in environments characterised by high levels of inequalities and deprivation tend to feel the greatest impact of violence ([NWPHO](#), 2012). The English Government use different domains of social determinants to monitor deprivation. Figure 1 shows the 7 domains that are used to create the Index of Multiple Deprivation ([Ministry of Housing, Communities & Local Government](#), 2022). We explore the deprivation domains when discussing risk and protective factors for serious violence later in this needs assessment.

Figure 1: Domains of Deprivation (2019)



Key Findings

Individual Factors

1. Across all local and unitary authorities in pan-Lancashire:
 - a) Self-reported high anxiety is worse than the England national average
 - b) Good level of development in relation to the expected early learning goals at the end of reception is below the England national average
 - c) Average attainment 8 score (academic performance) in secondary school is below England national average
2. In Blackpool, secondary school fixed-term exclusions and not in education, employment or training (NEET) levels are worse than the England national average

Close Relationship Factors

1. Across all of the local and unitary authorities in pan-Lancashire, there is a higher rate of:
 - a) children in care
 - b) domestic violence and abuse in households with children
2. 11 out of 14 of the pan-Lancashire Districts have a higher than the national average percentage of unemployment

Communities and Wider Society Factors

1. Across all of the local and unitary authorities in pan-Lancashire, there is a higher rate of children in absolute low-income families and living in fuel poverty
2. Out of 324 local authority areas in the UK, where 1 has the most social mobility and 324 has the least, Blackpool is ranked 316th, South Ribble is ranked 227th and Pendle is ranked 208th
3. There is a wide variation in deprivation levels across Lancashire-14, with Blackpool identified as the most deprived area in England, with Ribble Valley ranked 282 out of 317 local authorities
4. Blackpool, Preston and Blackburn with Darwen have the highest percentage of serious violence across the Lancashire-14 districts

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Foreword

In January 2023 the 'Serious Violence Duty' was enacted which now gives agencies involved with criminal justice, local authorities, fire service and health partners a statutory obligation to work together and share data efficiently to prevent serious violence. Local areas are encouraged to adopt a 'public health' approach to tackling violence. This Strategic Needs Assessment (SNA) is a significant contribution towards agencies and communities understanding the underlying root causes of violence in their local areas. The duty also names education and prison partners as 'relevant authorities' in the duty.

When we look at the risk factors for individuals, in close relationships and in communities we can see the often fundamental unfairness which impact on health and life chances of our citizens. These inequalities drive poor mental health, substance misuse and the large numbers of young people not in education, employment or training (NEET). In Lancashire we have a long history of strong partnership working. The 'Serious Violence Duty' strengthens that joint work and gives us the opportunity to tackle those root causes of crime more effectively together. We must recognise that in 2023 serious violence costs the public purse in Lancashire circa £356.5 million. Only by working together, acknowledging the social determinants that drive this violence and learning from the lived experience of our communities will we tackle this deep-rooted problem.

Some of the highlights of the last 12 months for our network have included the launch of our 'Champions' mentorship programme which is now supporting children all over the county age 10-25 to divert them from crime and focus on their positive life chances. Our 'ED Navigator' service has now been devolved to the local ownership of each hospital trust and we have therefore developed a greater understanding of the health data which allows us to target unreported violent crime in hot spot locations. LVRN has delivered free 'Trauma Informed' training to over 10,000 frontline professionals. We hope that a lasting legacy of our network will be more empathic and compassionate communities in which our populations foster a sense of belonging in our most disadvantaged neighbourhoods. To this end, Lancashire system leaders have pledged their commitment to making Lancashire a 'Trauma Informed' county. Our work in driving trauma informed practice in schools and the closer working relationships with the Lancashire and Cumbria prisons are also worthy of note in terms of prevention and public protection.

Finally, I would like to thank the individuals and communities who continue to work tirelessly to improve the safety of Lancashire for all of us. This remains a challenge particularly in the context of the cost-of-living crisis that many are experiencing. The Lancashire Violence Reduction Network remains resolute in its vision for our county to be a place where young people and their families can live and work free from violence.



Many thanks,

Sue Clarke

**Director
Lancashire Violence Reduction Network**

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

The [Government's response](#) to the legal duty to support a multi-agency approach to preventing and tackling serious violence states that *'it will be open to the local area to set its own reasonable definition of serious violence for the purpose of defining the scope of its activities'*. The consultation report guidance proposes that the definition *'should encompass serious violence as defined for the purposes of the Government's Serious Violence Strategy and include a focus on issues such as public space violent crime at its core'* (p.8). At the same time the Home Office Violence Reduction Units Application Guidance stipulates that local definitions *'must include a focus on youth violence in public spaces'* (p.6).

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 – this definition comprises of crime types and descriptors (shown aside) and has remained the same and is the one used within this document.

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.

Homicide	Knife Crime	Gun Crime
Assault resulting in injury	Rape	Robbery
Aggravated Burglary	Domestic Abuse and Violence (DAV)	Child Exploitation (Sexual and Criminal)

Data Sources

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

- Public Health England (PHE) [fingertips](#)
- Lancashire Constabulary Business Intelligence (BI) dashboards*
- [Lancashire Insight](#) and Multi-Agency Data Exchange (MADE)*
- [Office for National Statistics](#) (ONS)
- GOV.uk: [Home Office statistics](#)

These data (excluding those marked by an *) are public access, population level data and therefore this needs assessment can be shared with partners across the county, recognising the source of the data when inferences or recommendations are made. This will ensure that any identified data caveats detailed by the source are taken into account. Where data has been extracted from sources marked (*), this refers to restricted/non-public data sources. However, the data used is presented at a high-level, population basis and is therefore able to be shared without risk of identifying individuals.

PHE fingertips provides a rich data source from across health and wellbeing, including Hospital Episode statistics, Local Authority datasets, and Department of Work and Pensions. Data is available at different levels (ward, district, or upper tier authority) depending on the data source. There are some data limitations due to the diversity in Lancashire which can potentially mask the inequalities prevalent across the area. Further, there is often a time lag on the data available via this source due to the need to quality assure and clean the data. Further information and definitions for data can be found on the PHE fingertips website.

Lancashire Constabulary BI dashboards, MADE, ONS and GOV.uk include a myriad of data from a range of partners, particularly in relation to crime count and trend, geographical distribution of crime, regional and national comparisons, victim and suspect demographics, and referral pathways. MADE also includes Emergency Department (ED) data provided to local partners via the local [Trauma and Injury Intelligence Group](#) (TIIG) – this data reflects the Information Sharing to Tackle Violence ([ISTV](#)) data requirements.

Additionally, there are a number of other local datasets available such as the '[Local Authority Interactive Tool](#)' (LAIT) and Department for Work and Pensions, which will be used to produce further deep dives for particular localities and topics alongside this strategic needs assessment.



Demographic of Lancashire



Lancashire is a county in the Northwest of England. It consists of two unitary Authorities; Blackpool and Blackburn with Darwen, twelve district authorities; Burnley, Chorley, Fylde, Hyndburn, Lancaster, Pendle, Preston, Ribble Valley, Rossendale, South Ribble, West Lancashire and Wyre and one upper tier authority; Lancashire.

Lancashire constabulary is split into three divisions; East, South and West. East Division covers Blackburn with Darwen, Ribble Valley, Pendle, Rossendale, Hyndburn and Burnley. South Division covers Preston, South Ribble, Chorley, West Lancashire. West Division covers Blackpool, Fylde, Wyre and Lancaster & Morecambe.



567 primary schools
 100 secondary schools
 38 special schools
 12 Pupil Referral Units (PRUs)
 12+ colleges
 4 Uni's (Edge Hill, Lancaster, University of Cumbria, UCLan).

5 Acute hospitals and several mental health services
 Lancashire now hosts one integrated care board called Lancashire and South Cumbria Integrated Care Board which joins up health and care services and improves health and wellbeing of the population of Lancashire and South Cumbria.

5 prisons: HMP Preston and HMP Garth (category B males), HMP Wymott and HMP Lancaster Farms (category C males) and HMP Kirkham (category D males).
 Lancashire has no female or young offenders' prisons with the nearest being HMP Styal based in Cheshire.

