# Bedfordshire Violence and Exploitation Reduction Unit (VERU) and Serious Violence Duty (SVD)

# STRATEGIC NEEDS ASSESSMENT 2023/24

### Ade Abitoye

Data & Analytics Lead, Bedfordshire VERU/OPCC

With contributions from multiple partners and sources
(See Author and acknowledgements at end of document)

March 2024



#### SVD Bedfordshire Specified Authorities

















# **Table of Contents**

| Fo | rew   | ord     |  | 1     |
|----|-------|---------|--|-------|
| Or | ie-pa | age S   | ummary   | 3     |
| Ex | ecut  | ive S   | ummary   | 4     |
| 1. | Intro | duct    | ion  | 18    |
|    | 1.1   | Purp    | ose of the SNA   | 19    |
|    | 1.2   | Scop    | oe and Approach  | 21    |
| 2. | Dem   | ogra    | phic Overview of Bedfordshire                                      | 23    |
|    | 2.1   | Popu    | ulation size and structure   | 24    |
|    | 2.2   | Ethn    | icity  | 25    |
|    | 2.3   | Popu    | ulation density  | 27    |
|    | 2.4   | Dep     | rivation   | 28    |
| 3. | Viol  | ence    | and Exploitation in Bedfordshire                                   | 30    |
|    | 3.1   | Viole   | ence and Sexual Offences   | 31    |
|    | 3.1.1 | Polic   | ce-recorded crimes   | 31    |
|    | 3.1.1 | l.1     | Homicide   | 41    |
|    | 3.1.1 | 1.2     | Rape and Sexual Offences   | 41    |
|    | 3.1.2 | 2 Viole | ence with injury: Health-recorded assaults                         | 46    |
|    | 3.1.2 | 2.1     | Ambulance callouts related to assaults                             | 46    |
|    | 3.1.2 | 2.2     | Violence-related A&E Attendances                                   | 48    |
|    | 3.1.2 | 2.3     | Violence-related admissions  | 51    |
|    | 3.2   | Viole   | ence against women and girls (VAWG)                                | 57    |
|    | 3.3   | Nigh    | t-Time Economy   | 65    |
|    | 3.4   | Drug    | gs & Alcohol, Organised Crime Groups (OCGs), Gangs and County Line | es 68 |
|    | 3.4.1 | Sum     | mary from Drugs Crime Data   | 68    |
|    | 3.4.2 | Sum     | mary from Arrest Data  | 69    |
|    | 3.4.3 | 3 Orga  | anised Crime Groups (OCGs), Gangs and County Lines                 | 70    |
|    | 3.4.4 | Sum     | mary from other data   | 72    |
|    | 3.4.5 | Com     | bating Drugs Outcomes Framework                                    | 74    |
|    | 3.5   | Child   | d exploitation   | 76    |
|    | 3.6   | Yout    | h Justice System   | 80    |
| 4. | Perc  | eptic   | ons of violence and exploitation                                   | 82    |
|    | 4.1   | Perc    | eptions across Bedford Borough                                     | 82    |

|    | 4.2   | Perceptions across Central Bedfordshire              | 84  |
|----|-------|--|-----|
|    | 4.2.1 | Central Bedfordshire CSP Youth Survey                | 85  |
|    | 4.2.2 | Central Bedfordshire CSP Adult Survey                | 86  |
|    | 4.3   | Perceptions across Luton Borough                     | 88  |
| 5. | Risk  | and Protective Factors for Violence and Exploitation | 91  |
|    | 5.1   | Evidence base  | 91  |
|    | 5.2   | Risk and protective factors                          | 95  |
| 6. | Prev  | enting Violence and Exploitation                     | 104 |
|    | 6.1   | Whole systems multi-agency approach                  | 104 |
|    | 6.2   | Prevention Interventions                             | 106 |
| 7. | Reco  | ommendations   | 111 |
| Αι | uthor | and acknowledgements                                 | 117 |
| GI | ossa  | ry   | 118 |
| Αį | pen   | dix  | 120 |

# **List of Figures**

| Figure 1: WHO model for violence prevention   |
|---|
| Figure 2: Geographical Place of Bedfordshire (and its three local authority areas)  |
| Figure 3: Bedfordshire, East of England and England Mid-2022 Population Pyramid24   |
| Figure 4: Percentage change of the population from 2012 to 2022, by quinary age group and borough25   |
| Figure 5: 2021 Census Population, broken down by White and BAME (Black and Minority Ethnic) groups, in Bedford Borough, Central Bedfordshire, Luton, Bedfordshire, East of England Region and England       |
| Figure 6: Population Density, by Census 2021 Population Density Quintile, Persons per Square Kilometres, by Bedfordshire Lower Super Output Areas (LSOAs) 2011 Boundaries                                   |
| Figure 7: Index of Multiple Deprivation (IMD) 2019 Quintiles in England, by Bedfordshire 2011 LSOAs   |
| Figure 8: Number and percentages of crimes or offences reported by the Bedfordshire Police to the Home Office and deemed to have occurred in Bedfordshire, by crime category, 2019-2023                     |
| Figure 9: Number and percentages of crimes or offences reported by the Bedfordshire Police to the Home Office and deemed to have occurred in Bedfordshire, by Borough, 2019-2023 (five-year) pooled data    |
| Figure 10: Quintiles by count of police-recorded violence and sexual offences in Bedfordshire, by 2011 LSOAs, using 2019-2023 (five-year) pooled data   |
| Figure 11: Comparison of directly age-standardised rates (DSRs) of Police-recorded violence and sexual offences for LSOAs to the Bedfordshire DSR,5-year (2019-2023) pooled data                            |
| Figure 12: Bedfordshire directly age-standardised rates (DSRs) of Police-recorded violence and sexual offences by Index of Multiple Deprivation (IMD) decile, 5-year (2019-2023) pooled data                |
| Figure 13: Top aggravating factors mentioned for violence and sexual offences in Bedfordshire, by using keyword search, 2019 to 2023  |
| Figure 14: Distribution of violence and sexual offences in Bedfordshire, by month & borough and by weekday & hour group, 2019 – 2023 (five-year) pooled data  |
| Figure 15: Distribution of violence and sexual offences in Bedfordshire, by gender, ethnicity and age group, 2019 – 2023 (five-year) pooled data  |
| Figure 16: Distribution of violence and sexual offences (police.uk) crime category in Bedfordshire, by crime type (from home office classification index), 2019 – 2023 (five-year) pooled data 40           |
| Figure 17: Top 10 LSOAs and Distribution of Ambulance Callouts related to Assaults in Bedfordshire by gender, age group, month and weekday & hour, January to December 2023. 47                             |
| Figure 18: A&E Attendances after assault  |
| Figure 19: Comparison of directly age-standardised rates (DSRs) of A&E Attendances after assault for LSOAs to the Bedfordshire DSR, 5-year (2016/17-2020/21) pooled data                                    |
| Figure 20: Bedfordshire directly age-standardised rates (DSRs) of A&E Attendances after assault by Index of Multiple Deprivation (IMD) decile, 5-year (2016/17-2020/21) pooled data 50                      |
| Figure 21: Distribution of violence related A&E attendances by age group & sex, ethnic group, index of multiple deprivation (IMD) quintile and arrival hour & mode, 2016/17-2020/21 (five-year pooled data) |

