

SOLUTIONS TO VIOLENCE IN THE UK

Stand Against Violence Whitepaper



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INTRODUCTION

OVERVIEW OF VIOLENCE IN UK

Violence is a virus, a virus which can be cured. Like all viruses health promotion and education is the key to a resolution. There are 1.9 million people in England and Wales that experience the effects of violence directly each year (Centre for Public Health, 2014).

It is thought that for each of these incidences of violence a further 10-20 other individuals are thought to be indirectly affected (World Health Organization, 2002) which is a total of **61%** of the population who will experience the effects of violence each year.

One of the many potential consequences of violence are that victims become perpetrators, which can be seen in the cycle of violence later in this paper. So, as a virus can spread amongst a population from person to person so too does violence.

In 2003/2004, the cost of violence recorded by the police in England and Wales was an estimated **£14 billion**, which includes costs to health services, the criminal justice system and physical and psychological impact on victims (Florence et al, 2013).

Whilst concerted efforts are being made to reduce violence there is still much work to be done. Currently much emphasis is being placed on understanding the problems faced by processes of data capture and information sharing from police, hospitals, research institutions and public surveys.

Understanding the true picture is the first step in finding a solution. Violence is preventable and understanding the epidemiology helps us to target intervention in the same way that public health interventions eradicated small pox and controlled various other epidemics through the ages.



**61% OF THE
POPULATION
WHO WILL EXPERIENCE
THE EFFECTS OF
VIOLENCE EACH YEAR**

The most recent reporting on violence shows a **24% increase** in 'violence against the person', the highest rise in any 12 month period since 2002 (ONS, 2016). This is partly attributed to the addition of harassment to the 'violence – without injury' category.

General long term trends in violence have shown slight reductions including research from Cardiff University (Sivarajasingam et al, 2013) although the Office for National Statistics (ONS) report that these falls in violence may now be coming to an end with no significant reductions in violence for the first time in 7 years (ONS, 2016).

VIOLENCE

VIOLENCE TRENDS

Changing classifications and crime categories prove problematic when trying to establish trends in violence. In some instances, this makes it virtually impossible for the public to compare statistics year on year.

As you can see in fig.1 we have 2 tables displaying apparently the same information from the same sources and government department over two years.

The figure stated in the first table for 'violence against the person' in 2011/12 is **762,515 incidences** but in the following year the second table in fig.1 states that for 2011/12, there were **626,720 incidences**. This is not a small discrepancy as they seem to have misplaced **135,795 incidences** in a year.

On discussion with the ONS who produce this data it was due to changes in the classification of what crimes constitute 'violence against the person'. This however is not made clear without thorough scrutiny and as a non-statistician I had to contact the ONS to have this explained to me. It therefore makes the ability to compare statistics year on year impossible for the general public.

135,795

**REPORTS OF VIOLENCE WERE
MISPLACED BETWEEN 2011/12**

Table 2a Number of detections and detection rate by offence group, 2010/11 and 2011/12

	England and Wales, Recorded crime								
	2010/11	2011/12	% change	2010/11	2011/12	% change	2010/11	2011/12	% point change
	Number of offences			Number of sanction detections			Sanction detection rate (%)		
Violence against the person	821,939	762,515	-7.2	365,358	331,725	-9.2	44.5	43.5	-0.9
Sexual offences	54,919	53,665	-2.3	16,463	16,124	-2.1	30.0	30.0	0.1
Robbery	76,189	74,690	-2.0	15,681	15,427	-1.6	20.6	20.7	0.1
Burglary	522,683	501,053	-4.1	69,362	64,988	-6.3	13.3	13.0	-0.3
Offences against vehicles	449,616	417,444	-7.2	49,755	44,864	-9.8	11.1	10.7	-0.3
Other theft offences	1,078,679	1,105,117	2.5	241,967	233,984	-3.3	22.4	21.2	-1.3
Fraud and forgery	145,913	141,241	-3.2	34,596	30,996	-10.4	23.7	21.9	-1.8
Criminal damage	701,000	631,221	-10.0	96,228	85,193	-11.5	13.7	13.5	-0.2
Drug offences	232,922	229,103	-1.6	217,274	211,513	-2.7	93.3	92.3	-1.0
Other offences	67,055	60,263	-10.1	46,336	41,113	-11.3	69.1	68.2	-0.9
Total	4,150,915	3,976,312	-4.2	1,153,020	1,075,927	-6.7	27.8	27.1	-0.7

Table taken from The Home Office Statistical Bulletin: Crimes Detected in England and Wales 2011/12 (https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/116435/hosb0812.pdf)

Table 2c Number of sanction detections and sanction detection rates by offence group, 2011/12 and 2012/13

	England and Wales, Recorded crime								
	2011/12	2012/13	% change	2011/12	2012/13	% change	2011/12	2012/13	% point change
	Number of offences			Number of sanction detections			Sanction detection rate (%)		
Violence against the person	626,720	601,134	-4.1	242,323	225,599	-6.9	38.7	37.5	-1.1
Sexual offences	52,760	53,540	1.5	15,291	14,857	-2.8	29.0	27.7	-1.2
Robbery	74,688	65,156	-12.8	15,427	13,474	-12.7	20.7	20.7	0.0
Theft offences	2,013,428	1,850,156	-8.1	333,588	301,554	-9.6	16.6	16.3	-0.3
Criminal damage and arson	626,008	529,719	-15.4	83,623	73,049	-12.6	13.4	13.8	0.4
Drug offences	229,099	208,017	-9.2	211,528	194,639	-8.0	92.3	93.6	1.2
Possession of weapons offences	23,688	19,913	-15.9	20,815	17,318	-16.8	87.9	87.0	-0.9
Public order offences	150,858	132,203	-12.4	94,803	77,718	-18.0	62.8	58.8	-4.1
Misc. crimes against society	44,981	42,482	-5.6	31,070	28,845	-7.2	69.1	67.9	-1.2
Total	3,842,230	3,502,320	-8.8	1,048,468	947,053	-9.7	27.3	27.0	-0.2

Table taken from The Home Office Statistical Bulletin: Crimes Detected in England and Wales 2012/13 (https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/224037/hosb0213.pdf)

Fig 1. Example of changing crime categories.