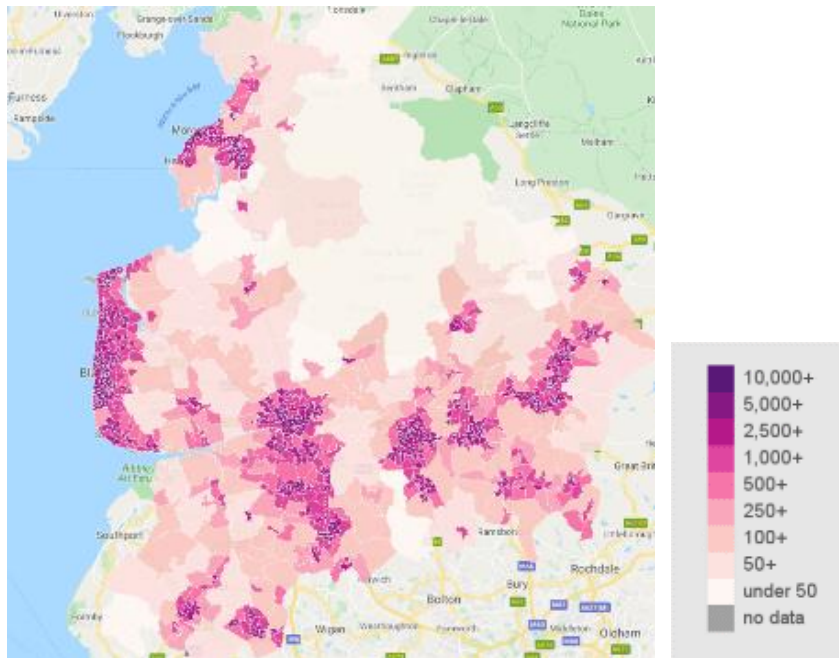


Lancashire is an extremely diverse area made up of a wide range of ethnicities and practicing faiths. Blackpool is predominantly White ([Blackpool JSNA, 2023](#)), Lancashire-12 is also predominantly White but across the districts there is variation in BME make up with Preston and Pendle having the highest BME population at around 20% ([Lancashire Insight, 2022](#)). Blackburn with Darwen has the highest BME make up with 17.8% of their population identifying as Pakistani and 15.8% identifying as Indian ([Blackburn with Darwen JSNA, 2023](#)).

Population

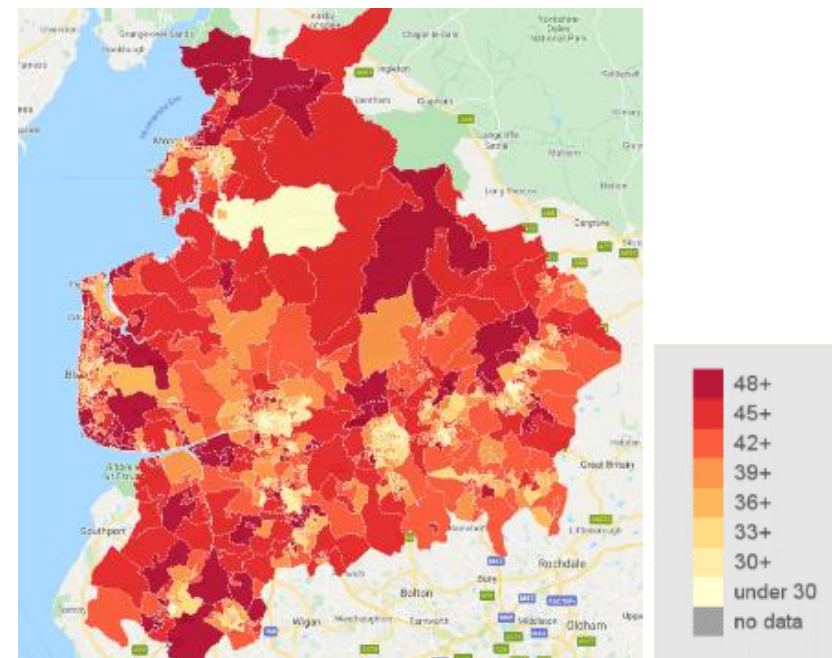
In 2021, the whole population of Lancashire was estimated at around 1.5 million people ([Lancashire Insight](#), 2023). The population is almost evenly split between gender with 51% female and 49% male. As you can see from figure 2 below, Lancashire has some rural areas with very small populations, and large towns and cities with large populations.

Figure 2: Number of residents per km² across Lancashire



Source: www.plumpot.co.uk

Figure 3: Population average age across Lancashire



Across Lancashire the average age is 41.3 years compared to the England and Wales average of 40.4 years. However, as we can see from the map (figure 3) above, the age population varies across the region and some areas such as Blackburn with Darwen have a relatively young population with approximately a quarter of their population (25.7%) under the age of 18 ([Blackburn with Darwen JSNA](#), 2023).

Knowing the age demographic for our area is important to ensure we develop interventions relevant to the appropriate age cohort to ensure we reduce the risk of them becoming a perpetrator or victim of violent crime.

Deprivation

There has been extensive [research](#) to highlight the correlation between deprivation and violence within communities, with strong arguments for social factors determining both ill-health and violence hence the need for a public health approach. The below analysis outlines deprivation across Lancashire.

Figure 4: % of LSOAs in the top 10% most deprived areas

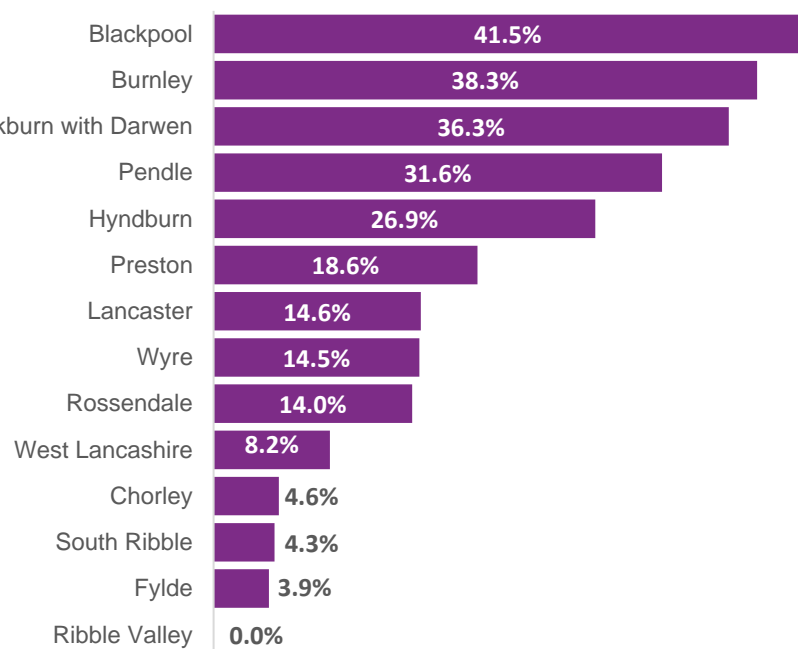


Table 1: Indices of multiple deprivation (per local authority)

Area	Indices of Multiple Deprivation
Blackpool	1
Burnley	11
Blackburn with Darwen	14
Pendle	36
Hyndburn	18
Preston	46
Lancaster	112
Wyre	147
Rossendale	91
West Lancashire	178
Chorley	192
South Ribble	210
Fylde	192
Ribble Valley	282

The graph above shows the proportion of lower super output areas (LSOAs) per local authority area in Lancashire that fall within the top 10% most deprived areas nationally. As you can see, Blackpool had the highest proportion at over 40%, followed by Burnley (38%) and Blackburn with Darwen (36%).

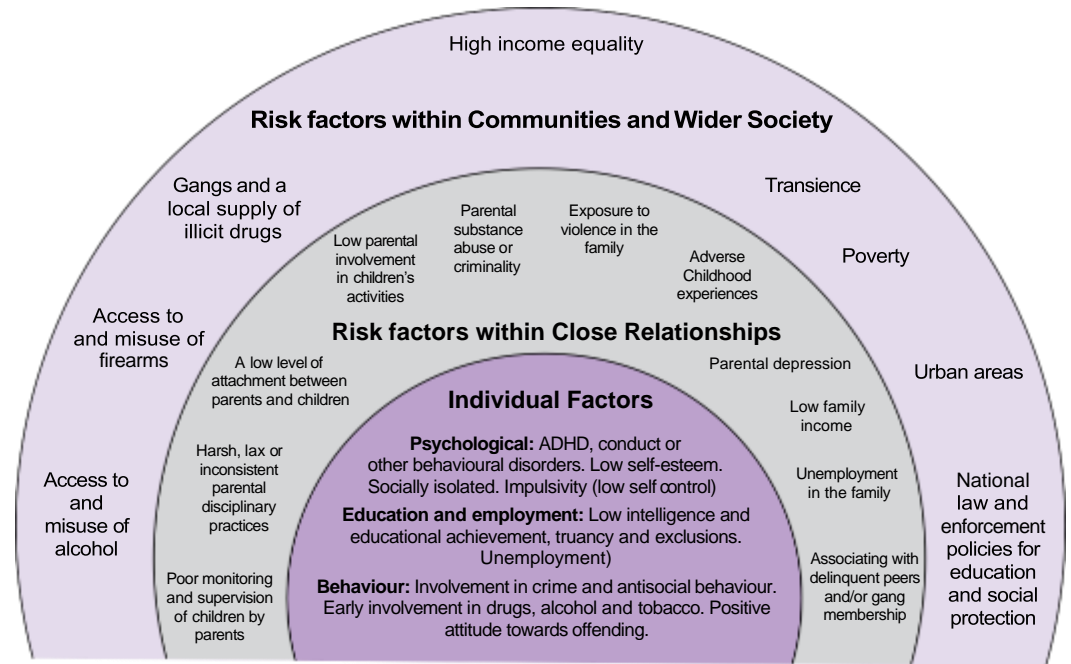
The indices of deprivation in table 1 measure each local authority against the rest of the country, with number 1 being identified as the most deprived area in England ([Indices of deprivation](#), 2019). As you can see from table 1 above, there is a wide variation across the region with Blackpool identified as the most deprived area in England, whereas Ribble Valley ranks 282nd of the 317 local authority areas in England.

