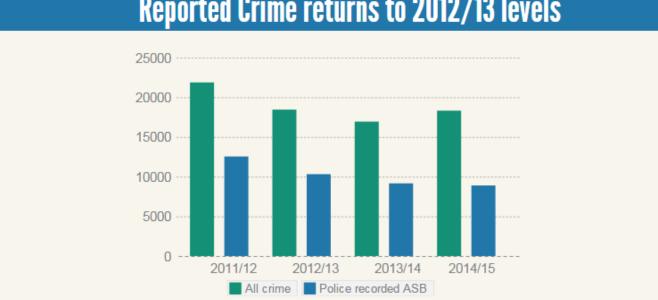


Conclusions from the 2014/15 SPP strategic assessment

There have been a number of challenges in the strategic assessment process and in drawing conclusive findings, primarily because of *significant changes in crime recording* following the HMIC¹ report, 'Crime recording: making the victim count' (November 2014). Changes in resourcing and practice across many services have added to this. Where possible, this has been taken into account to identify any substantial changes and highlight new or changing priorities.



Reported Crime returns to 2012/13 levels

Overall, crime levels have gone up across the country. However, Portsmouth has seen a larger increase in police recorded crime (9%) than the national average (3%) which is beyond the level expected from changes in recording practice. The increase has largely been driven by an increase in violent crime. This suggests either real increases in some types of crime or that levels of previous under-recording by police in Portsmouth and Hampshire as a whole, were higher than found nationally. This issue highlights the importance of using detailed analysis and multiple data sets to really understand crime patterns in order to effectively prioritise a partnership response.

Violence 1.

In the last year, 6,671 violent offences were recorded in Portsmouth, an increase of 36% (n1864) since 2013/14. The earlier HMIC report found that violent crime had been under-recorded by 33% and Hampshire Constabulary has faced similar issues to other areas. Violent crime now accounts for 36% of all crime compared to 29% in 2013/14. This is a rate of 32.2 per 1,000 population, which is higher than the

Her Majesty's Inspectorate of Constabulary

Conclusions from the 2014/15 SPP strategic assessment - October 2015



25.6 per 1,000 population for similar areas and 29 per 1,000 measured by the CSEW². **Domestic abuse is still the largest category of violent crime** accounting for 31% of all assaults (n1,554). There was a 29% (n348) increase on last year.

Some types of violent crime have seen substantial increases, these include:

a) Sexual offences



There has been a **74% (n207) increase in sexual offences**. The **largest increase has been in serious sexual offences including rape** where there has been a 92% (n179) increase. Similar increases have been seen across Hampshire, but this is beyond the national average increase of 41%. Whilst improved confidence and recording of offences may account for some of the increase, it may not account for all unless there was a higher level of under-recording locally. We know that just under a quarter of offences were historic. Over half of offences were committed by someone known to the victim (35% by an acquaintance), approximately half were alcohol and/or drug related and the most common age for the victim was between **13 and 22 years**.

b) Public order offences

Public order offences have increased by 83% (n649); this is thought to be related to better recording and **includes re-coding some ASB incidents as crimes**. Again, an 83% increase is beyond what might be anticipated from improved recording, unless we had a higher level of under-reporting locally.

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c) Racially and religiously aggravated violence

There has been a 52% (n98) increase in violence flagged as *racially and religiously aggravated* and Portsmouth has the second highest rate within its most similar group. This *increase has been driven by a* **74%** (*n89*) *increase in public order offences such as harassment flagged as racially driven*. Previous research found the most common location for incidents to be near to the victim's own home, and this year the most common reported location for incidents was the victim's own home *or in the street or park*. Portsmouth's hate crime team have also seen an increase in reports which could signal real increases and *warrants further attention*.

d) Youth related violence



There has also been a notable rise in **youth related violence** - incidents where the young person (aged 10 to 17) is the victim, the offender, or both. The **number of young people who have been victims of youthon-youth assaults has tripled** (*n*108) **over the last year.** The biggest increase is where the victim and

² Crime Survey for England and Wales

Conclusions from the 2014/15 SPP strategic assessment - October 2015



offender are known to each other. *There was also a substantial 239% increase (n271) where a young person was the offender and the victim was an adult.* Some of this may be attributable to better recording especially if this relates to lower level violence (such as public order offences) but *the increase is larger than expected which could indicate a real increase.*

A substantial number of offences relating to young people assaulting an adult are offences against parents / step parents; teachers (specifically in the Harbour School which may reflect changing reporting policy with a new head teacher in post) and looked after children (LAC) assaulting staff responsible for their care. We don't fully understand the reasons for the increases and this needs further investigation.