Without comparable statistics year on year it is difficult to identify trends and measure the impact of interventions. Ideally classifications should remain the same with the same parameters however there have been further changes to the classification almost annually since 2011/12.

Whilst we can review latest data and figures and the various departments that publish this are able to make comparisons and draw conclusions, the general public and other agencies like Stand Against Violence, who use this data are unable to easily understand the true picture of violence and evaluate the success of interventions on a wider scale.

The improvement in collaborative working and data sharing is a very welcome one as it is now possible to gain a more accurate picture of the true issues with violence. Police recorded crime data was considered to be the 'one to watch' for many years, despite many knowing that crime is greatly under-reported to the police. Thankfully this changed, but the Crime Survey for England and Wales (CSEW) became the favoured data.

Whilst the CSEW is a randomised survey which collects public views on crime and is a robust piece of evidence used in conjunction with other data it is still a survey of opinion and therefore still doesn't give us a true picture of the problem. **50,000 households** in England and Wales are randomly invited to take part and around three quarters of those households reply (crimesurvey.co.uk, 2015). Therefore it is only a small proportional representation of the views of the **63 million people living in England and Wales**. Therefore the views of **62.9 million people are unheard**. That's **99.97% of the population** who are not surveyed.

The addition of hospital data is a very positive one. Many victims of violence may not report to the police but many will attend hospitals for medical treatment which means a much more accurate picture is being seen.

Of course there are those who will not seek medical help and these are still the voices that are not being heard but so far there is not a solution to this issue. There is still a significant problem with hospitals accurately and regularly reporting on this data. There are still gaps in the data.

Despite the new NHS England initiative of Violence Reduction Nurses, whose purpose is to focus on supporting data sharing from emergency departments (ED's) and consistency there are still gaps in the data. It is crucial that all agencies work together to develop this collaborative working relationship.

The benefit of securing a more accurate picture of violence in England and Wales means that interventions can be resourced and targeted effectively. If we know that violence is rife in a particular area it makes sense to target intervention there rather than a sleepy suburb where little occurs. It also helps to generate a surface picture which can then be further picked apart to ascertain the causes and why violence in those areas is more prevalent.

This may be, as is often the case that there is a high concentration of late night venues where alcohol will play a significant part in the cause of these violent incidences. It has been noted that these 'hot spots' on further investigation have had many problems besides violence, this may include poor security, breaking of licensing rules, poor staff training and more.

By drilling down to these very basic elements it is then easier to target interventions such as training, improving standards and licensing conditions and as a result there is often reductions in the levels of violence. This is just one example of how data can be used to tackle the problem of violence.

**62.9 MILLION
POPULATION**

**OF ENGLAND AND WALES DO
NOT HAVE THEIR VIEWS FULLY
REPRESENTED IN SOME SURVEYS**



TYPES OF VIOLENCE AND CAUSES

The World Health Organization (WHO) classifies violence into 3 types (WHO, 2002). These are:

- 1** Self-directed violence refers to violence in which the perpetrator and the victim are the same individual and is subdivided into self-abuse and suicide
- 2** Interpersonal violence refers to violence between individuals, and is subdivided into 'family and intimate partner violence' and 'community violence'. The former category includes child maltreatment; intimate partner violence; and elder abuse, while community violence is broken down into acquaintance and stranger violence and includes youth violence; assault by strangers; violence related to property crimes; and violence in workplaces and other institutions.
- 3** Collective violence refers to violence committed by large groups of individuals and can be subdivided into social, political and economic violence



**44% OF 2010/11
VIOLENCE INSTANCES
WERE COMMITTED UNDER THE
INFLUENCE OF ALCOHOL**

ALCOHOL AND VIOLENCE

Around half of all violence in England and Wales is thought to be committed by individuals who are under the influence of alcohol (**44% in 2010/11**) (Bellis et al, 2012) and this is a recurring theme across all the categories of violence. It is interesting to compare the actions taken against substances deemed damaging to health. We are all aware of the consequences of smoking and the money and time that has been invested to reduce smoking. We are told about the costs to the economy, to hospitals, to health and as a result smoking rates have reduced.

We are all aware of the damaging effects of alcohol. Alcohol accounts for **10% of the UK** burden of disease and death, making alcohol one of the three biggest lifestyle risk factors for disease and death in the UK, after smoking and obesity (Alcohol concern, 2016).

Whilst passive smoking may have detrimental health effects on those around a smoker so too does alcohol. Alcohol related harm costs the country around **£21bn per year**, with **£3.5bn to the NHS**, **£11bn tackling alcohol-related crime** and **£7.3bn from lost work days** and productivity costs (Alcohol Concern, 2016). The health effects can include liver disease, various types of cancer and depression.