Risk and Protective Factors

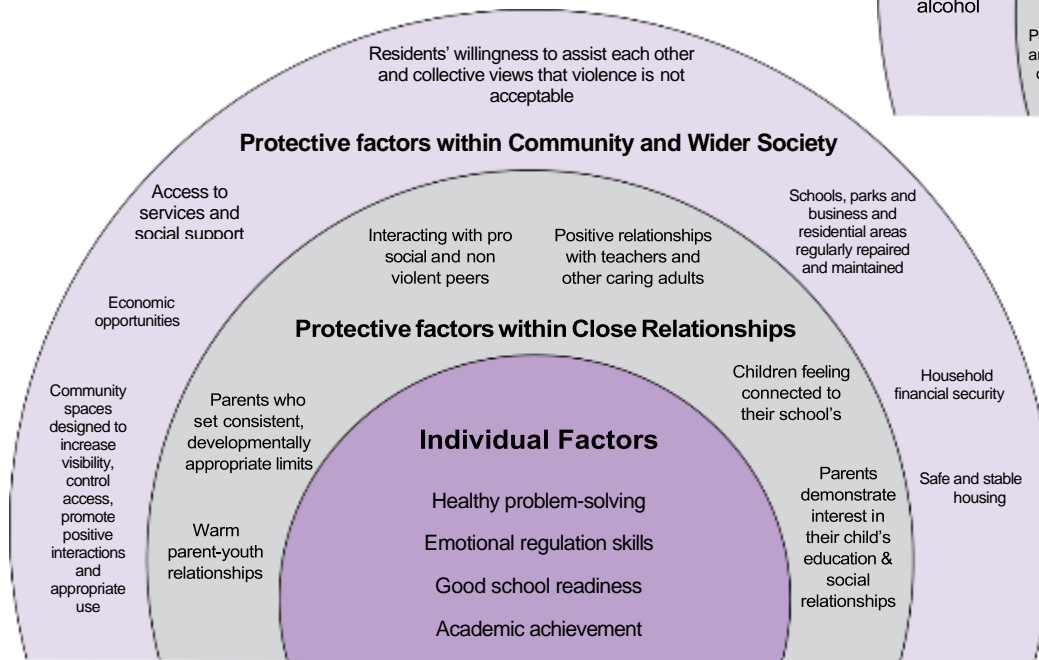
The World Health Organization (2002) describes the risk and protective factors for serious violence across three broad levels: individual factors, factors within close relationships and those within communities and wider society.

Multiple reviews ([‘Preventing Serious Violence’](#) and [‘Analysis of Indicators of Serious Violence’](#)) of risk and protective factors for serious violence have been undertaken; this needs assessment will consider risk and protective factors in the context of Lancashire.

Risk Factors for Serious Violence



Protective Factors for Serious Violence



Protective factors for serious violence largely reflect the positive converse of the risk factors. Protective factors can act as a buffer to risk factors, with a positive cumulative effect.

Protective factors are integral to a strength or assets-based approach to violence prevention, in line with the underpinning principles of the [Lancashire VRN Strategy](#).

Vulnerabilities Map

In relation to risk factors for serious violence, it is important to understand what the overlap is of these metrics across the Lancashire landscape. Each risk metric listed below has been extracted on a ward level for the year 2021/22. Based on the scoring or measure for that metric, the ward areas have then been ranked in terms of highest to lowest volume/rate. For example, based on the volume of serious violence per ward area, the ward with the lowest count has been ranked 1, and the highest count has been ranked 266 (reflective of the 266 wards in Lancashire). These ranks have then been added together to produce an overall rank for each ward area, presenting the potential level of vulnerability.

Note – this methodology assumes equal weighting of each of the metrics in terms of risk, which is not empirically supported, however a methodology to weight these metrics has not yet been established and this is therefore a 'starting place' from which we can further develop our analysis and understanding in the future.

The metrics that have been used to produce this vulnerability map are:

- Ambulance call outs (assault, rape, stabbing and gun wound)
- Serious violence (aggravated burglary, robbery, rape, violence with injury, homicide)
- Index of multiple deprivation score
- Unemployment (% of 15-64 population claiming out of work benefit)
- Hospital admissions for alcohol attributable conditions

As shown in the aside map, the top 10 ward areas for vulnerability (based on the method and metrics listed above) are Barnfield (Hyndburn), Central (Hyndburn), Trinity (Burnley), Park (Blackpool), Chorley South East (Chorley), Buckshaw & Worden (South Ribble), Castle (Lancaster), Burscough West (West Lancs), Chorley North West (Chorley) and Bulk (Lancaster).

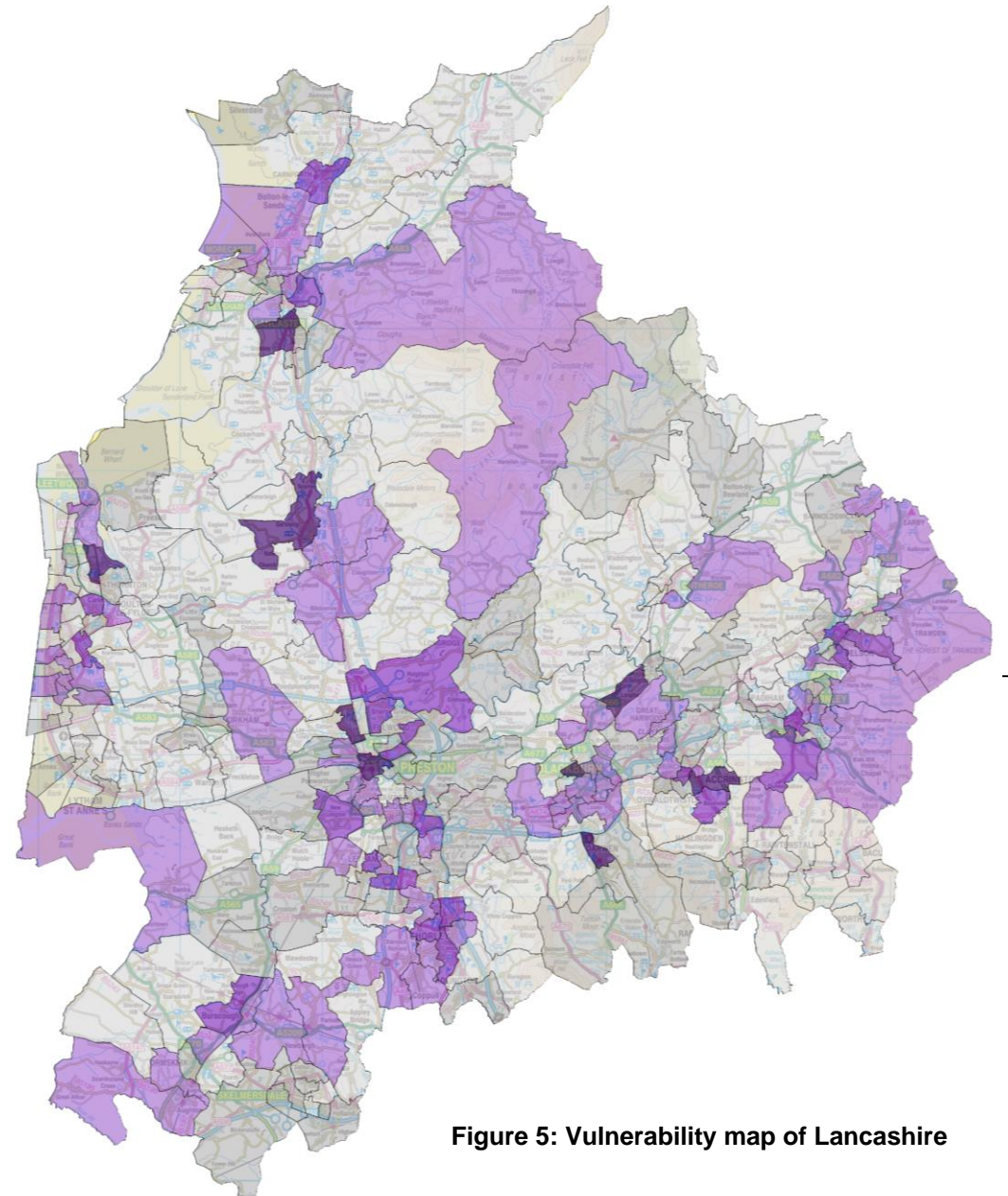


Figure 5: Vulnerability map of Lancashire

Individual Risk Factors for Serious Violence

Individual Factors

Psychological: ADHD, conduct or other behavioural disorders. Low self-esteem. Socially isolated. Impulsivity (low self-control)

Education and employment: Low intelligence and educational achievement, truancy and exclusions. Unemployment

Behaviour: Involvement in crime and antisocial behaviour. Early involvement in drugs, alcohol and tobacco. Positive attitude towards offending.