2. Serious and acquisitive crime

Levels have not changed to the extent that it would become a main priority. The only substantial rise was in theft from motor vehicles and to a lesser extent, motor vehicle interference with decreases in shop theft and theft from the person.

3. Alcohol misuse

Portsmouth continues to face challenges related to alcohol misuse but recent investment in response and treatment services has started to have an impact. This is reflected in the reductions in alcohol related hospital admissions which *for the first time this year have dropped below the national average* and the average for our comparator group of areas. *However, alcohol specific and alcohol related mortality and chronic liver disease continue at a higher rate* than for England, our comparator group and the South East region. To impact on these health indicators *requires sustained improvements over ten to twenty years* and we are still to reach these milestones since improved investment and prioritisation of alcohol misuse.

4. Drug misuse

Drug use in the city continues to be higher than national averages, particularly for ecstasy and powder cocaine. Whilst this may reflect the urban and age demographic of the city, it continues to be a priority area. There have also been some important changes in the drug profiles for the city with an *increase in the use of new psychoactive substances* (NPS). For young people this is now the third most reported substance use after alcohol and cannabis. NPS's can be easily accessed regardless of age and are in fact easier for young people to purchase than alcohol and cigarettes. Existing treatment services are more geared to opiate and crack cocaine. So, whilst the figures for NPS use are still relatively small, increased use and the unknown impact on long term health indicators mean it is important to ensure response and treatment services are aware of and responsive to this new challenge.

There is a very *clear link between alcohol and drug use and crime and anti-social behaviour and health outcomes* for the city. Analysis of persistent and prolific offenders, young offenders and complex ASB cases shows the impact of substances on the perpetrators, their families and the local community.

5. Young people





For the first time since 2007/08 there has been *an increase in all recorded crimes committed by young people aged 10 to 17 years.* In general, this is likely to reflect changes in recording practice by the police after the HMIC data integrity report.

However, while the number of crimes committed by young offenders has increased, the number of young offenders continues to fall, and therefore the average number of crimes each young offender is responsible for has steadily increased from an average of 2.3 offences per offender in 2007/08 to 3.9 in 2014/15.

On a positive note, *the custody rate for our young offenders has improved and is now slightly less than the national average* and our most similar group average. Previously, Portsmouth had a high custody rate so this is a significant improvement.

Offending by looked after children continues to cause concern; **12.7% of LAC commit offences compared to 1% in the youth population as a whole**. Whilst it is clear that this is partly a reflection of the risk factors that have led to both their offending and their looked after status, we do not seem to be impacting significantly on the young people's offending rates even after they come into care. In other words, *existing interventions for LAC are not as successful as they could be in reducing offending*.

Charles Dickens, St Thomas and Paulsgrove wards continue to have the highest rate of young offenders and are target areas for interventions. The partnership's Restorative Justice Strategy and YOT triage panel will hopefully impact in future years and benefit both victims and offenders.

Risk factors for young people



Whilst work to address and reduce risk factors for young people is being led by the Children's Trust as they oversee the development of Multi-Agency Teams (MATs), it is worth reiterating that there are some areas of risk to young people where Portsmouth could do better. This includes: *the number of young people aged 16 to 18 not in education, employment or training; persistent absence, fixed term exclusions; GCSE attainments; and offending by looked after young people.* Portsmouth also has a higher rate of children killed or injured in road traffic incidents than the national average and a much higher rate of hospital admissions for self-harm (which is a reflection of emotional wellbeing).

6. Child Sexual Exploitation

There has been an increased focus on children and young people at risk of Child Sexual Exploitation (CSE) and regular multi agency forums are held to review the tactical and strategic plans for missing, exploited and trafficked young people across Hampshire. This work is led by the Children's Trust.

Risk factors for child sexual exploitation



Young women aged 15 to 17 are most at risk particularly where they have pre-existing vulnerability. There is also a **link being drawn between CSE and drug supply particularly** where local young males actively seek to sexually exploit young women as payment for drugs.