Much research has been conducted on alcohol related violence over the years and one resounding recommendation brought up time and time again with a very strong evidence based rationale is to reduce the availability of alcohol (WHO, 2004) and apply a legal minimum cost per unit. A minimum unit price is one of the most effective strategies of reducing alcohol-related harm. Selling alcohol for no less than **50p a unit** would tackle health inequalities, reduce alcohol related crime, hospital admissions, lost productivity days and save lives (Alcohol Concern, 2016). It would also be pertinent to invest in the scale of health promotion that has been invested in to smoking.

So the big question is why has nothing been done. This is not new evidence, it has been there since at least 2002 when the WHO report on violence was released yet nothing has changed in the UK.



50P A UNIT

**MINIMUM ALCOHOL PRICE
WOULD TACKLE HEALTH
INEQUALITIES, REDUCE
ALCOHOL RELATED CRIME,
HOSPITAL ADMISSIONS,
LOST PRODUCTIVITY DAYS
AND SAVE LIVES**

RISK FACTORS FOR VIOLENCE

There are many risk factors depending on the type of violence to which we refer however looking specifically at youth violence other risk factors besides alcohol and substance abuse include;

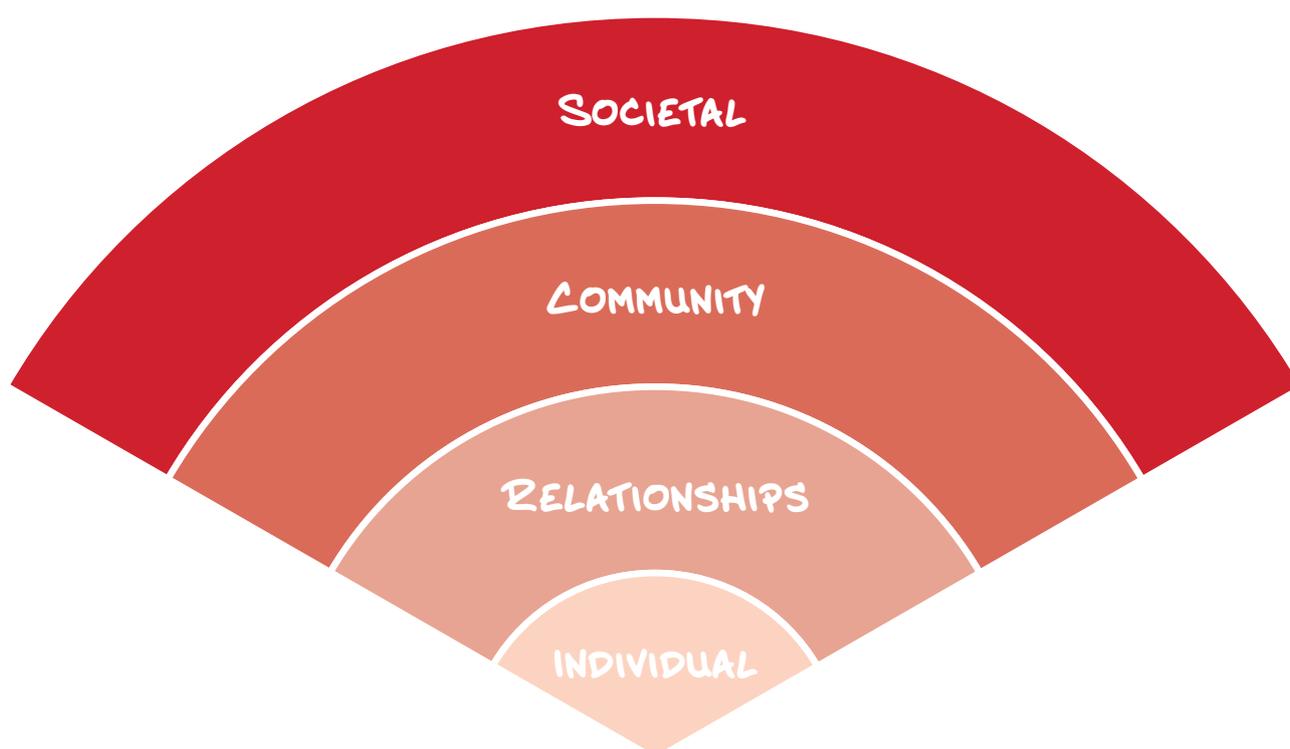
- 1** Age and sex of the individual
- 2** Early behaviour
- 3** Biological risk factors
- 4** Parental/family risk factors such as parental conflict, child abuse, maternal depression, discipline issues
- 5** Peer relationships
- 6** Media violence
- 7** Community factors such as social deprivation

(McVeigh et al, 2005)

UNDERSTANDING WHY WE ARE VIOLENT

THE ECOLOGICAL MODEL

This helps us to understand how violent attitudes can be reinforced, created or broken by various influences on an individual at difference levels of our surroundings.