Education and Mental Health

Table 2: Education and mental health metrics (%)

	Blackburn with Darwen	Blackpool	Lancashire	England
Good level of development at the end of reception	63.1	60.1	62.1	65.2
Attainment 8 Score	46.8	38.0	47.6	48.9
Attainment 8 Score (free school meal status)	38.9	29.7	34.5	37.0
School absences	7.4	7.9	7.1	7.6
Fixed-Term Exclusion (primary school)	1.0	1.8	1.3	1.4
Fixed-Term Exclusion (secondary school)	10.7	23.8	15.0	14.0
Not in education, employment or training (NEET)	4.3	11.1	5.3	5.2
School pupils with social, emotional and mental health needs	3.3	3.8	2.3	3.0
Self-reported wellbeing - high anxiety	23.6	23.7	24.4	22.6

Better than England Worse than England

(Source: [Public Health England](#) and [Lancashire Insight](#) 2022/23)

Education is an extremely important factor when looking at opportunities and life outcomes. Good education is strongly linked to a reduction of violence for individuals ([Blum & Libbey](#), 2004). Persistent school absence is more common in children from families with multiple problems (Ministry of Housing, Communities and Local government, 2017), which can have an impact on individuals becoming involved in violence.

Across Lancashire-12 school readiness is below the England average and in Blackpool and Lancashire-12 there are more children who are permanently excluded from school and NEET (not in education employment or training).

Missing Persons

The following is an overview of the demographic of those individuals reported as 'missing' in Lancashire between December 2022 and December 2023. As you can see, the most common was White males, under the age of 18, who were cared for by local authority (this is any young person where their 'host' authority is responsible for their care and care planning).

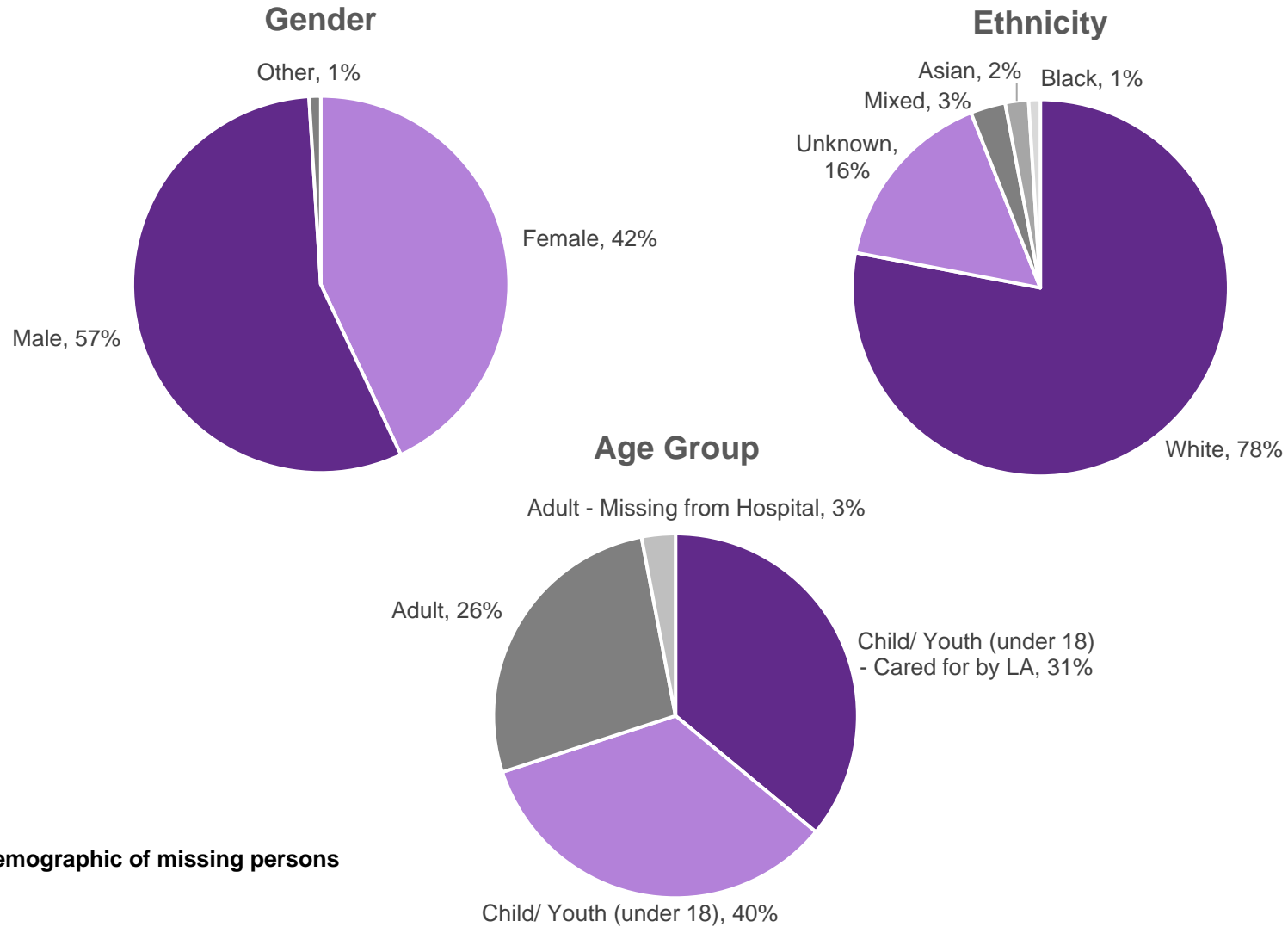
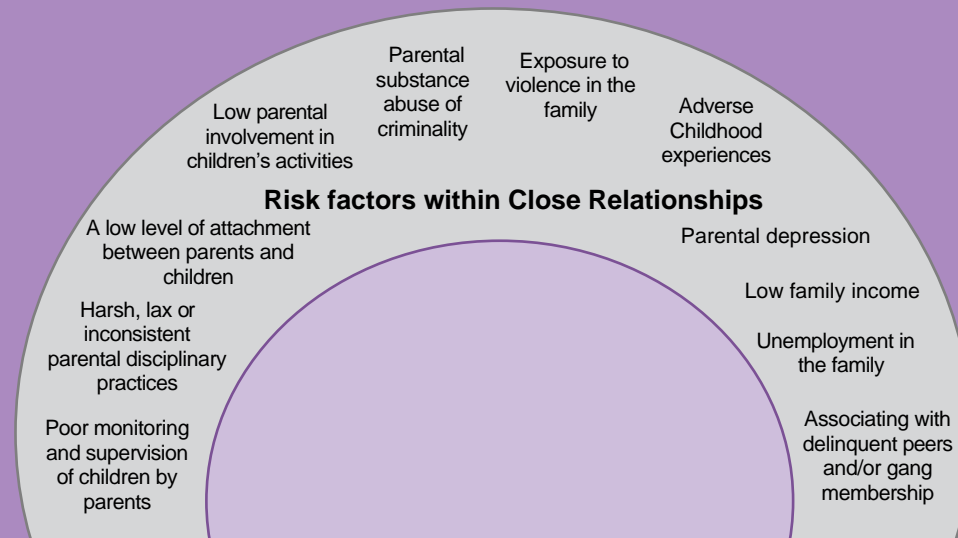


Figure 6: Demographic of missing persons

Risk Factors within Close Relationships and Family Circumstances



Contextual Factors

Table 3: Contextual metrics

	Blackburn with Darwen	Blackpool	Lancashire	England
Children in care (per 10,000 children)	97	218	77	70
Homelessness (per 1,000 households)	17.1	21.2	8.1	11.7
Children in absolute low-income families (%)	25.8	19.1	16.1	15.3
Domestic violence & abuse in the household (per 10,000 children)	319	405.8	228.9	181.4
First-time entrants to the youth justice system (per 100,000)	97.3	366.2	118.6	148.9
Fuel poverty	18.3	20.2	14.6	13.1

Better than England
Worse than England

(Source: [Public Health England](#), 2022/23)

Close relationship factors can have large implications on an individual's life choices and opportunities. The above table (3) identifies some key factors that evidence shows can leave individuals more prone to risk of crime. Evidence tells us that a 1/3 of homeless individuals will end up getting involved with gang crime ([Centrepoin](#)t, 2022) and living in a low-income family is linked to higher rates of offending ([Marmot](#), 2010). In Blackpool and Blackburn with Darwen, children living in low-income families are above both the North West and England average rates.