7. Adult re-offending

In relation to what we know about adult offenders, we only have information on the 25.6% of recorded crimes that were detected and 22.6% of crimes resulted in a formal outcome - which is above the national rate. This obviously means we don't have detailed information about the vast majority of people who commit crime in the city. However, we do know that nearly **90% of offenders have only committed one or two offences** in the previous twelve month period and **significantly there are fewer prolific offenders than in previous years**. In 2011/12, there were 54 people (1.56% of known offenders) that committed ten or more offences, this has reduced to just 25 (0.9% of known offenders). 18 to 24 years continues to be a peak age for offending although there has been a growth in offending for the 25 to 34 year old age range. This may reflect a changing offender demographic but it is still too early to identify a trend.

Groups of offenders managed by the Portsmouth Integrated Offender Management team have been tracked over time and have shown a *sustained reduction in their offending beyond the time they are on the IOM programme.* This is an *important finding* as previous research found that after two years offending started to increase again.

Risk factors for prolific offenders



The most prolific offenders are **older** than the offender population as a whole and there is a **correlation** with complex ASB cases where there are emerging issues such as alcohol and drug misuse; homelessness; rough sleeping; threats from drug dealers, domestic abuse, mental health issues and for young people, child protection issues.

8. Anti-social behaviour

It is difficult to get a complete picture of ASB across the city and current changes to police recording of ASB are likely to make this even harder. However, our local Community Safety Surveys shows that ASB does impact on our local communities and that noise, litter and dog fouling, rowdy and noisy behaviour in the street, street drinking and inconsiderate behaviour continue to be concerns and experiences of city residents.

The relationship between risk factors and crime or ASB is complex; it is not that these issues cause offending and ASB in themselves, but rather that the risk factors are similar, and offending or ASB may emerge from those issues. There is a *link with alcohol misuse and in more complex cases the perpetrators are often also victims and in some cases exploited by others.*

Risk factors for anti-social behaviour



Cross referencing cases found *high levels of alcohol and drug use; exploitation by transient drug dealers; mental health and learning disabilities, domestic abuse and child neglect.* Improving the first assessment of cases that have these risk indicators might enable earlier interventions and investment before the cases become entrenched and extremely complex to solve, causing major problems for both the perpetrator and local community members.



9. What works to manage cases of multiple or complex needs?

It is not unusual for perpetrators to also be victims of crime. For example, some of the people vulnerable to exploitation by transient drug dealers using their properties may also have complex needs themselves; the tenant of a property reported for causing ASB who is also the victim of domestic abuse. Hand in hand with these issues are problems with accommodation; employment training and education, financial management skills and other life skills. Understanding and responding to these issues may have a greater impact on crime and ASB the earlier they are identified and the quicker interventions are put in place to prevent escalation.

Whilst the troubled families programme now Positive Family Steps has assisted in some cases, this does not identify and respond to all individuals (notably those without children or where their children are no longer living with them).

Supporting staff across agencies through training and information to identify and respond appropriately to each new case; monitoring those most in need and offering single points of contact; supporting the development of multi-agency work by improving understanding and co-ordination between services and empowering multi agency forums to be more effective.

Risk factors for people with multiple or complex needs

Throughout the strategic assessment process, there is growing evidence of the complex and inter related nature of many of the issues and the people involved. *Young people committing multiple or serious offences or adults (with or without families) who commit offences especially prolific, persistent or problematic offenders and complex ASB cases,* often have multiple needs. These are described on the diagram at the end of this hand-out as 'Risk Factors'.

Reviewing SPP priorities



Whilst overall, the main priorities remain the same, the focus within each priority area has shifted (and this is set out below).

In addition, there is a growing need to **consider/reconsider the response to both young people at risk and adults at risk**. In particular to consider the impact of looked after young people; young people with reduced life chances; the complex relationship between substance misuse, emotional well-being/mental health, learning disability; domestic abuse and child neglect in terms of increased exposure to crime and ASB and greater likelihood of being both victim and perpetrator.