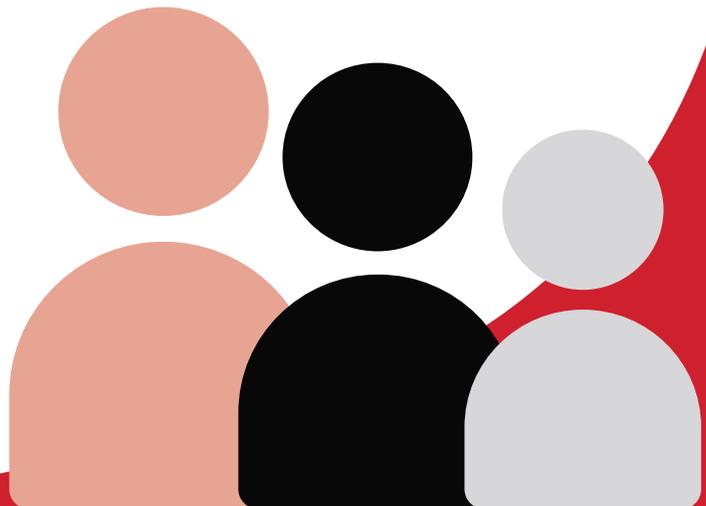
INDIVIDUAL

This area of the model looks at the risk factors of an individual including physiological factors that may predispose someone to being violent such as psychological or physiological conditions. Whilst people are not born violent we are all thought to have different levels of tolerance towards factors that may make us violent. Some of us may be more 'short fused' than others. The best way to explain this would be to look at epilepsy. We all have a 'seizure threshold' which if we exceed will trigger a seizure. This could be due to intoxication, fever or any number of factors. In those with epilepsy the threshold for seizures is significantly lower than in the general population. These physiological factors can be applicable to a whole host of conditions including violence. Other individual risk factors include substance abuse and childhood abuse.

RELATIONSHIP

This element of the model looks at the relationships affecting the individual. Here is the second opportunity to reinforce, create or break violent tendencies. A child growing up in a violent household may learn how to be violent or have their predisposing tendencies reinforced. Similarly parenting styles may break the tendencies and overcome the physiological influences.

**A CHILD GROWING
UP IN A VIOLENT
HOUSEHOLD MAY LEARN
HOW TO BE VIOLENT**



COMMUNITY

This is the third opportunity to influence the level of violence in an individual. The community in which we live, the influences of our neighbours, our friends, our schools. All of these influences on us as individuals are again likely to shape the people we become. For example, falling in with a 'bad crowd' or starting habits such as drug taking may make an individual more at risk of becoming violent or re-enforcing violent tendencies. Having positive influences around an individual, strong positive role models, interventions to support and nurture are examples of what can help to break violent tendencies.

SOCIETAL

This is the fourth opportunity to overcome violence in an individual. Societal influences include the media, government policies, societal prejudices and what we are shown of the world around us. An example of societal influences can easily be seen in the context of Nazi Germany. Government policy, media campaigns and swathes of society demonised the Jewish community turning masses of people either against them or allowed people to go against their humanity and turn a blind eye to their suffering.

It is impossible to believe that every German citizen actually woke up one morning and hated Jews but through constant societal influences and pressure this reinforced violence and prejudice towards the Jewish people and normalised these beliefs, attitudes and actions.

So it is easy to see at each level of the ecological model just how many factors influence whether someone will be violent and also gives us valuable insight in to the various opportunities we have to break that. What is also evident from evaluated programmes is that the older an individual becomes the less evidence there is to support effective violence prevention and risk reducing interventions.

PREVENTING VIOLENCE

BASED ON TYPE AND STAGE IN CYCLE (BREAKING THE CYCLE)

As eloquently put by Nelson Mandela, 'violence is not an intrinsic part of the human condition and can be prevented.' This is a comment that we at Stand Against Violence build our foundation on.

Violence can indeed be prevented and there is overwhelming evidence to support this. One argument against Mr Mandela's statement that has been raised countless times is 'how do you explain fight or flight. Humans are the same as any other animal and will fight.' The response I would give to this is that even for any animal, fighting is not the first option.

**'VIOLENCE IS NOT AN
INTRINSIC PART OF THE
HUMAN CONDITION AND CAN
BE PREVENTED.'**

Nelson Mandela

The first response and objective is flight, to run away and get free of a situation, to preserve their life. An animal will only attack or fight if all escape routes are blocked and there is no other alternative. Humans are the same. We will never be able to completely eradicate all forms of fighting but violence and fighting is simply not a part of being human, it is a choice that we make. Self-defence is the only excuse that should be considered for violence and even that should be a last resort when all opportunities to run are exhausted.

The issue is, that in order for violence to be prevented, concerted long-term generational effort and investment is required. Whilst investment in prevention may not be of high cost financially (compared to reactive costs) there will be no quick results, as it will take generations to see a change. Therefore, investment of any funding will show little return in the short-term which is often a problem for Government where terms are relatively short. It is therefore essential that investment is provided to tried and tested methods of prevention and where there has been good robust evidence demonstrated. Cross-party collaboration and agreements should also be a focus to ensure continued work and funding regardless of changes in political parties.

So how then can we look to break the cycle of violence? How and where can we direct our efforts to see an end to violence in our communities? Let's look at prevention at each level of the ecological model and the stages in the cycle of violence.



**ANIMAL'S FIRST RESPONSE
AND OBJECTIVE IS FLIGHT, TO
RUN AWAY AND GET FREE OF A
SITUATION, TO PRESERVE THEIR
LIFE. HUMANS ARE THE SAME.**

INDIVIDUAL

Whilst there is little that can be done to negate the physiological risk factors that may predispose someone to violence it is important to remember that we all have choices in life and those choices have consequences both on ourselves and those around us.

Those born in troubled families or social deprivation may find it more difficult to make life choices, but we all have the opportunities and abilities to make choices in our lives that may lead us down or away from a violent path. There is always support and help out there in our communities for those who are struggling but it is down to the individual to choose to engage and commit and sometimes these opportunities may seem daunting and a significant upheaval to someone's life, such as moving away from an area. In the example of domestic violence, why is it that someone who may have been brought up in an environment of domestic abuse may be more likely to perpetrate domestic abuse themselves whilst others with the same upbringing will not? This is an interesting thought and again it is dependent on the individual's personality and characteristics and hence it again comes down to the existing physiological risk factors.