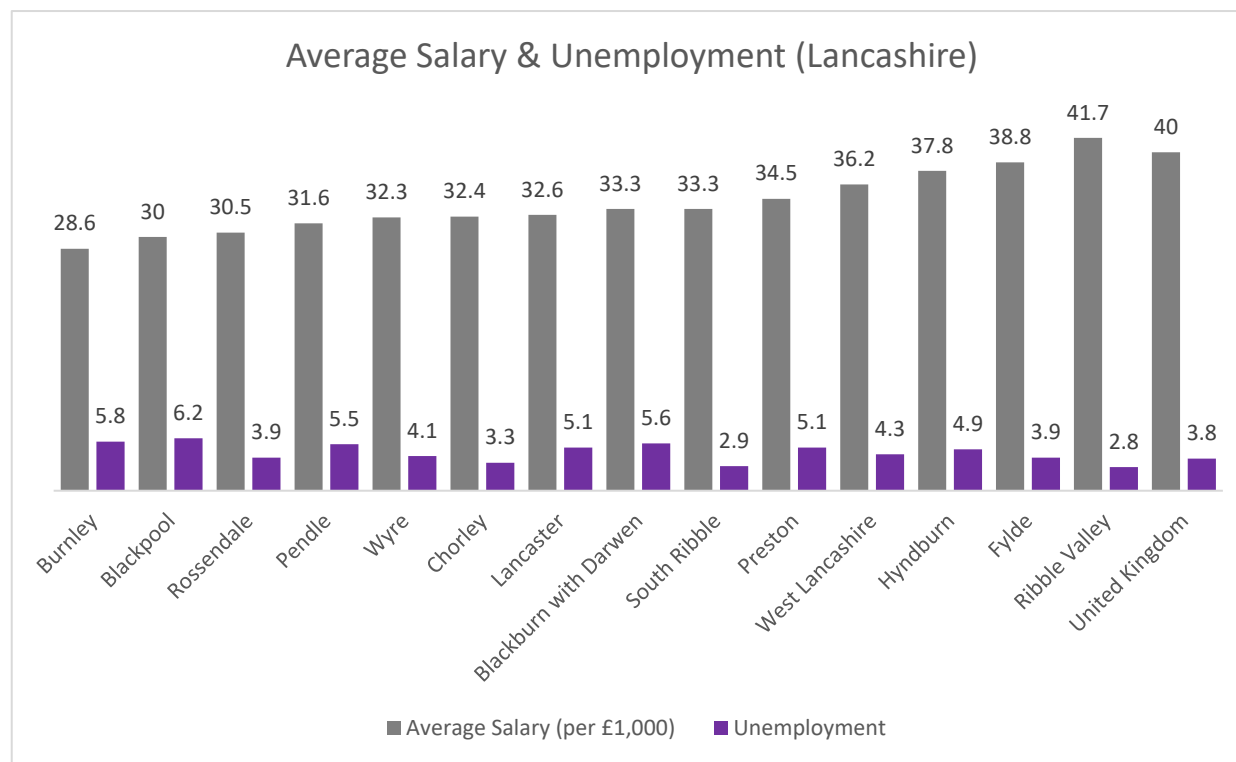
Table 4: Looked after children

	Looked after children (per 10,000)	Abuse or neglect (%)	Child disability (%)	Parental illness or disability (%)	Family in acute stress (%)	Family dysfunction (%)	Socially unacceptable behaviour (%)	Low income (%)	Absent parenting (%)
Blackburn with Darwen	97	77	0	0	6	14	-	-	-
Blackpool	210	84	2	4	5	4	0	0	1
Lancashire-12	79	72	1	1	5	19	0	0	1

(Source: [Department of Education](#), 2022)

When reviewing the breakdown of looked after children across Lancashire the largest proportion is due to abuse or neglect. Those children who are in care or classed as 'looked after' are identified as having poorer health outcomes, more vulnerable and a strong link between children in care and offending with over a 1/3 of children in young offender institutes and over a ½ in secure training centres identified as previously being in care ([Taylor, 2016](#)).

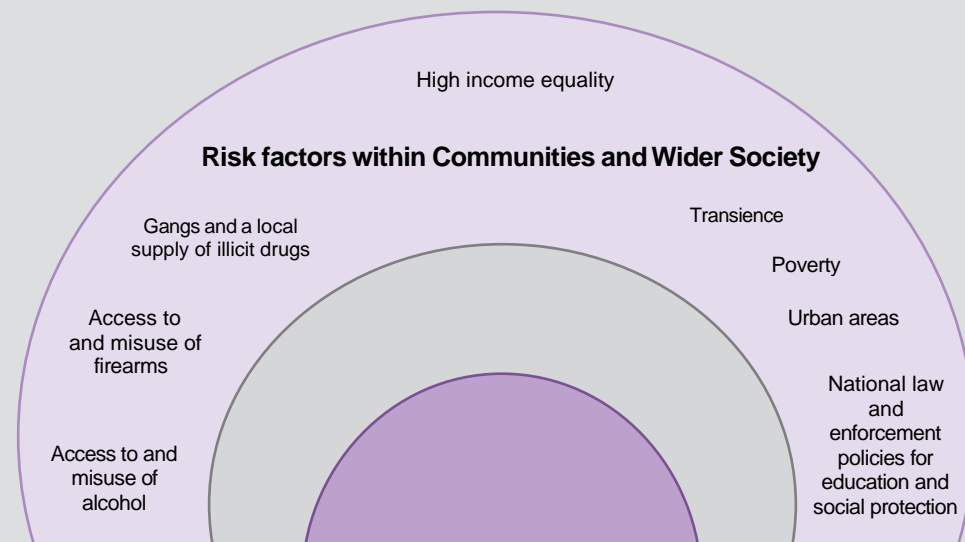
Figure 7: Average salary and unemployment rate (per district in Lancashire)



(Source: [Plumplot, 2022](#))

Income and unemployment are two of the domains linked to deprivation and health inequalities. [Nordin and Almen](#) (2016) identified evidence that demonstrated there is a relationship between long-term unemployment and violent crime. Across the region there is wide variation regarding salary and employment. Blackpool, Blackburn with Darwen and Burnley have the highest unemployment rates with Burnley, Blackpool and Rossendale having the lowest average salaries. These statistics should be taken into account in preventing serious violence.

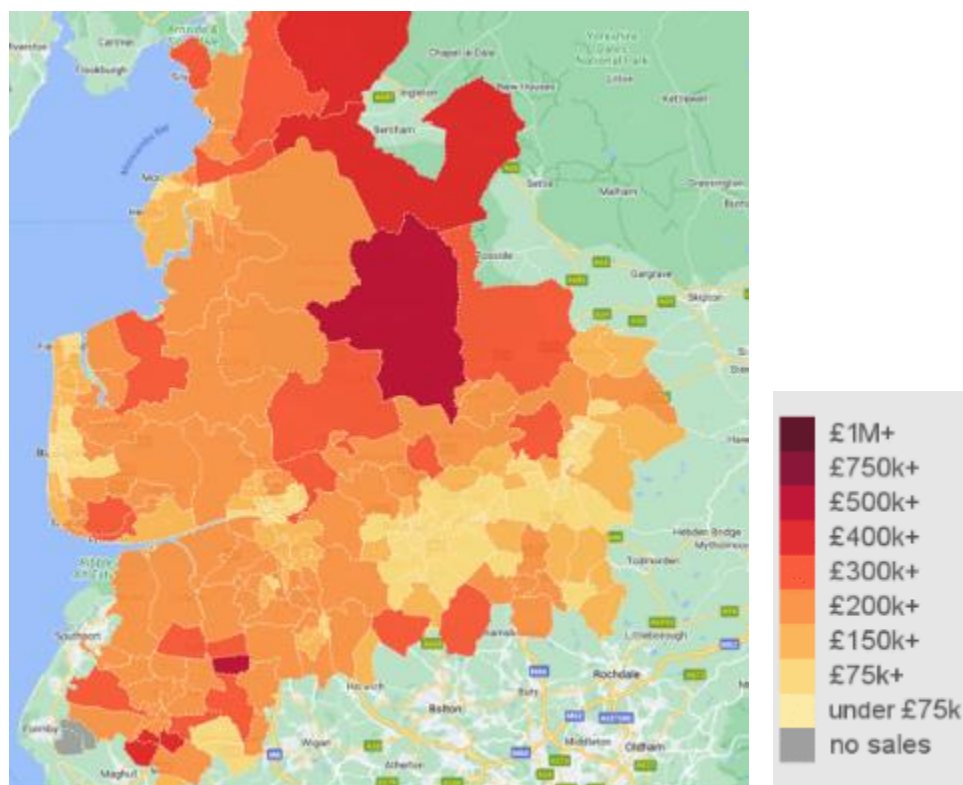
Risk Factors within Communities and Wider Society



Housing

In Lancashire the average household price is £185k compared to the England and Wales average is £349k. There is vast variation in housing prices across the region with the Ribble Valley having the most expensive housing with areas of East Lancashire including Blackburn with Darwen having an average of under £75k house prices. Housing is one of the key factors around inequalities which is linked to violent crime.