| Figure 22: Number of hospital admissions due to violence in Bedfordshire, 2011/12-2020/21 52   |
|--|
| Figure 23: Comparison of directly age-standardised rates (DSRs) of hospital admissions due to assault for LSOAs to the Bedfordshire DSR, 2011/12-2020/21 (ten-year pooled data) 53                         |
| Figure 24: Bedfordshire directly age-standardised rates (DSRs) of hospital admissions due to violence by Index of Multiple Deprivation (IMD) decile, 10-year (2011/12-2020/21) pooled data                 |
| Figure 25: Distribution of violence related admissions by month of admission, 2011/12-2020/27 (ten-year pooled data)   |
| Figure 26: Distribution of violence related admissions by day of the week, 2011/12-2020/21 (ten year pooled data)  |
| Figure 27: Distribution of violence related admissions by age group & sex, ethnic group, index of multiple deprivation (IMD) quintile and cause of admission, 2011/12-2020/21 (ten-year pooled data)       |
| Figure 28: County Lines Business Model   |
| Figure 29: Distribution of CYP cohort by child exploitation type   |
| Figure 30: Proportion of Bedford respondents who rated specific community safety issues and crime types as their top-3 issues (out of 25 issues)   |
| Figure 31: Percentage of Central Bedfordshire young respondents who thought each specified safety issue or crime type was a 'big' or 'moderate' problem in their local area                                |
| Figure 32: Distribution of how Central Bedfordshire adult survey respondents answered question about whether specified safety issue or crime type was a problem in their borough                           |
| Figure 33: Community priorities, concerns and expectations data in Luton   |
| Figure 33: ACEs and types of resilience in avoiding adverse outcomes from ACEs   |
| Figure 34: Increased risks (pooled odds ratios) of health outcomes in adults that have suffered four or more ACEs (compared with 0 ACEs)94   |
| Figure 35: Risk factors for serious violence   |
| Figure 36: Protective factors for serious violence   |
| Figure 37: Protective factor indicators in Bedford, compared to the national average 101   |
| Figure 38: Protective factor indicators in Central Bedfordshire, compared to the national average  |
| Figure 39: Protective factor indicators in Luton, compared to the national average 103   |
| Figure 38: Taking a public health approach to violence and exploitation reduction across Bedfordshire  |
| Figure 39: The 5Cs: a place-based taking a whole-systems multi-agency to serious violence prevention   |
| Figure 40: Summary of Youth Endowment Fund (YEF) Framework   |
| Figure 41: Summary of interventions with evidence that they work or are promising in overall o some reduction in violent crime and sex offences for children, young people, and location based populations |

# **List of Tables**

| Table 1: Offence groups and subgroups included in the "Violence and Sexual Offences" crime category (as specified by police.uk)   |
|---|
| Table 2: Count and proportion of total count of Bedfordshire 2011 LSOAs, by Index of Multiple Deprivation (IMD) 2019 Quintiles in England, by Borough   |
| Table 3: Number and percentages of crimes or offences reported by the Bedfordshire Police to the Home Office, 2019-2023 (five-year) pooled data   |
| Table 4: Number of LSOAs with the highest counts (quintile) of violence and sexual offences in Bedfordshire by ward and borough, using 2019-2023 (five-year) pooled data  |
| Table 5: Directly age-standardised rates (DSRs) of Police-recorded violence and sexual offences, by borough, 5-year (2019-2023) pooled data   |
| Table 6: Offences included in the Rape and Serious Sexual Offences Problem Profile for Bedfordshire 2023  |
| Table 7: Top five most reported offences from the offences included in the Rape and Serious Sexual Offences Problem Profile for Bedfordshire 2023 (see Table 6)43   |
| Table 8: Distribution of rape and serious sexual offences by gender and borough, September 2019 to August 202244  |
| Table 9: Directly age-standardised rates (DSRs) of A&E Attendances after assault, by borough, 2016/17-2020/21 (five-year pooled data)   |
| Table 10: Directly age-standardised rates (DSRs) of hospital admissions due to violence, by borough, 2011/12-2020/21 (ten-year pooled data)52   |
| Table 11: Bedfordshire VAWG Problem Profile 2022 Findings by Space where the violence occurred  |
| Table 12: Summary of key finding from the Night-Time Economy profile for Bedfordshire, by identified four hotspots – Luton hotspot, Central Bedfordshire hotspots (in Leighton Buzzard and Dunstable) and Bedford hotspot, based on May 2021 to October 2022 data |
| Table 13: Summary of performance and trend of Bedfordshire Combating Drugs Outcomes Framework headline measures, as of February 202475  |
| Table 14: Individual risk factor indicators worse than the national average in each CSP in Bedfordshire97   |
| Table 15: Family risk factor indicators worse than the national average in each CSP in Bedfordshire98   |
| Table 16: Peer and social risk factor indicators worse than the national average in each CSP in Bedfordshire99  |
| Table 17: Community risk factor indicators worse than the national average in each CSP in Bedfordshire100   |
| Table 18: Tabular summary of more details from Bedfordshire Youth Offending Service 127   |
| Table 19: Tabular summary of more details from Luton Youth Partnership Service  |
| Table 20: Identified risk factors from the Collated Violence Indicator (CVI) List   |
| Table 21: Identified protective factors from the Collated Violence Indicator (CVI) List   |

#### **FOREWORD**

An established unit, the Violence and Exploitation Reduction Unit (VERU) continues to provide the county with a unique and complementary support service, embedded in the whole-system approach we continue to develop. In line with this and following on from the publication of the unit's first Strategic Needs Assessment (SNA) in 2020, I am pleased to share the findings of the latest assessment of violence and exploitation in Bedfordshire.

In collaboration with several partner agencies, the SNA serves as the foundation for addressing the issue of violence and exploitation amongst young and vulnerable people, while providing a blueprint for a collective county-wide response. The goal is not only to assess the current landscape of violence and exploitation in Bedfordshire, but also to envision a future where young people in our community feel safe, supported, and empowered. This assessment represents a crucial step in the continued understanding of the complex and topical dynamics of violence and exploitation that impact young people and the wider community.

A multifaceted issue, violence and exploitation requires a comprehensive response, one that addresses root causes, identifies vulnerable populations, and fosters collaboration among stakeholders. The Pan-Bedfordshire SNA aids as a catalyst for action, providing insights that will guide strategic planning, resource allocation, and intervention efforts. Through data-driven analysis and community engagement, the VERU aims to ensure that our county-wide efforts continue to protect those at risk and provide pathways to recovery for victims of violence and exploitation.

I would like to take this time to extend my gratitude to all those who have contributed to this assessment, particularly our core members and wider partnership organisations, community members, and colleagues within policing. Your dedication and insights are invaluable as we work together to build a safer and more resilient network. Namely, I would like to thank the VERU's Data and Analytics Lead, Ade Abitoye for his exceptional efforts as author of this publication. To produce an assessment of this quality, with an incredible depth of research, insight and clarity,

Ade's dedication and expertise will undoubtedly have a significant impact on violence and exploitation in Bedfordshire.

Together, let us confront the challenges of violence and exploitation with courage, compassion, and determination, knowing that our collective efforts today will shape a brighter tomorrow for generations to come.



**Robin Porter** 

Chief Executive, Luton Borough Council
Chair, Bedfordshire Serious Harm Partnership Board<sup>1</sup>

\_

<sup>&</sup>lt;sup>1</sup> The Serious Harm Partnership Board provides the oversight and governance for four pillars of pan-Bedfordshire activity: The Violence and Exploitation Reduction Unit (VERU); The Serious Violence Duty (SVD); The 10-year drug strategy; and Organised Crime Gangs and County Lines. The rationale for having a single board, rather than multiple boards, is to ensure that these interlinked strategic agendas are considered together in a whole systems manner.

#### **ONE-PAGE SUMMARY**

This Strategic Needs Assessment (SNA) identifies and details the drivers of violence and exploitation in Bedfordshire and the cohorts of people most affected. It fulfils the dual requirements for the Bedfordshire Violence and Exploitation Reduction Unit (VERU) and the specified authorities under the Serious Violence Duty (SVD) to produce an SNA.