INTERVENTIONS

During early childhood social-development training, looking at good citizenship and how to function in society, and pre-school enrichment programmes and academic enrichment programmes have been shown to be effective in lowering the risk factors for violence. Young people who fall behind academically have been shown to experience greater frustrations and disengagement with the education system and their peers which ultimately leads them down a route of negativity and risk. By ensuring and supporting young people to develop a good basis for academic achievement and keeping them up to date with peers this can be prevented. School-based child maltreatment programmes, reducing unintended pregnancy and increasing prenatal/postnatal support are just a few interventions that also show promise.

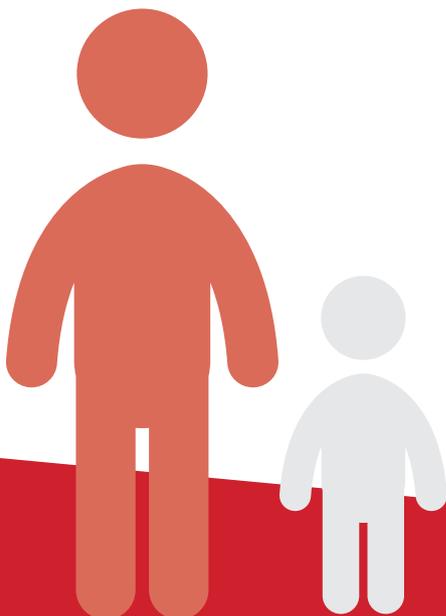
RELATIONSHIP

Nurturing a peaceful and positive attitude through relationships is the first stage to reducing an individual's tendencies towards violence.

Good parenting will enforce boundaries and teach right from wrong instilling positive and peaceful values. Successful programmes at this level include mentoring programmes where young people are buddied with adult mentors who act as positive role models and guides during their youth. There is much research taking place around the value of parenting classes to improve parental capabilities but so far the evidence is proving minimal. That said supportive programmes that offer services, support and encouragement to families will only benefit a person's ability to parent especially in situations where other family role models are lacking.

INTERVENTIONS

Home-visitation services, parenting training and therapeutic foster care in the infant and toddler age group have been shown to be effective in reducing risk factors. Mentoring has also shown promise in the 3-11 age group, however has also been proven effective at the later age of 12-19 years. Home-school partnership programmes promoting parental involvement have shown promise in childhood.



**MENTORING HAS ALSO SHOWN
PROMISE IN THE 3-11 AGE GROUP
HOWEVER HAS ALSO BEEN
PROVEN EFFECTIVE AT THE LATER
AGE OF 12-19 YEARS**

COMMUNITY

Having a supportive and positive group of peers will also help an individual avoid violence. Individuals who grow up in a peaceful community are at an advantage as the community influence and collective peer pressure for non-violence supports an individual to not follow violent paths or act on violent tendencies.

Tackling issues of social deprivation and encouraging positive community cohesion and social integration have shown promising results, as has improvements to the environment such as good community facilities and creating green spaces.

INTERVENTIONS

There are no proven effective interventions in this stage of the model for reducing risk factors however a number of programmes have shown some promise. These include screening by health care professionals for child abuse, recreation and safe haven programmes, child abuse education for young people, community policing and reducing alcohol availability. Interestingly at each stage one of the recurring interventions is the role of health care in detecting and supporting the prevention of child abuse and adult abuse from all age brackets. Controversially the public shaming of domestic abuse perpetrators has also been listed as showing promise.

SOCIETAL

Ensuring that both central and local government policies support and promote non violence and peace are again key to breaking violence. A minimum price per unit on alcohol has shown significant positive results in the reduction of violence by encouraging responsible drinking.

There is evidence to suggest that the reporting of negative stories in the media add to a societal culture of fear and this in turn heightens levels of violence within society. Having responsible, unbiased and well balanced media reporting would make a significant impact on the way society views the world and those around us.

INTERVENTIONS

Again, there is less strong evidence to support interventions at this level however a number of projects have shown promise. Public campaigns to promote pro-social norms as well as reducing media violence are examples of this. There is a small body of research, one such paper being produced by Bryant and Zillmann (2002) that highlights the impact of media violence. It is not so much that the media (including TV dramas and soap operas) directly promote violence but that they paint a negative view of the world in which we live.

This creates a culture of fear and makes people more likely to respond negatively in public. For example, an elderly person may cross the street when they see a young person as they believe, through what they see and read in the media, that they are likely to be mugged or attacked. This is not the case but it is the public perception created by dominant negative media. Lets face it, there are probably many positive news stories out there but we rarely hear about them.

As the saying goes 'bad news sells better than good news' and this is purely down to societal demand which we must change as individuals. This is also compounded by the emergence of ever increasing 'fake news' which only escalates the issue presenting untrue stories or flawed research, to give an example, the flawed research that sparked the development of the anti-vaccination movement which over the years has led to the re-establishment of previously practically irradiated illnesses.

Social media poses further problems. Social media sites are now underpinned by intelligent algorithms and will show you news that the algorithm deems you 'want' to see. If you view or click links on many negative articles and blogs or, for example 'left wing' or 'right wing' political news the social media platform will simply show you more of this as it calculates that you find this interesting.