Figure 8: Average household price in Lancashire



(Source: [Plumplot](#), 2022)

Social mobility

The social mobility index looks at the opportunities individuals have regardless of family background and where they live. The index looks at each district individually as shown in table 5 below. The areas identified with the least social mobility and within the lowest 20% are classed as cold spots (blue) whereas the areas with the highest social mobility in the top 20% are identified as hot spots (red). When analysing the area of Lancashire, Blackpool is identified as a cold spot, and Fylde, Ribble Valley and Rossendale are identified as hot spots (see table 5 below).

Table 5: Social Mobility Index

Area	Overall ranking (out of 324 LA's)	Early Years*	Schools*	Youth*	Adulthood*
Fylde	22	8.4	31.1	10.5	13.2
Ribble Valley	52	-5.4	30.2	-3.5	14.3
Rossendale	57	24.9	4.3	6.8	-3.2
Wyre	65	17.7	13.8	-0.8	-2.4
West Lancashire	67	13.1	3.5	15.5	-4
Lancaster	93	17.2	-1.9	-0.1	2
Chorley	94	7.7	14.1	-10.7	5.9
Hyndburn	125	7.9	-3.1	6.1	-4.5
Preston	142	16.1	-3.3	-5	-4.8
Blackburn with Darwen	154	-26.5	8.6	23.8	-6.2
Burnley	196	3.9	-11.5	-0.1	-4.8
Pendle	208	-9.9	-7.8	4.1	-1.5
South Ribble	227	-2.4	-5.8	-12.8	1
Blackpool	316	-9.1	-18.9	-8.5	-21.8

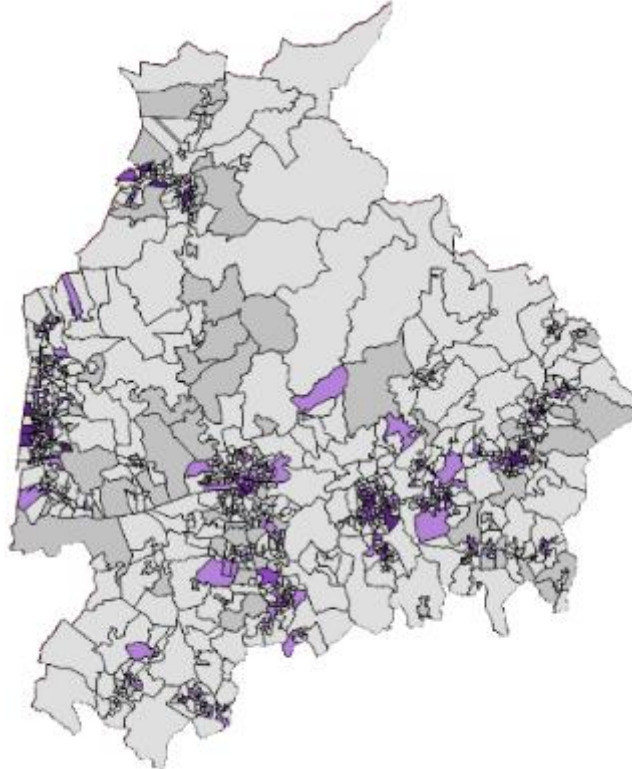
* + number indicates better than average, - number indicates worse than average

(Source: [Social Mobility Index](#), 2020)

Violent Crime

The below map highlights where serious violence is taking place across Lancashire during the previous year (Jan 23 – Dec 23). Note – to ensure there is no double counting of offences (see [‘Definition’](#) section for explanation), only the following crime types have been included: aggravated burglary, robbery, rape, homicide and violence with injury. Those areas highlighted in purple are those with the highest volume of serious violence and those in grey are the lowest.

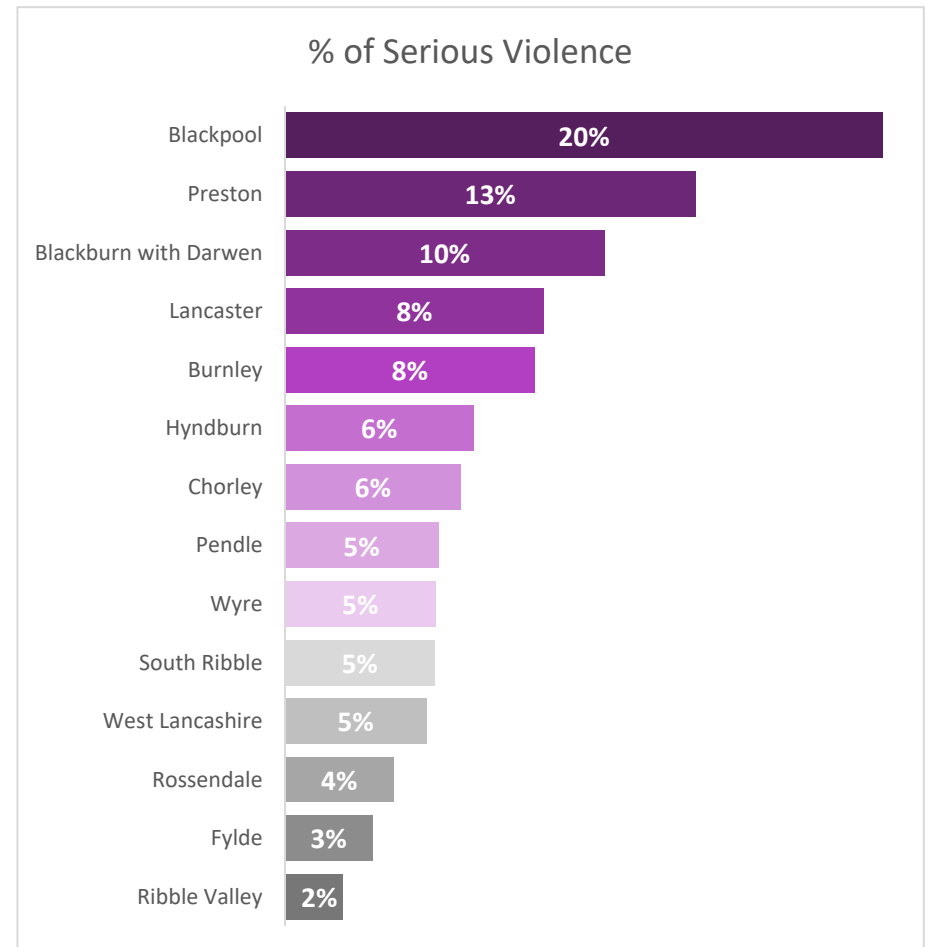
Figure 9: Serious violence heatmap of Lancashire



Comparing 2023 to the year prior (2022), there was a:

- 24% increase in all knife crime and +15% in gun crime
- 8% decrease in domestic abuse and -5% in rape
- 1% decrease in violence with injury, but a 40% increase in homicide, and 11% increase in robbery

Figure 10: Proportion of serious violence crime per district



What do we know about perpetrators of serious violence?

17% Repeat offending rate for serious violence offences

25.0% of offenders re-offended (all offences), with an average of 3.5 re-offences per re-offender in Lancashire.

41% Of perpetrators were between 26 and 40-years old

Followed by 24% aged 41-60-years old, 20% aged 16 to 25, 12% aged 11 to 15, 6% aged 60+, and 1% aged <10.

39%
domestic
abuse related

21%
suspect
intoxicated

11%
youth
related

11%
weapon
related

8%
mental health
related

What do we know about victims of serious violence?

10% Repeat victimisation rate for serious violence offences

Average of 2.3 serious violence offences per repeat victim in Lancashire during this time period.

34% Of victims were between 26 and 40-years old

Followed by 25% aged 41-60-years old, 20% aged 16 to 25, 11% aged 11 to 15, 6% aged 60+, and 3% aged <10.