A detailed look at the problem of violent crime and exploitation in Bedfordshire (using three broad sources: police data; health data; and a variety of other data sources including locally produced profiles, needs assessments, and nationally curated data sources) found that:

- By place: Bedford Borough and Luton have significantly higher rates and the rate for Central Bedfordshire is significantly lower. Most of the small areas identified as having significantly higher rates (more of them in Luton but spread in pockets across Bedfordshire) align with the more deprived areas of the county.
- By person: There are generally more female victims than male victims of violence and exploitation, except in cases of "violence with injury" presented in hospital. The top age groups of victims were mostly teenagers aged 15-19 years and young adults aged 20-24 years, 25-29 years, 30-34 years old.
- By time: Violence and sexual offences in Bedfordshire are more likely to occur more in May, June, and July. Night-time (especially from 12 midnight to just before 4am over the weekend) is the most at-risk time period, highlighting the importance of the nighttime economy.
- Domestic abuse is the top aggravating factor for the violence and sexual offences in Bedfordshire. Some other factors or circumstances include drugs and alcohol (suspect and/or victim intoxication), child at risk, harassment, online crime, intimidation, use of knife or other sharp instrument, etc.

20 key recommendations were made from conducting this SNA. They were based on the epidemiology of violence and exploitation across Bedfordshire and some other key insights and information (such as the perception of violence among residents using the local councils' community safety surveys; risk and protective factors for violence & exploitation; and an overview of the evidence base behind primary, secondary, and tertiary prevention approaches) provided in this SNA. They highlight areas for consideration, action, further research, and/or further engagement with partners.

See the Executive Summary for more information.

#### **EXECUTIVE SUMMARY**

#### Introduction

Violence and exploitation are key public health issues influencing the health and wellbeing of populations and leading to significant inequalities within populations. 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". In addition, the local (Bedfordshire) partnership defines serious violence as "the intentional use of physical force or power to threaten or harm others (including young people) that either results in or has a high likelihood of resulting in serious injury".

Though drivers and root causes of violence and exploitation are extremely complex, often interacting and overlapping with one another, addressing them could help to improve health and wellbeing across our communities, and result in additional economic and societal benefits. In August 2019, the Bedfordshire Office for Police and Crime Commissioner (OPCC) was awarded funding to set up a Violence Reduction Unit (VRU). VRUs are multi-agency units, bringing together partners across the county to tackle and prevent serious violence. The Bedfordshire Violence and Exploitation Reduction Unit (VERU) has been working with partner agencies since its inception to prevent and reduce violence and exploitation across Bedfordshire by taking a whole systems multi-agency approach to violence and exploitation. Part of this agenda is to gain a deeper understanding of the drivers of violence and exploitation and how it can be prevented at a place-based level. In addition, in January 2023, the government launched the Serious Violence Duty (SVD), which is a key part of the government's programme of work to collaborate and plan to prevent and reduce serious violence.

It is part of the key requirements for the VERU and statutory requirements of the SVD to produce a Strategic Needs Assessment (SNA). Since the purpose and content of the SNA required from the VERU and under the SVD are similar, it was locally agreed to have a combined SNA that fulfils both requirements. This SNA identifies the drivers of serious violence in the local area and the cohorts of people most affected. It aims to improve the health & wellbeing of the local population, guide resource allocation & service planning, enable identification of current and long-term issues relating to violence and the cohorts most vulnerable to involvement, and provide a greater understanding of established and emerging violence trends, priority locations or other high-risk issues.

#### **Demographic overview of Bedfordshire**

Bedfordshire is a ceremonial and historic county in the East of England. Three unitary local councils cover the area: Bedford Borough Council, Central Bedfordshire Council, and Luton Borough Council.

According to the most recent population estimates, the resident population of Bedfordshire is 715,940. This has grown by 14% in a decade (625,741 in 2012 to 715,940 in 2022). Bedford Borough's population grew the most within the decade – about 17% percentage increase (from 160,344 in 2012 to 187,466 residents in 2022). The population grew within the decade by 16% in Central Bedfordshire (from 259,524 in 2012 to 301,501 in 2022) and by 10% in Luton (from 205,873 in 2012 to 226,973 in 2022). Bedfordshire proportionally has more children aged 14 years and under and more people in their 30s and early 40s compared to the East Region and England. Within Bedfordshire, however, Luton generally has an even younger population when compared to the other two boroughs.

Bedfordshire has more BAME (Black and Minority Ethnic) people compared to England and East of England region. This is mainly due to the diverse population in Luton where over half of the population (55%) are from a BAME group. Central Bedfordshire has the least diverse population in Bedfordshire, where about 9 in every 10 people are from a white ethnic group.

The most densely populated areas in Bedfordshire (with over 6,661 people living in every square kilometre) are in Luton and pockets of areas in central wards of Bedford and in the south of Central Bedfordshire (especially areas in Leighton Buzzard and Dunstable). About 13% of the small areas in Bedfordshire are in the most deprived quintile in England – these are mainly located in Luton but there are also pockets of deprivation in Bedford Borough (especially in some central wards) and Central Bedfordshire (in Flitwick and southern areas of the borough).

#### **Violence and exploitation in Bedfordshire**

The scale of the problem of violent crime and exploitation in Bedfordshire, identified by this SNA, provides information that may be useful for providing a focus for further analytic assessment, prioritising operational work, identifying intelligence gaps, highlighting opportunities for prevention and enforcement, and providing justification for actions. This was identified using three broad sources: Police Recorded Crime data both from the publicly available police.uk and the local (Bedfordshire Police) system; Health data from the National Health Service (NHS) Hospital Episodes Statistics (HES) and the East of England Ambulance

Service; and a variety of other data sources including locally produced profiles, needs assessments, and nationally curated data sources.

About a third of all reported crimes (33%) in Bedfordshire in 2023 were violence and sexual offences. Violence and sexual offences crime category covers many offences that include violence with injury, violence without injury, homicide, death, or serious injury caused by illegal driving, rape, stalking and harassment, and other sexual offences. Over the most recent 5-year period (2019-2023), almost a third (30%) of all crimes were violence and sexual offences and this proportion is similarly observed in the three individual boroughs.

Luton has a higher count of violence and sexual offences than the two other boroughs, followed by Central Bedfordshire. The locations and communities (judged by small areas called lower super output areas) with the highest counts of violence and sexual offences are found in the:

- South-central wards and other pockets (such as in Sharnbrook, Riseley, Wyboston and Wilshamstead wards) of Bedford Borough.
- South-western areas (in the Dunstable, Leighton Buzzard, Houghton Hall, and Tithe Farm areas/wards) and some northern pockets in Sandy and Biggleswade North of Central Bedfordshire.
- Southern wards and other pockets spread across the north-western wards of Luton.

The directly age standardized rates (DSR) for both Police-reported violence & sexual offences and health-recorded assaults show that the higher rates for Bedford Borough and Luton (compared to the Bedfordshire rate) are mostly statistically significant and the rate for Central Bedfordshire is significantly lower than Bedfordshire and the two other boroughs. Most of the small areas identified as having significantly higher rates than the Bedfordshire rate align with the more deprived areas of the county. The DSRs increase with deprivation and the most deprived decile has a significantly higher rate than (and generally about six times) that of the least deprived decile. Targeting these small areas with significantly higher rates for the right interventions should reduce violence in the county.

In terms of at-risk groups, there were generally more female victims than male victims, although there were more male victims in certain categories (such as in cases of violence with injury that were presented in hospital). The top age groups of victims were mostly teenagers aged 15-19 years and young adults aged 20-24 years, 25-29 years, 30-34 years old. The breakdown of victims by ethnicity is less useful and mostly difficult to make any conclusions

from because the proportion of "unknown or unspecified" ethnicity is mostly too high. However, in some cases, it appears some ethnic minority groups were overrepresented (such as the black ethnic group regarding hospital admissions due to violence). Where offender details were recorded, most of the offenders were identified as male.

The top 2 rape and sexual offences (sexual assault on a female and rape of a female aged 16 or over) constitute 6 in every 10 reported offences from the offences included in the "Rape and Serious Sexual Offences Problem Profile for Bedfordshire 2023". The top three recorded vulnerabilities for all victims of rape and sexual assault were Age/Under 18, Domestic Abuse and Child Abuse. The most common vulnerabilities amongst the top repeat victims were poor mental health, drug use, alcohol abuse & Child Sexual Exploitation (CSE). Most of the other patterns for rape and sexual offences mirror those of the wider violence and sexual offences crime category. Where the relationship between the victim and the offender was recorded, the most common relationship between the victim and offender was Spouse/Partner/Ex-Partner (40%), followed by Friend/Associate (26%). Where the relationship was recorded as Spouse/Partner/Ex-Partner and Friend/Associate, the offenders were predominantly male (96%).