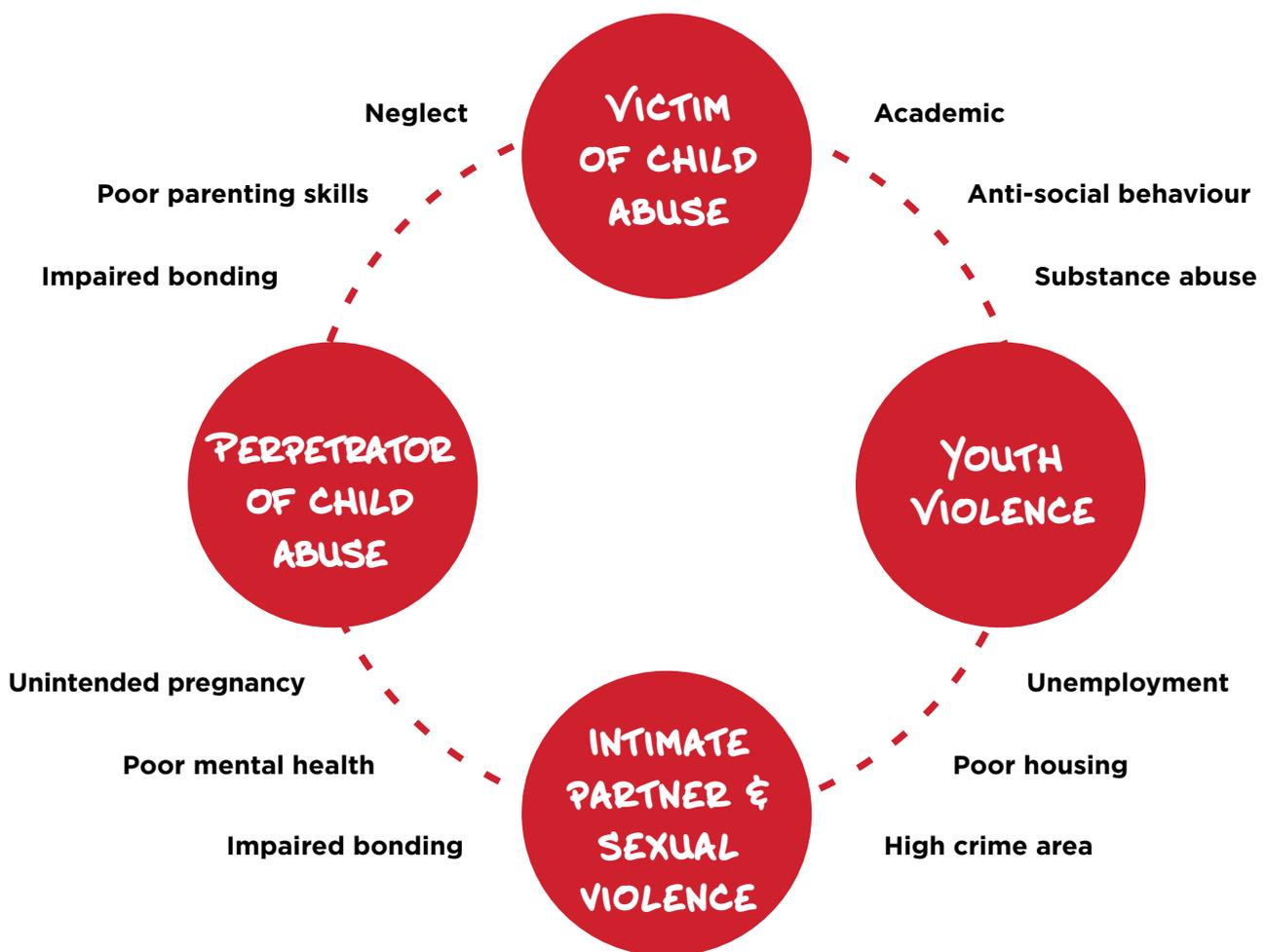
This simply creates a negative cycle of doom and gloom news which individuals have inadvertently catalysed. For example, if your views are left wing politically and you read many left-wing articles then you will be presented with more pro-left news and anti-right news compounding your views and potentially making them more extreme over time and with further exposure, and vice versa. Whilst this algorithm is extremely clever it only compounds the issue supplying us with a bias and unbalanced view and therefore a negative perception of the world that we live in.

A regularly asked question is about the influence of violent video games on levels of social violence. Unfortunately, there is minimal evidence in this area supporting either theory. One study by Anderson and Bushman (2001) argues that there is a direct link to increasing violence and negative social norms however they do state that there is no longitudinal evidence to show the long-term effects of violent games. Brockmyer et al (2009) suggest that the ability of a game to increase violence is dependant upon the depth of the game. A game that is heavily scripted and detailed with longer game play time will have more impact on the gamer. Strengthening police and judicial systems, reducing income inequality and de-concentrating poverty have also shown promise.

THE CYCLE OF VIOLENCE

BELLIS ET AL'S CYCLE OF VIOLENCE

Another model to consider is Bellis et al's cycle of violence (2009).



Here it is easy to see how the cycle of violence works. Whilst this particularly looks at violent people being subject to child abuse, which isn't always the case, it shows the major risk factors that will create a violent individual. In the centre of the cycle we can see that alcohol and substances have a direct effect on all aspects of this cycle.

VICTIM OF CHILD ABUSE

A victim of child abuse is significantly more likely, as are those from areas of social deprivation to go on to become violent in their youth.

Academic attainment is a big factor in violence. In the above image it implies that this is only applicable to victims of child abuse, but actually falling behind one's peers academically can lead to disengagement, frustration and a sense of failure which can steer an individual more towards the risk factors of violence such as anti-social behaviour and substance use.

There is a great deal of focus and work being done to tackle child abuse, from charities to public sector. Putting an end to child abuse would be a significant step in breaking the cycle of violence although there are still difficulties faced when a child is removed from their parents.