Serious violence cases referred to victim support:

90%
heterosexual
victims

83%
White
victims

64%
victims of no
religion

54%
female
victims

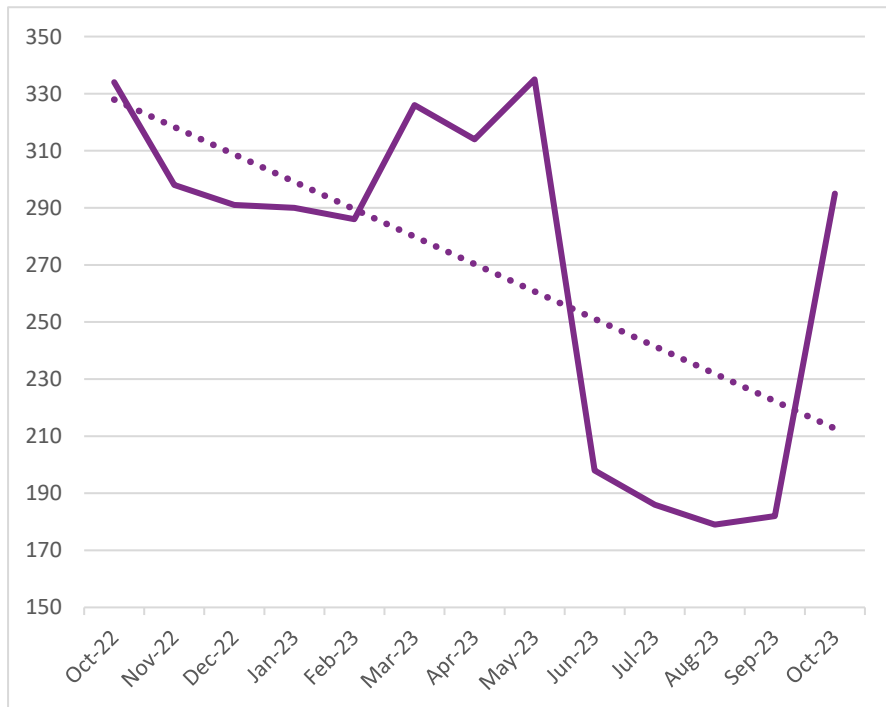
Health Demand

To understand the prevalence of violence across Lancashire, it is vital to review partnership data so that the entire picture is captured. By relying on police crime data alone, there is the potential risk of missing a proportion of data where individuals may not report the incident to police yet but attend hospital for medical treatment. Therefore, the below explores the demand to the healthcare system, as a result of violence.

ED attendances

The below graph shows the volume of attendances to an emergency department (ED) in Lancashire as a result of an assault. As you can see, the general trend has been downward (Oct 22 – Oct 23), with a substantial drop in June 2023. Note – data post October 2023 has not been made available, this graph therefore reflects a different time period to discussed previously.

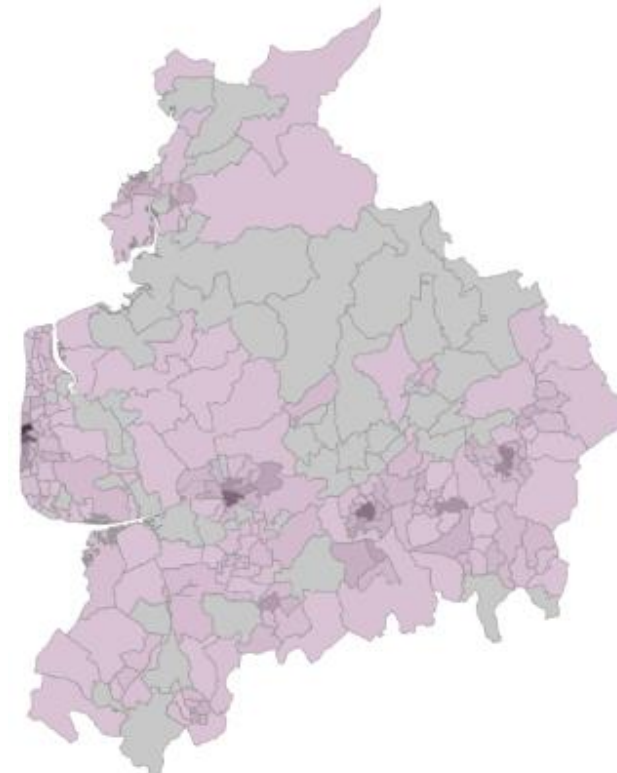
Figure 11: ED attendances for assaults in Lancashire



Ambulance Call Outs

The below map shows the volume of violence related ambulance call outs (assault/rape/stabbing/gunshot) across Lancashire, per ward area (Oct 2021 – Oct 22). This map flags the most high-volume areas to be within Blackpool, Preston and Blackburn with Darwen. Note – due to a change in the NWAS recording system, this map has not been updated for 2023.

Figure 12: Ambulance call out heatmap of Lancashire



Impacts of COVID-19

The Covid-19 pandemic was of global significance for many reasons, namely the health and wellbeing implications on communities through periods of lockdown, illness and bereavement. As stated in The British Academy 2021 [report](#), the long-term societal impacts of Covid-19 have not been felt uniformly across society, with Covid-19 exacerbating existing structural and social inequalities, particularly negative health outcomes for those already disadvantaged in society. Disadvantaged communities are already the most vulnerable to serious violence and Covid-19 might have contributed an even higher risk. [Research](#) suggests that there has been a particular impact of the Covid-19 pandemic on children and young people as a result of social isolation, reduced educational and social development, and increased exposure to parental mental health difficulties and financial hardship.

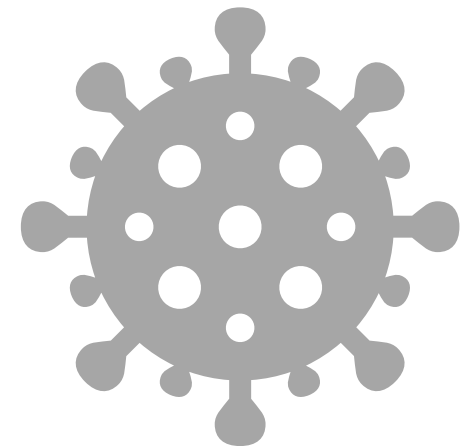
A study by Kings College London titled 'An Isolated Generation: the impact of COVID-19 on children and young people' ([Feb, 2022](#)) found the following:

- 44% of 11-12-year-olds reported an increase in symptoms of depression during the pandemic compared to before
- 40% of 6-16-year-olds experienced a deterioration in mental health during the pandemic compared to before
- There was an increase in children and young people's exposure to **abuse and neglect** in the home
- High levels of **loneliness, disrupted sleep and anxiety** were reported by children and young people during the pandemic
- **1.5 million** children and young people will need new or additional mental health support as a result of the pandemic

The Covid-19 pandemic had a dramatic impact on many children, young people and families in terms of presenting new challenges as well as exacerbating existing struggles within families, particularly around adverse childhood experiences (ACEs) and trauma.

The '[State of Poverty](#)' (2021) report discussed how practitioners working with families during the pandemic saw an increase in severity of all ACEs, particularly around mental health, parental separation, and verbal and physical abuse. The report presents data that 56% of children and young people were facing challenges in overcoming past trauma during the pandemic which made it difficult to engage with education, with two thirds of children also "falling behind" in education and experiencing problems in peer and sibling relationships.

Previous [research](#) has explored the link between ACEs and other forms of trauma, and serious violence, thus the increase in children and young people experiencing such events either for the first time, or to an increased extent, due to the Covid-19 pandemic, presents as a significant concern in terms of the a potential increase in serious violence.