Violence and sexual offences in Bedfordshire are more likely to occur more in May, June, and July. Night-time (especially from 12 midnight to just before 4am over the weekend) is the most at-risk time period and this is why a separate section was dedicated to the night-time economy (in addition to references to it in other sections) in this SNA.

One of the most important factors or circumstances related to violence and sexual offences in Bedfordshire is domestic abuse (DA). Over a third (35%) of the recorded violence and sexual offences were related to DA. It is also the top aggravating factor for the violence and sexual offences in Bedfordshire over the 5-year period. This is particularly the case for violence against women and girls (VAWG) in private spaces. Some other factors or circumstances related to violence and sexual offences in Bedfordshire include drugs and alcohol (suspect and/or victim intoxication), child at risk, harassment, online crime, intimidation, repeat domestic abuse, 'partner on partner', use of knife or other sharp instrument, etc. For instance, between June 2018 and September 2022, there were 28 homicides in Bedfordshire and of the 28 homicides, 6 were motivated by drugs supply and 8 involved the consumption of drugs or alcohol or involved substance abuse. Information on this (based on the cross-partnership Drug and Alcohol Needs Assessment required by the 10-Year National Drug Strategy – From Harm to Hope 2021) and an overview of the most recent performance of the related Bedfordshire Combating Drugs Outcomes Framework are included in this SNA. There are currently over 30

known Organised Crime Groups (OCGs) in Bedfordshire, and they are highly likely to be drug motivated with almost all of them being involved in drugs whether directly or as professional enablers. Just over a third of the OCGs use county lines business model. In addition, Bedfordshire had identified over 20 county lines and 346 cuckooed addresses as of 2022, with over half being in Luton.

The estimated rate of children and young people up to 25 years old (CYP) who are victims or at risk of child exploitation (CE) in Bedfordshire is 86 per 10,000 CYP. Luton has the highest rate, followed by Bedford Borough. Overall, in Bedfordshire, the dominant age group of victims or those at risk of CE is 15-19 years old. The vast majority (75%) of the victims or those at risk of Child Criminal Exploitation (CCE) are males and most of the victims or those at risk of Child Sexual Exploitation (54%) are females.

The rate of first-time entrants into the youth justice system for 10-17-year-olds (i.e., the rate of 10 to 17-year-olds receiving their first reprimand, warning, or conviction per 100,000 population) is statistically lower in Central Bedfordshire and Luton Borough, but similar in Bedford Borough compared to England.

.

In addition, the rate of first-time entrants into the youth justice system for 10-17-year-olds has significantly decreased in a decade (from 2011 to 2022) in all the three local authorities. Furthermore, the rate of Children and Young people aged 10 to 17 years cautioned or sentenced per 1,000 population is significantly lower in Central Bedfordshire, Bedford Borough and Luton Borough compared to England. This rate has also decreased significantly from 2013/14 to 2020/21 in all the three local areas. Further detailed information from the Bedfordshire Youth Offending Service and Luton Youth Partnership Service is provided in Appendix 3.

#### Perceptions of serious violence

Each of the three Community Safety Partnership (CSP) conducts a community safety survey and publishes a strategic needs assessment (which reports on public perceptions of community safety) annually. This information has been used within this SNA to provide an overview of local perceptions of serious violence and exploitation. Each local authority collects and presents data differently. Hence, direct comparisons cannot be made between the data for each local authority, due to differences in the questions asked, and the survey methodology.

In Bedford Borough, most respondents (80%) said they felt safe or very safe during the daytime but only 39% of the respondents felt safe or very safe after dark in their local area. These percentages were lower for the town centre (62% during daytime and 17% after dark). Some of the common reasons respondents reported for feeling unsafe in their local area and the town centre include antisocial behaviour, drugs & alcohol problems, crime & stafety, poor street lighting, mental health & social issues, youths gathering & hanging around, etc. Respondents specified felt more visible police presence, CCTV cameras, and street lighting could make the Bedford Town Centre a safe place. Drug taking or dealing, knife crime, sexual assault and rape, child sexual exploitation, and violence against the person were in the top 10 proportions of respondents who rated them as their top-3 safety issues and crime types of concern (out of 25 of them) in the borough.

In Central Bedfordshire, 75% of the respondents of the youth survey said they feel fairly safe or very safe in their local area and about 23% felt unsafe or very unsafe. But only 3 in 10 of them (30%) felt fairly safe or very safe walking around the town centre when it is dark. Almost a quarter (23%) of these young respondents said that they had been pressurised into doing something they did not want to do. Regarding online issues: only 3 in 10 respondents reported that they have never been bullied; 35% reported being trolled on social media at least once; over half (51%) reported that they had been body shamed online at least once; 3 in 10 (30%) reported having been asked to send nudes and 36% also reported receiving unwanted photos or cyber-flashing online; 25% have been inappropriately contacted by an adult; and 34% have been offered something illegal online.

The majority of adult survey respondents (75%) also thought that Central Bedfordshire was overall a fairly or very safe place to live. 22% thought it was fairly or very unsafe to live in the borough. However, most of them (73%) were also fairly or very concerned about crime in their local area. About 4 in 10 (42%) thought that levels of crime have stayed the same over the past 12 months whilst 36% thought they had increased and only 2% thought they had decreased. Only 37% and 34% felt that the Bedfordshire Police and Central Bedfordshire Council were respectively making Bedfordshire a safer place, at least to some extent. Over half (55%) thought that the Bedfordshire Fire & Rescue Service were making the county safer. When asked about specific community safety issues or crime types, vehicle crime and people using & dealing drugs were the top crimes they thought were the biggest problems in their local area. Nearly 4 in 10 (37%) of respondents thought that violent crime was not a problem in their area; 19% thought it was a slight problem and 15% thought it was a moderate or big problem. More police presence, improved & working street lighting, and more CCTV were highlighted as what both the youths and adults felt would make them feel safer.

In Luton, almost half of the survey respondents (46%) reported that they felt unsafe or very unsafe. 10% reported being dissatisfied with Luton due to the issue of lots of people hanging around, drinking, drug taking, high levels of begging, and homelessness. 11% reported dissatisfaction with Luton due to problems relating to a high crime rate, not feeling safe, and not enough police presence. In addition, since 2015 when the survey has been conducted, the proportion of secondary students reporting that there are no adults they can trust is the highest to date; and there has been an increase in the proportion of secondary students reporting that they were 'not at all' satisfied with their life. There has been a decrease in the proportion of secondary students reporting that they rate the safety when going out after dark as good. However, there has been a decrease in the proportion of secondary students reporting they were 'fairly sure' or 'certain' that they or their friends carried weapons for protection.

#### Risk and protective factors

There is a wide range of factors that could act as "risk" factors, which increase the likelihood of an individual becoming involved in violence and/or exploitation. Conversely, there are also "protective" factors that decrease this likelihood. These factors may be at play at an individual, relationship community or societal level, as outlined by the World Health Organisation in their report "World report on violence and Health," published in 2002.

Adverse Childhood Experiences (ACEs) and trauma refer to sources of stress that children may suffer whilst growing up. Although there is no standardised definition of ACEs, they have historically included multiple forms of physical, sexual, and emotional abuse and neglect, exposure to violence between parents or caregivers, and other serious household stressors such as parental substance abuse or mental illness. This SNA briefly highlights a state-of-the-art report on Tackling Adverse Childhood Experiences (ACEs) which has just been produced in 2023 by WHO Collaborating Centres and the World Health Organization (WHO) Regional Office for Europe. The report brings together current research on ACEs, their immediate and life-long impacts, and the evidence on how to tackle ACEs through prevention, mitigation, and trauma-informed practice (TIP). It is an evidence-based guide for those developing policy, practice, or other interventions to reduce the prevalence and harmful impacts of ACEs. Those that have suffered from four or more ACEs (compared with those with zero ACEs) are about 8 times more likely to be victims or perpetrators of violence, 10 times more likely to be a problematic drug user and 30 times more likely to attempt to end their lives.