ACADEMIC PROBLEMS

Underachieving in school leads to a sense of disengagement and failure which in turn leads to anger and frustration. There is strong evidence to support the use of academic enrichment activities and support with education plays a significant role in preventing the disengagement and frustrations that can lead to violent behaviour and bullying.

SUBSTANCE ABUSE

It is well known the varying impact that illicit substances can have on our physical, mental and emotional health. Frequent substance abuse can lead to significant long term problems which can in turn lead to lifestyles of violence or crime. Supporting people out of addiction and preventing people from getting heavily involved in substance abuse will significantly reduce the chances of these individuals taking a violent path in life.

ANTI-SOCIAL BEHAVIOUR

Reducing the prevalence of anti-social behaviour, youth violence and crime is key to reducing violence overall. Young people growing up in high crime areas are more likely to become involved in crime themselves. Having a good understanding of the problem and developing targeted interventions through public health and policing are essential to breaking the cycle.



**FREQUENT SUBSTANCE ABUSE
CAN LEAD TO SIGNIFICANT LONG
TERM PROBLEMS WHICH CAN
IN TURN LEAD TO LIFESTYLES
OF VIOLENCE OR CRIME**

YOUTH VIOLENCE

Violence claims more young lives each year globally than war and conflict (WHO, 2002). Youth violence committed by or against young people (aged 10 to 30 years) accounts for an estimated **60% of all violence committed in England and Wales (Home Office, 2003 in McVeigh et al, 2005).**

As shown above a victim of child abuse, those struggling in school, those engaging in anti-social behaviour and substance use are more prone to being involved in youth or interpersonal violence. These individuals are therefore more likely to end up unemployed living in areas of social deprivation and these areas are more likely to have high crime rates and more community influences affecting the violence of an individual.

SOCIAL DEPRIVATION

Reducing levels of social deprivation through investing in social mobility, improving the environment in which people live and their access to services will reduce the likelihood that young people will engage in violence. This includes closing the unemployment gap, improving housing and tackling high crime areas.

INTIMATE PARTNER VIOLENCE

Violent individuals particularly those who have been subject to abuse or grown up in situations of domestic violence are more likely to become abusers themselves and are more likely to carry out acts of violence or sexual abuse to a spouse.

Among other things this can then lead to unintended pregnancy and poor mental health for both the victim and the perpetrator.

Reducing the prevalence of domestic violence breaks a significant element in the cycle of violence. Providing support and help in relationships and ensuring the empowerment of individuals to remove themselves from violent or abusive relationships will help break the cycle.

UNINTENDED PREGNANCY

Unintended pregnancy can lead to impaired bonding, resentment and also the perpetuation of an abusive relationship. Children to teenage mothers are more likely to lack social support, life opportunities and are more at risk of being subject to violent relationships and exposure to substance abuse (WHO, 2002).

POOR MENTAL HEALTH

Poor mental health puts individuals in vulnerable positions by making them more likely to be subject to abuse and be less likely to function normally in society making employment and education prospects bleaker.

PERPETRATOR OF CHILD ABUSE

The circle now begins to close where the individual is now raising a child in a situation of domestic violence, social deprivation and there is increased risk of violence towards the child.

As stated previously unintended pregnancies can impair the parent-child bonding and there is increased risk of poor parenting and neglect of the child which inevitably takes us full circle.

POOR PARENTING

Impaired bonding and poor parenting means a young person is more likely to be at risk of becoming involved in violence and crime. They are also more likely to be vulnerable to neglect and abuse.

IMPAIRED BONDING AND POOR PARENTING MEANS A YOUNG PERSON IS MORE LIKELY TO BE AT RISK OF BECOMING INVOLVED IN VIOLENCE AND CRIME



EDUCATION THEME

A key theme that runs through all interventions is education. Not simply classroom based activity but mentoring, guiding and supporting. Through it all, there is education and learning.

This is the largest key to violence prevention by changing attitudes through leading, through education and through supporting one another to function as active members of a civilised society.

Through using education in its various forms to break the cycle of violence we will undoubtedly see reductions in violence over the generations and ultimately have a more peaceful and safe society in which to raise our children, live and work in.

This is a utopian vision but one that is achievable if we want it to be.



**A KEY THEME THAT RUNS
THROUGH ALL INTERVENTIONS
IS EDUCATION**

BARRIERS TO THE EDUCATIONAL APPROACH

Whilst education is the key to ending violence there are a number of barriers to this approach across the board.

FINANCIAL

At a time when organisations are making large funding cuts there is very little funding for educational establishments and wider Local Government to be able to fund prevention and educational work. Whilst prevention work is the best approach when it comes to investment as it is cheaper and more effective long term there is still a need for funding and results are slow to see.

TIME

There are many constraints on time both within school curriculum and in people's personal lives so finding opportunity to deliver support and educational programmes is always a challenge.

SAV'S APPROACH

Stand Against Violence (SAV) is one organisation that specialises in violence prevention through education. We have seen profound effects on improving violent attitudes from the work we do with schools and young people delivering workshop based activities.

SAV'S SUCCESS AND SIGNS OF PROMISE

In collaboration with the Centre for Public Health, SAV carried out a small scale evaluation of the school based work we do. Whilst this was only small scale it involved a mix of both city schools and rural schools covering a range of communities.

The approach was a tried and tested attitude change questionnaire which was completed prior to the workshop, immediately after and then again 6 weeks later. The results showed a statistically significant change in violent attitudes with young people indicating that they were less likely to engage in violence as a means of conflict resolution and this was also still statistically significant 6 weeks later (CPH, 2014).

This evaluation shows that there is a great deal of promise in SAV's educational work. Not only is there profound benefit to the young people we work with but there is a pressing need for further research on a larger scale.