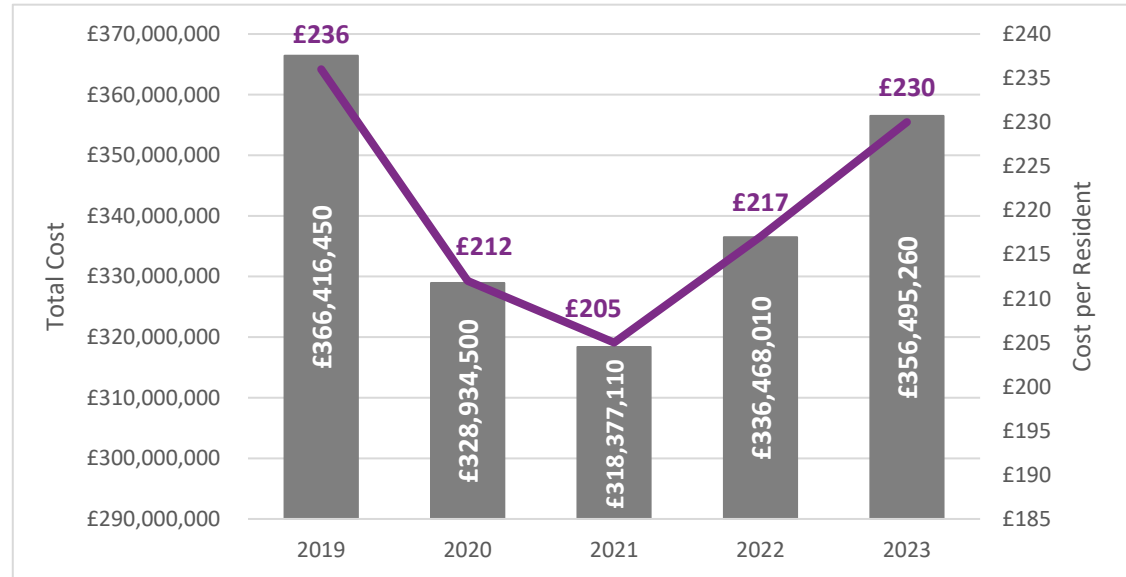


Estimated Cost of Violence

The following costs are calculated using the Home Office [economic and social cost](#) estimates and multiplying them by recorded crime from Lancashire Constabulary (in line with the LVRN serious violence definition – robbery, homicide, rape and violence with injury). Cost per resident is also estimated by multiplying crimes by their unit cost and then dividing by the resident population (latest mid-year estimates). Note - this only gives an estimate of the costs to the local economy and does not capture those crimes that are committed that go undetected.

The estimated cost of serious violence in Lancashire has increased year on year since 2021, showing a 6% increase from 2022 to the most recent year, 2023. This trend is reflective of the rate of serious violence overall.

Figure 13: Annual cost of violence in Lancashire

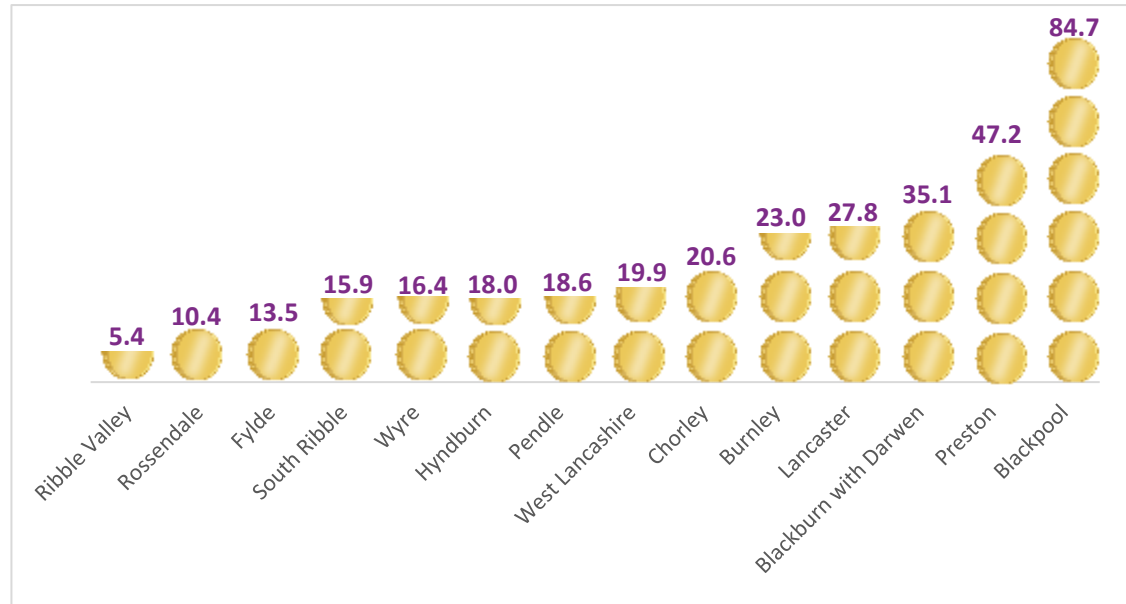


Cost per District

The aside graph shows the cost of serious violence (in millions) by each district in Lancashire for the previous year (2023), this has similarly been calculated through the methodology outlined prior. As you can see, Blackpool was the highest costing at over £84 million, and Ribble Valley was the least, costing £5.4 million.

To see what the cost of serious violence was to the healthcare system in Lancashire, please see [report](#) produced by Liverpool John Moores University (2021).

Figure 14: Cost of violence per district (in millions)



Evidence Reviews and Resources

As reported in previous versions of the VRN SNA there is a substantial body of international evidence relating to violence prevention, including documents from the World Health Organization (2010, 2015) and across the United Kingdom. More evidence has been published from the Home Office (2018), Public Health England (2019) and Violence Reduction Units (Wales 2021, Scotland 2021). Below is a list of some of the reviews and resources:

The Early Intervention Foundation's report '[Adverse childhood experiences: what we know, what we don't know, and what should happen next](#)'.

The Behavioural Insights Team's report '[Violence in London: what we know and how to respond](#)'.

The Local Government Association's '[Public health approaches to reducing violence](#)'.

The UK government's '[Serious Violence Strategy](#)'.

Kovalenko and others' study on '[What works in violence prevention among young people?: a systematic review of reviews](#)'.

The WHO's '[Violence Info website](#)' hosts a global evidence database of violence studies.

The College of Policing's '[Crime Reduction Toolkit](#)' rates the best available evidence on reducing crime.



Youth Endowment Fund (YEF) Toolkit

The YEF's mission is to prevent children and young people becoming involved in violence by finding out "what works" and building a movement to put this knowledge into practice.

The YEF Toolkit summarises research evidence about different approaches to preventing serious youth violence. It is based on data on what has been found when these approaches have been used before.

For each approach, YEF provides:

- A description of the approach;
- How effective it is likely to be (evidence of impact);
- How confident they are about the impact;
- Indicative costs;
- Links to resources and programmes.

The infographics aside show the summary of evidence for four interventions that have been rated to have a moderate or high impact and evidence quality of 4 or 5. Please note that the Toolkit is updated on a regular basis as the evidence-base develops.

(Source: [Youth Endowment Fund](#), 13th November 2023)

Figure 16: YEF toolkit

<p>Focused deterrence A strategy that combines communicating the consequences of violence with support for developing positive routes away from it.</p>	<p>COST £ £ £</p>	<p>EVIDENCE QUALITY Q Q Q Q Q</p>	<p>ESTIMATED IMPACT ON VIOLENT CRIME HIGH</p>
<p>Pre-court diversion Diverting children who have committed first-time or low level offences away from the formal youth justice system</p>	<p>COST £ £ £</p>	<p>EVIDENCE QUALITY Q Q Q Q Q</p>	<p>ESTIMATED IMPACT ON VIOLENT CRIME MODERATE</p>
<p>Relationship violence prevention lessons and activities Programmes that aim to prevent violence in intimate relationships.</p>	<p>COST £ £ £</p>	<p>EVIDENCE QUALITY Q Q Q Q Q</p>	<p>ESTIMATED IMPACT ON VIOLENT CRIME MODERATE</p>
<p>Social skills training Aims to develop children's ability to regulate their behaviour and communicate effectively.</p>	<p>COST £ £ £</p>	<p>EVIDENCE QUALITY Q Q Q Q Q</p>	<p>ESTIMATED IMPACT ON VIOLENT CRIME HIGH</p>
<p>OTHER OUTCOMES</p>			
<p>HIGH increase in Self-regulation</p>			<p>Q Q Q Q Q</p>

Recommendations

As the LVRN is in its last year of Home Office funding (April 2019-March 2025), our recommendations are made in the context of longer-term, sustainable plans of serious violence prevention, which necessitates involvement from statutory and third sector partners.

Individual Factors

1. Further explore the prevalence of high-anxiety within different demographic groups (e.g., age, gender, sex, ethnicity, religion, disabilities) to better understand and target support, to reduce the prevalence of high-anxiety;
2. Consider approaches to improving the number of children assessed as achieving a good level of development in relation to the expected early learning goals at the end of reception;
3. Further explore opportunities to improve the average attainment 8 score (academic performance) in secondary schools, numbers of fixed-term exclusions and children/young people who are NEET, linked to other needs identified in this assessment (e.g., other individual, close relational and family circumstance factors)

Close Relationship Factors

Target interventions, across pan-Lancashire to address the underlying social determinants ('causes of the causes') for:

1. Why children enter care, including offering support to parents and families to prevent the number of children in care;
2. Incidents of domestic violence and abuse;
3. Levels of unemployment.

Communities and Wider Society Factors

1. Consider prioritising areas with higher levels and people experiencing absolute low-income, living in fuel poverty, deprivation and low social mobility.
2. Allocate resources to fund evidence-informed interventions that prevent and reduce serious violence, targeting support to the areas and people at highest risk.




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