A provisional list of identified risk and protective factors from the Collated Violence Indicator (CVI) List was included in this SNA. Using the CVI list as a guide and where data is available on the OHID's fingertips, the risk and protective factor indicators for serious violence and how they compare with the national rate in Bedford, Central Bedfordshire and Luton are briefly presented in the SNA. These include indicators for individual, family, peer & social, and community risk factors, and protective factor indicators (for which data is available).

#### Preventing violence and exploitation

Taking a "whole systems multi-agency approach" to reducing violence and exploitation, refers to how we view the issue and how we can work together to prevent violence and exploitation across Bedfordshire. At the core of this approach is partnership working – working across organisational boundaries and working as a whole system at a place level. We need to know what is driving the problem – that is, the "causes of the causes" and address the wider determinants (such as housing, education, employment) which have an impact on violence and exploitation. We need to focus on how we can *prevent* people in our community from being involved, or at risk of, violence and exploitation before it starts or detect it early. We should take a "proportionate universalism" approach, where services should ideally be available to all but weighted more heavily to those with the greatest need. Finally, every approach we take and every decision we make need to be driven by high quality data. We need to consider how we can best maximise the data that we have in the system, and how we can work across agencies to have a greater impact through the sharing of information.

Interventions to prevent serious violence and/or exploitation may target different aspects of prevention. They may be applied at a "universal" level, to a wider population or a "targeted" approach may be taken, specifically aiming to support those who are at increased risk of being involved. The three prevention types are as follows: Primary prevention (stopping violence and exploitation before it begins); Secondary prevention (early detection and intervention for those at higher risk of being involved in violence and exploitation); and Tertiary prevention (managing the risks and reducing harm in those already involved in violence and exploitation).

Using the Youth Endowment Fund (YEF) Toolkit as the primary tool and combining it with the College of Policing Crime Reduction Toolkit (CPCRT), it shows that there is some evidence that bystander interventions to prevent sexual assault has moderate impact. There is high evidence that relationship violence prevention lessons & activities and social skills training approaches, healthcare screening for domestic abuse, hotspots policing, and street lighting work currently have moderate or high impacts on violence as primary or secondary prevention

interventions. There is some evidence that A&E navigators programmes have high impact as a secondary prevention approach. For secondary or tertiary prevention, the most impactful approaches are cognitive behavioural therapy, sports programmes, and trauma-specific therapies. For primary, secondary, or tertiary prevention, there is very strong evidence that problem-oriented policing works. For tertiary prevention only, focused deterrence offers the greatest impact, based on current evidence. Hotspots policing, pre-court diversion and restorative justice also have moderate impact for tertiary prevention only.

#### Recommendations

Below are the key recommendations that have arisen from this SNA, highlighting areas for consideration, action, further research, and/or further engagement with partners.

#### 1. Refreshing the SNA annually

It is recommended that this SNA is a "live document," which considers new and emerging trends and patterns and is refreshed annually. This does not necessarily mean a wholesale change every year but an update where necessary. As part of this ongoing annual update, ways of further simplifying the SNA should be sought and implemented.

#### 2. Prioritising identified hotspots

The VERU, SVD specified authorities and partners should consider the hotspots identified in this SNA (throughout section 3) as high priority areas for future focus when planning local and country-wide violence reduction and prevention strategies, interventions, and activities. It is acknowledged that partners and stakeholders may already have a presence and be active and engaged in many of these areas. Reduction of violent crime in these hotspot areas will have significant impact on the violence reduction aims of the VERU, SVD specified authorities and partners.

#### 3. Joining up interventions and approaches

Partners should constantly seek joining up interventions and approaches in the identified hotspot areas for potential deduplication and amplification of efforts. They are areas that are mostly the same high priority areas for most – if not all – indicators and services. For instance, these hotspot areas are typically the most deprived areas that are also the main focus of Public Health teams across the county in terms of the inequality reduction aims and agenda of Public Health.

#### 4. Prioritising young male violence against females

The peculiarities of the offenders and victims of violent crime in Bedfordshire, identified in this SNA (and other problem profiles and needs assessments referenced in this SNA) should guide priorities for action and intervention. This is broadly young male violence against females. But this does not mean neglecting other categories of violence and exploitation.

#### 5. Gaining better local understanding of specific risk factors

It would be useful to gain better local understanding of the role of specific risk factors in being involved in violence and/or exploitation (including the role of absent fathers and gang membership). This may involve Public Health Services in the local councils supporting the local development of the Collated Violence Indicator (CVI) list as a standalone or as part of their Joint Strategic Needs Assessments. This may also involve working with academic partners, OHID and other partners to undertake a structured evidence review of the risk factors associated with specific types of violence and exploitation. Perhaps detailed multi-service profiles of current offenders and victims to help improve understanding of the risk factors associated with involvement in violence and exploitation may be useful. In the future, with the right data, there may be potential to develop algorithms using modelling techniques to identify those who are at increased risk of being involved in violence and exploitation and therefore targeting interventions. This would however need to be approached carefully and ethically.

#### 6. Refreshing shared understanding of whole systems approach

Partners may want to review, refresh, and gain greater shared understanding of what a "whole systems approach" could or should look like across Bedfordshire. This may include undertaking a stakeholder event (or events) to help map risk and protective factors, services, and assets across the system.

#### 7. Mapping of existing interventions

It is recommended that the VERU and partners undertake a mapping of interventions aimed at addressing, reducing, or preventing serious violence and exploitation across Bedfordshire. These should be mapped into primary, secondary, and tertiary prevention and by geographical area using the Youth Endowment Fund (YEF) Toolkit principally but combined with the College of Policing Crime Reduction Toolkit (reference section 6.2). This piece of work should be useful in underpinning a gap analysis between need and service provision across the county. This can also be used to guide future allocation of community project funding.

#### 8. Commissioning and/or creating evidence-based interventions

The Youth Endowment Fund (YEF) Toolkit combined with the College of Policing Crime Reduction Toolkit (reference section 6.2) should help guide future interventions commissioned through the Bedfordshire VERU and other partners. Thus, before any new community intervention is commissioned, the VERU and partners should map it to prevention type (primary, secondary, and tertiary prevention) and the type of approach that works, using the toolkits. However, innovation and trying new things that could work should not be stifled. Where a new community intervention to be commissioned is a new type of approach or an approach with low/no evidence of its impact, then a robust evaluation should be a requirement for that intervention.

#### 9. Commissioning high-impact interventions before May

The VERU and/or partners should consider commissioning some of the prevention interventions that have been shown to work (see section 6.2) but yet to be implemented locally in Bedfordshire. Specific reference was made to implementing A&E navigators programme in Bedfordshire in last year's SNA as a key example of a high impact intervention for secondary prevention approach – this is now being implemented in Bedfordshire. Given that violence and sexual offences generally occur more in May, June, and July than other months of the year, the VERU and/or partners should consider wrapping the commissioning process in/by April.

#### 10. Evaluating funded interventions and projects

The VERU, SVD specified authorities and partners should aim to implement rigorous, evidence-based impact evaluations of funded community projects aimed at reducing or preventing violence and exploitation. This could include both qualitative and quantitative evaluation. Evaluating community interventions within the UK is extremely important, to add to the evidence base. Evaluating prevention interventions could also Improve our knowledge and understanding of the role of specific risk and protective factors.

#### 11. More hotspot policing

The Police should do more hotspot policing. It is acknowledged that hotspot policing is already happening. However, more of police presence in hotspots identified in this SNA, especially in the town centres and during the night, is recommended. This is based on the evidence that hotspot policing has been shown to have high impact on violence (reference section 6.2) and residents' feedback (from some of the results of the community surveys – see section 4) show their near universal call for more police presence in the identified hotspots (especially the town centres) to feel safe.