There are examples of successfully targeted interventions such as the IOM, and PPO offender programmes; troubled families programme and positive activities for young people. However, there is **less knowledge**



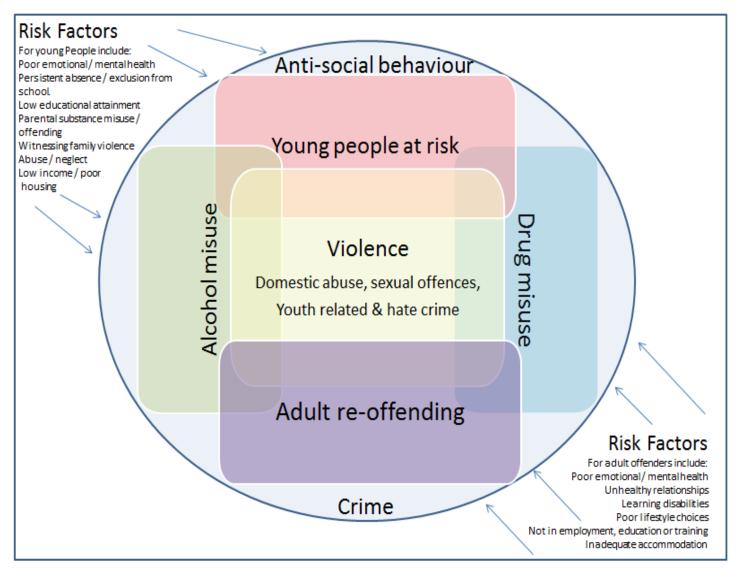
and overview work of the impact of dual and multiple diagnosis in general and very few interventions targeted specifically at adults (without children / or where their children are no longer living with them).

In terms of specific priorities:

- Tackling violent crime by continuing to focus on domestic abuse and alcohol-related violence, but also focussing on sexual offences, hate crime and youth-related violence.
- Reduce anti-social behaviour, particularly focussing on complex cases.
- Sustain improvements by alcohol misuse services to reduce long term health issues.
- Make sure drug treatment services respond to the changing drug profile of the city including the increased use of ecstasy and new psychoactive substances.
- To ensure a specific focus on drug and alcohol misusing perpetrators of anti-social behaviour and offenders (via IOM).
- Support early intervention with children who come to the attention of services before their needs escalate.
- Work with others to identify cost benefits of intervening earlier in complex cases of anti-social behaviour
- Early identification of and interventions with adults and young people at risk of perpetrating antisocial behaviour, offending or substance misuse.
- To support multi-agency work by improving understanding and co-ordination between services.



• Align research and analysis to localities, support a partnership community safety survey and conduct further research to understand the increases in hate crime, youth-related violence and youth victimisation.



Risk Factors	4	Anti-socia	al behaviour				
	Youth-on-youth violenc tripled since 2013/1	4 (n165). The number of (
The rate of alcohol related hospital admissions (2,079 per 100,000) is lower than the England and MSG averages	18% of Young People had been drunk in the last 4 weeks The Children's Society survey reported that 45% their parents provided alcohol	Young per There were 778 children involved in the 648 cases that went to MARAC	Domestic abuse is a common factor in child protection plans (58%, n283) and for children taken into care (51%, n88))	The You Say survey 2014/15 found that 11% of respondents' were worried about their parents' drug use.		11% of opiate users and 43% of non-opiate users completed treatment successfully	3% te
Portsmouth has a higher rate of alcohol-related deaths and chronic liver disease than nationally or the MSG average.		Domestic violence Dip sample of 120 domestic incidents found 59% (n71) of incidents both victim and offenders had been		20% of individuals accessing treatment services are currently or have previously experienced DA Estimate opiate ar opiate ar o		nd crack e users U's) mmonly postances: s /skunk powder (10.5%), r & NPS	
43% of crimes were flagged as alcohol related (where this field was not left blank)	were flagged as alcohol related43% of lower risk and 50% of higher risk offenders was not leftwere flagged as alcohol related43% of lower risk and 50% of higher risk offenders supervised in the		supervised by NPS were domestic e perpetrators e-offending	(9. 27% of lower risk and 39% of higher risk offenders supervised in the community		.8) 22 in treatment reported Novel Psychoactive Substances as a problem, double 2013/14	
Initial activitie Activitie Initial activitie Initial activitie Initial activitie The biggest proportion of known offenders are in the 25 to 34 years age category (28.8%, n819) The most prolific offenders were responsible for 278 offences / 2.1% of all Crime The majority of known offenders still only commit one known offence each year (73.9%, n2,103)							
Crime							