With such minimal evidence available on educational intervention such as this, this is a key area which needs further exploration and evidence.

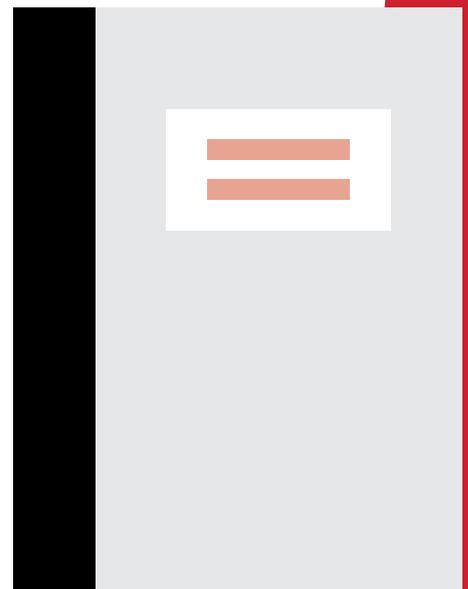
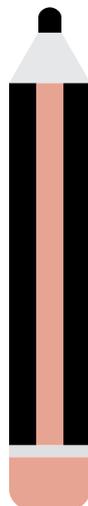
KEY PLAYERS IN MAKING PEACE AND NON-VIOLENCE A REALITY

Taking a prevention and education approach to violence prevention requires certain key players. Surprisingly, to many the idea of the police and justice systems taking a lead is actually out dated.

The latest theories suggest that a public health approach to violence is needed. In order to prevent the spread of a disease it is important to not only understand it but to implement educational projects, prevention measures and engage local communities in awareness raising. This is the way violence has been observed and why a public health lead approach has been identified as the most effective.

Key players in the prevention of violence include:

- 1 **Education**
- 2 **Businesses and communities**
- 3 **Health sector**
- 4 **Justice sector**



EDUCATION

All children in the UK must attend school. This presents an ideal opportunity to reach all young people and future generations and ensure that attitudes within these communities lean towards non-violence. The benefits of teaching life skills and lessons of non-violence have direct impact on the attitudes, well being and safety of young people in school environments. Safer environments are more conducive to learning and productivity. SAV's own evaluation and case studies have shown reductions in bullying and playground fighting which improves the safeguarding of young people and a safer environment in which to study.

Having specialist organisations deliver workshops on these issues rather than the school teachers is also recommended by Ofsted and other research institutions to achieve best results. This issue is most appropriately delivered as part of the PSHE curriculum. Whilst the curriculum is not compulsory it has proven benefits to developing young people as well rounded citizens and in our view is essential to the improvement and development of our society.

BUSINESSES

Corporate Social Responsibility presents a key opportunity to reduce the barriers experienced by other sectors such as education.

Through supporting and funding programmes which support non-violence, businesses are not only directly contributing to safer communities and the well being of the societies in which they operate but they are also investing in their future workforce and their own internal culture of non-violence and safety.

HEALTH SECTOR

The health sector has a multitude of opportunities to not only directly engage and improve the life chances of individuals fostering non-violence but also to contribute to the bigger picture of violence through data sharing which will aid interventions in high risk areas. Safeguarding of children, vulnerable adults and those at risk of domestic abuse is also a key area in which the health sector can contribute to and break an element of the cycle of violence.

JUSTICE SECTOR

The justice sector will always have the opportunity to engage in improving safety in communities. Through reducing crime and improving social environments they can directly contribute to reducing contributing factors to violence. They also have the opportunity to rehabilitate those who have already become involved in criminal activity.

SOCIETY

As a society, we all have a responsibility to lead through example and show non-violence in our own actions. Peer pressure can arguably cause us to take negative actions such as engaging in bullying or substance abuse, peer or social pressure can also ensure that we conform and engage in new social norms of non-violence and peace. Media also play a big part in contributing to and improving social norms. Negative news stories of crime, violence and negative world events without the balance of positive news stories leads to an oppressive, hostile and depressing view of the world. When we see 10 news stories about murder and 1 'good news' story it is easy to believe that the society in which we live is one of death and violence but in reality this is not so. Responsible and well-rounded reporting of the news to reflect a true picture of the society we live in will improve an individual or community outlook on the world. Soap operas on TV can also reinforce this negative view of the world with their sensationalist scripts of regular death and destruction. Audiences like a 'gritty' and exciting story but this must be kept in balance to avoid social norms and views of society being wholly negative.

SUMMARY

Education is a constant theme underpinning all violence prevention from health promotion and community based measures to schooling and directed work with young people, but finding the opportunities to deliver and engage with both financial and time constraints is a constant challenge.

Investing in violence prevention programmes targeted at children or those which influence them during early development show greater promise than those targeting adults. These early interventions have the potential to shape the attitudes, knowledge and behaviour of children while they are more open to positive influence, and to affect their lifelong behaviours.

Whilst rapid prevention methods or 'quick fixes' are favoured by the political and economic climate the benefits of long term or long-delay prevention with time lags of more than 1-2 years between implementing interventions and their prevention outcomes have shown greater benefits and successes at lower costs.

Violence in all guises continues to blight communities and until concerted long-term effort and investment is achieved by all key players it will continue. Support from the education sector and key stakeholders is of paramount importance if we ever hope to see the non-violent utopia humanity always dreams of. Violence is not inherent or inevitable. We hold the power for change, we hold the ability to see an end to violence, so why are we settling for less?





 **STAND
AGAINST
VIOLENCE**

www.standagainstviolence.co.uk