#### 12. More street lighting and CCTVs

The local councils should investigate and, where needed, provide more street lighting and CCTVs. This is based on the premise that, according to the College of Policing Crime Reduction Toolkit, there is very strong evidence that street lighting works as one of the prevention approaches to violence (see section 6.2) and residents feel unsafe in certain areas because of lack of street lighting (see section 4). In addition, the residents (based on the survey results discussed in section 4) feel more CCTVs will help keep their areas safer though the Youth Endowment Fund toolkit currently rates CCTVs as being relatively low impact and more expensive to implement (based on current evidence).

#### 13. Better use of geodemographic data resources

Partners should consider acquiring and/or using geodemographic data resources for better targeted work. Some references were made to Experian's Mosaic in this SNA. But the Bedfordshire Fire & Rescue Service and the Bedfordshire Police currently now have the CACI's Acorn geodemographic data resources and can be deployed collaboratively for better analytical insights and targeted interventions. For instance, though there seems to be no current evidence for media campaigns as a prevention intervention (see section 6.2), a well-designed and targeted media campaign (with the aid of the geodemographic resource) could work (without contravening another, previous, recommendation).

#### 14. Moving towards an integrated data infrastructure

There are multiple individual sources of data providing a glimpse of violence and exploitation across Bedfordshire from individual services' purview. However, linked data is required to triangulate the information and gain a deeper understanding of hotspot areas and the cohorts affected (victims and offenders). Therefore, it is recommended that the VERU and partners should move closer to developing an integrated data infrastructure akin to the "Thames Valley Together" solution implemented in the Thames Valley Police Force area by their VRU.

#### 15. DIGVERB and data sharing

Pending the implementation of an integrated data infrastructure, the Data and Intelligence Group on Violence and Exploitation Reduction in Bedfordshire (DIGVERB) should be strengthened. The convener of the SVD in Bedfordshire has strengthened DIGVERB with the use of the powers granted by the SVD to improve prompt data sharing across relevant partner agencies in Bedfordshire. The existing Data Sharing Agreement (DSA) for the group and a separate Information Sharing Agreement (with the Ambulance Service and the local hospitals for the A&E data) should be reviewed, strengthened, and (where appropriate) expanded to

(and/or signed by) other partners to gain more local insight. A single DSA that covers sharing of all relevant data is preferable, more efficient and should be pursued.

#### 16. Routine use and appreciation of multi-service data

Partners should embed the use of intelligence and analytical insights into everyday work, and support and value linking various datasets between multiple agencies for a more holistic insight. These should include (but not limited to): social care services, acute healthcare, mental health services (including community mental health services), police, probation, youth offending services, education, adult care, and safeguarding team.

#### 17. Community safety survey co-ordination

The three local CSPs should aim to co-ordinate and conduct their community safety surveys together. This will allow for the possibility of having the same set of survey questions for comparison and benchmarking purposes, better standardisation of their approaches, reduced susceptibility to any staff absences in any of the local CSPs and getting more value for potentially reduced costs. The community surveys are an important source of information regarding public perceptions of violence and exploitation, but they currently appear dissimilar from place to place. Preliminary talks have started regarding this recommendation in the last year, and this should be progressed to a good and logical conclusion.

#### 18. Strategy refresh/development

The VERU and SVD specified authorities should consider the key findings from this SNA to refresh the strategic objectives for the Bedfordshire VERU, as necessary. The current VERU strategy is for 5/6 years (2020 – 2025) and may not substantially change. However, a refresh or redevelopment of the strategy is due within the next year and this SNA should form the basis for refreshing or redeveloping the strategy, which is also required under the Serious Violence Duty. It is recommended that the VERU strategy and the SVD strategy should also be a combined strategy, like the approach of having just this SNA to fulfil both requirements of the VERU and SVD. In addition, partners may also want to refresh/develop their own strategies based on the findings in this report.

#### 19. Other recommendations

Quite a few problem profiles and needs assessments have been completed in recent years by the VERU and partners (Bedfordshire Police, Public Health, etc.) covering different aspects and drivers of violence and exploitation in Bedfordshire. These have all been referenced in this SNA. Each of them has multiple recommendations. The key recommendations from that

body of knowledge have been adopted by this SNA and appropriate partners should implement them. See some of these recommendations from Appendix 5 to Appendix 7.

#### 20. More in-depth recording for attempted murder crimes

As an example of the previous recommendation, one of the recommendations from other relevant partners' pieces of work is for the Police to consider recording Attempted Murders in the same depth as Homicides. This will help to further understand how drugs and alcohol influence these crimes.

#### 1. INTRODUCTION

Violence and exploitation are key public health issues influencing the health and wellbeing of populations and leading to significant inequalities within populations. Violence and exploitation can have an impact right across the life course, with potentially devastating consequences. Whilst many people survive their experience of violence and/or exploitation, the impact that it has on their physical and mental health and wellbeing can be long lasting and severe.

The World Health Organisation (WHO) defines violence as "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." In addition to the global WHO definition, the local (Bedfordshire) partnership defines serious violence as "the intentional use of physical force or power to threaten or harm others (including young people) that either results in or has a high likelihood of resulting in serious injury".

In April 2018, the Serious Violence Strategy (published by the Home Office<sup>3</sup>), includes the following types of crime within the strategy: "specific types of crime such as homicide, knife crime, and gun crime and areas of criminality where serious violence or its threat is inherent, such as in gangs and county lines drug dealing. It also includes emerging crime threats faced in some areas of the country such as the use of corrosive substances as a weapon".

Tackling serious violence is a global priority. The 16<sup>th</sup> global Sustainable Development Goal (SDG) is to "promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels."<sup>4</sup> Overall, four of the SDG goals refer to tackling violence specifically, and a further seven goals address risk factors related to violence<sup>5</sup>.

Crucially, evidence suggests that violence is "preventable, not inevitable". Though drivers and root causes of violence and exploitation are extremely complex, often interacting and

<sup>&</sup>lt;sup>2</sup> World Health Organisation. World report on violence and health. Vol. 51, Journal Medical Libanais. 2002

<sup>&</sup>lt;sup>3</sup> Home Office UK. Serious Violence Strategy. 2018;(April):111. Available from: https://www.gov.uk/government/publications/serious-violence-strategy

<sup>&</sup>lt;sup>4</sup> Cabinet Office, Department for International Development. Implementing the Sustainable Development Goals [Internet]. Available from:

https://www.gov.uk/government/publications/implementing-the-sustainable-development-goals/implementing-the-sustainable-development-goals--2

<sup>&</sup>lt;sup>5</sup> Public Health England. A whole-system multi-agency approach to serious violence prevention A resource for local system leaders in England About Public Health England. 2019.

overlapping with one another, addressing them could help to improve health and wellbeing across our communities, and result in additional economic and societal benefits<sup>6</sup>.

In August 2019, the Bedfordshire Office for Police and Crime Commissioner (OPCC) was awarded funding to set up a Violence Reduction Unit (VRU). VRUs are multi-agency units, bringing together partners across the county to tackle and prevent serious violence. Since its full operational take-off in 2020, the Bedfordshire Violence and Exploitation Reduction Unit (VERU) has been working with partner agencies to prevent and reduce violence and exploitation across Bedfordshire by taking a whole systems multi-agency approach to violence and exploitation. The VERU and its partners aim to gain a deeper understanding of the drivers of violence and exploitation and how it can be prevented at a place-based level.

Furthermore, in January 2023, the government launched the Serious Violence Duty (SVD). The SVD is a key part of the government's programme of work to collaborate and plan to prevent and reduce serious violence: taking a multi-agency approach to understand the causes and consequences of serious violence, focusing on prevention and early intervention, and informed by evidence. For further information, see the Home Office's SVD Guidance<sup>7</sup>. The OPCC is the convener of the SVD in Bedfordshire.

#### 1.1 Purpose of the SNA

In line with the WHO model for violence prevention (see Figure 1), the Home Office Grant Funding requires the Bedfordshire VERU (and other VRUs) to produce a Strategic Needs Assessment (SNA), which identifies the drivers of serious violence in the local area and the cohorts of people most affected. In addition, the SVD (which is set in law<sup>8</sup>) embeds a public health approach to violence prevention and requires the specified authorities within a local government area to publish an SNA (as one of the key requirements under the Duty).

Therefore, since the purpose and content of the SNA required from the VERU and under the SVD are similar, it was locally agreed to have a combined SNA that fulfils both requirements.

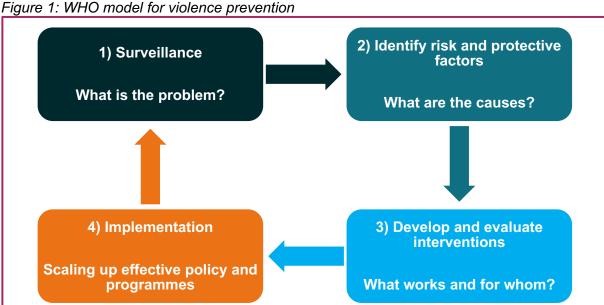
A strategic need assessment (SNA) systematically assesses the needs of a specified population. The primary aim of the SNA is to improve the health and wellbeing of a specific

<sup>&</sup>lt;sup>6</sup> Public Health England. A whole-system multi-agency approach to serious violence prevention A resource for local system leaders in England About Public Health England. 2019.

<sup>&</sup>lt;sup>7</sup> https://www.gov.uk/government/publications/serious-violence-duty/serious-violence-duty-accessible

<sup>&</sup>lt;sup>8</sup> See Chapter 1 Part 2 of the Police Crime Sentencing & Courts Act 2022 (https://www.legislation.gov.uk/ukpga/2022/32/contents/enacted)

population and it is used to guide resource allocation and service planning<sup>9</sup>. Using local data and intelligence to identify the current burden and risk of serious violence is a key element of the public health approach to violence prevention<sup>10</sup>. The SNA enables a local area to identify current and long-term issues relating to serious violence and the cohorts most vulnerable to involvement in their partnership area. This provides a greater understanding of established and emerging serious violence trends, priority locations or other high-risk issues.



Source: Whole System Multi-Agency Approach to Violence Prevention, PHE, 2019

Therefore, the objectives of this VERU & SVD SNA for Bedfordshire are to:

- Clarify the terminology and definitions around violence and serious violence.
- Provide an epidemiology of violence and exploitation (by time, place, and person).
- Highlight the geographical patterns of violence and exploitation across Bedfordshire and "hot spot" areas.
- Act as a mini-compendium of all the recently completed problem profiles and needs assessments related to violence and exploitation in Bedfordshire.
- Provide a narrative around the interplay between different forms of violence.
- Describe the relationships between victims and offenders.
- · Highlight the experience of cohorts and inequalities.
- Describe the risk and protective factors related to violence and exploitation.

<sup>&</sup>lt;sup>9</sup> Guest C, Ricciardi W, Kawach I, Lang I. Oxford Handbook of Public Health Practice. 3rd ed. Oxford University Press:

<sup>&</sup>lt;sup>10</sup> Public Health England. A whole-system multi-agency approach to serious violence prevention A resource for local system leaders in England About Public Health England. 2019.

- Explore the perceptions and attitudes towards violence and exploitation across Bedfordshire.
- Outline the evidence for interventions relevant to the local need.
- Use the information identified to recognise areas for further research and/or analysis.
- Inform the Violence and Exploitation Reduction strategy for Bedfordshire and the action plan for the VERU and the SVD in Bedfordshire.

#### 1.2 Scope and Approach

The geographical focus of Bedfordshire mirrors the area covered by the Bedfordshire Police Force and the local unitary authorities of Bedford Borough Council, Central Bedfordshire Council, and Luton Borough Council.

The Home Office's Offence Classification Index<sup>11</sup> and the mapping between Home Office Offence Codes and police.uk's Categories<sup>12</sup> have been used to determine the main crime types of focus in this SNA. The focus of this needs assessment is mainly "Violence and Sexual Offences" crime category (as specified by police.uk). This crime category includes the offence groups and subgroups from the Home Office's Classification Index in Table 1.

Table 1: Offence groups and subgroups included in the "Violence and Sexual Offences" crime

category (as specified by police.uk)

| Offence Group               | Offence Subgroup                                   |
|-----------------------------|--|
| Violence against the person | Homicide   |
|                             | Violence with injury                               |
|                             | Violence without injury                            |
|                             | Death or serious injury caused by unlawful driving |
|                             | Stalking and harassment                            |
| Sexual offences             | Rape   |
|                             | Other sexual offences                              |

Source: Home Office's Classification Index

However, because of the inclusion of other types of crime in the Serious Violence Strategy<sup>13</sup>, some related crime categories (especially "Drugs") and child exploitation are also covered in

<sup>&</sup>lt;sup>11</sup> Offence classification index (publishing.service.gov.uk) – accessed 6<sup>th</sup> December 2022

<sup>&</sup>lt;sup>12</sup> About police.uk crime data | Police.uk (www.police.uk) – accessed 16<sup>th</sup> February 2024

Home Office UK. Serious Violence Strategy. 2018;(April):111. Available from: https://www.gov.uk/government/publications/serious-violence-strategy

this SNA. The Drugs crime category includes both Possession of drugs and Trafficking of drugs offence subgroups.

This SNA is an epidemiologically based needs assessment, which combines the epidemiology of violence and exploitation (by time, place, and person) with an assessment of the evidence for potential interventions at a high level. The content has been derived from multiple sources mostly via the VERU-led Data and Intelligence Group on Violence and Exploitation in Bedfordshire (DIGVERB), which was created and developed as a technical multi-service group. The DIGVERB was set up to help fill the gaps that were found – and implement some of the recommendations made – in the 2020 SNA related to multi-service data. Whilst the aims and responsibilities of DIGVERB are detailed in an agreed Terms of Reference, the DIGVERB works towards achieving 3 key aims:

- 1. Bringing all relevant partner agencies in Bedfordshire together and adopting a collaborative approach in data and intelligence.
- 2. Overcoming the barriers to effective data and information sharing.
- 3. Creating a Common Recognised Information Picture (CRIP) a "one version of the truth", which can be used to mobilise effective preventative and operational interventions.

Therefore, where possible, analytical products (such as needs assessments, problem profiles, etc.) completed by member agencies of the DIGVERB underpinned parts of this SNA. In addition, data from local, restricted, and public sources were analysed and information & evidence from authoritative sources were utilised to meet the objectives of this SNA.

An SNA is usually expected to first describe the socio-demographic characteristics of the population in the area to serve as context in assessing the current and future health, care and wellbeing needs about violence in the local area<sup>14</sup>. Therefore, the next section (Section 2) provides a Demographic Overview of Bedfordshire before Section 3 presents a profile of Violence and Exploitation in Bedfordshire. Section 4 uses local community safety surveys to consider the Perceptions of violence and exploitation in each of the three local authority areas of the county. Section 5 briefly touches on Risk and Protective Factors for Violence and Exploitation. Section 6 considers the various approaches used for Preventing Violence and Exploitation. Finally, section 7 provides Recommendations arising from conducting this SNA.

\_

<sup>&</sup>lt;sup>14</sup> <u>Serious Violence Duty: strategic needs assessment guidance - GOV.UK (www.gov.uk)</u>

#### 2. DEMOGRAPHIC OVERVIEW OF BEDFORDSHIRE

Bedfordshire is a ceremonial and historic county in the East of England. Three unitary local councils cover the area: Bedford Borough Council, Central Bedfordshire Council, and Luton Borough Council. Bedfordshire is bordered by Cambridgeshire to the east and northeast, Northamptonshire to the north, Buckinghamshire (including Milton Keynes) to the west and Hertfordshire to the southeast and south (Figure 2).

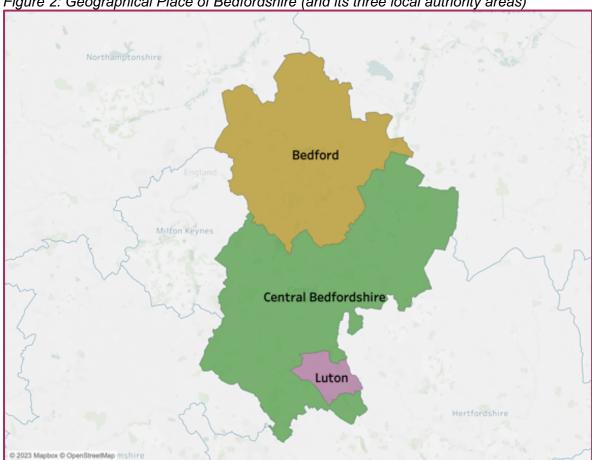


Figure 2: Geographical Place of Bedfordshire (and its three local authority areas)

Data Source: Office for National Statistics (ONS) Open Geography Portal<sup>15</sup>

Bedfordshire is the thirteenth most densely populated county of England's 48 ceremonial counties since 1997. Over half of the population of the county live in the two largest built-up areas: Luton and Bedford.

<sup>&</sup>lt;sup>15</sup> Office for National Statistics. Open Geography portal [Internet]. Available from: https://geoportal.statistics.gov.uk/

#### 2.1 Population size and structure

According to the Office for National Statistics (ONS) 2022 Mid-Year Population Estimates<sup>16</sup>, the total resident population<sup>17</sup> in Bedfordshire is 715,940. *Figure 3* shows the structure and breakdown of the current (mid-2022) population of Bedfordshire by gender and five-year age bands, compared to the national (England) and regional (East of England) population.

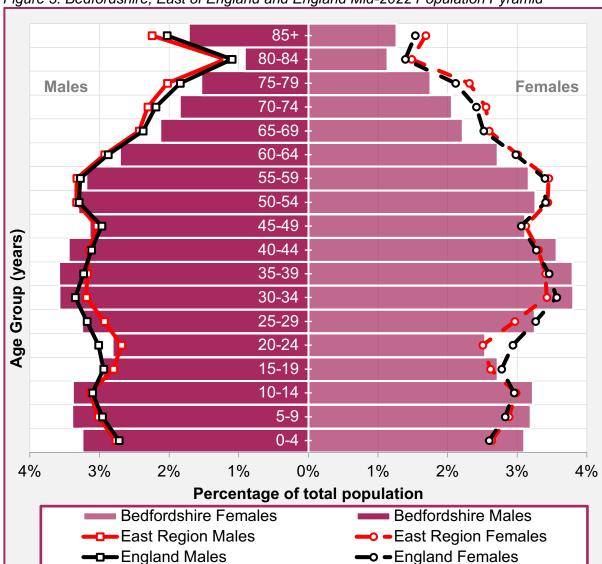


Figure 3: Bedfordshire, East of England and England Mid-2022 Population Pyramid

Data Source: Office for National Statistics Mid-2022 Population Estimates

<sup>16</sup> Source: Office for National Statistics (ONS). Available from: <a href="https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/estimatesofthepopulationforenglandandwales">https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/estimatesofthepopulationforenglandandwales</a>

<sup>&</sup>lt;sup>17</sup> Anyone who is resident and had stayed or intends to stay for a period of 12 months or more OR has a permanent address and is outside the UK and intends to be outside the UK for less than 12 months. These include people usually resident in the area, students at their term time address and long-term migrants (i.e. Those coming to the United Kingdom (UK) for more than a year).

It shows that Bedfordshire proportionally has more children aged 14 years and under and more people in their 30s and early 40s compared to the East Region and England. Within Bedfordshire, however, Luton generally has an even younger population when compared to the other two boroughs.

The resident population of Bedfordshire has grown by about 14% in a decade (from 625,741 in 2012 to 715,940 in 2022). Bedford Borough's population grew the most within the decade – about 17% percentage increase (from 160,344 in 2012 to 187,466 residents in 2022). The population grew within the decade by 16% in Central Bedfordshire (from 259,524 in 2012 to 301,501 in 2022) and by 10% in Luton (from 205,873 in 2012 to 226,973 in 2022). In addition, Figure 4 which presents the percentage population change by age group within the decade, shows that the population of all the age groups, except the population of 20–24 and 45–49 quinary age groups, have grown in Bedfordshire.

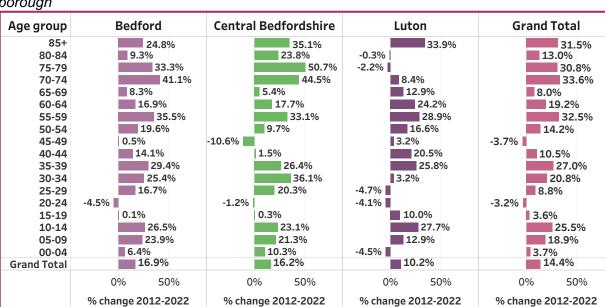


Figure 4: Percentage change of the population from 2012 to 2022, by quinary age group and borough

Data Source: Office for National Statistics Mid-2012 and Mid-2022 Population Estimates

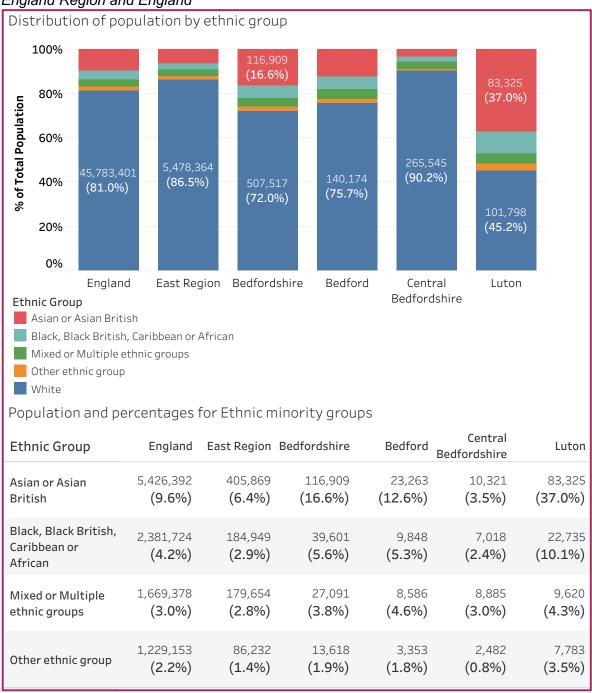
# 2.2 Ethnicity

Figure 5 presents an overview of the distribution of the population by ethnic group, according to the 2021 census<sup>18</sup>. With over a quarter of the population (28%) from a Black, Asian, and

<sup>&</sup>lt;sup>18</sup> Office for National Statistics. Nomis Offical Census and Labour Market Statistics [Internet]: https://www.nomisweb.co.uk/query/construct/components/stdListComponent.asp?menuopt=12&subcomp=100

Minority Ethnic (BAME) group, Bedfordshire has more BAME people compared to England and East of England region. However, this is mainly due to the diverse population in Luton where over half of the population (55%) are from a BAME group and almost four in every ten people are Asian or Asian British (see Figure 5). The least diverse borough in Bedfordshire is Central Bedfordshire where about 9 in every 10 people are from a white ethnic group.

Figure 5: 2021 Census Population, broken down by White and BAME (Black and Minority Ethnic) groups, in Bedford Borough, Central Bedfordshire, Luton, Bedfordshire, East of England Region and England



Data Source: Census 2021, Office for National Statistics

## 2.3 Population density

Lower super output areas (LSOAs) are small geographical areas designed to be of a similar population size with an average of approximately 1,500 residents or 650 households<sup>19</sup>. The majority of small areas in Bedford Borough and Central Bedfordshire Council areas are relatively sparsely populated, with less than 529 people estimated to be living within every square kilometre in many parts of the county (see *Figure 6*).

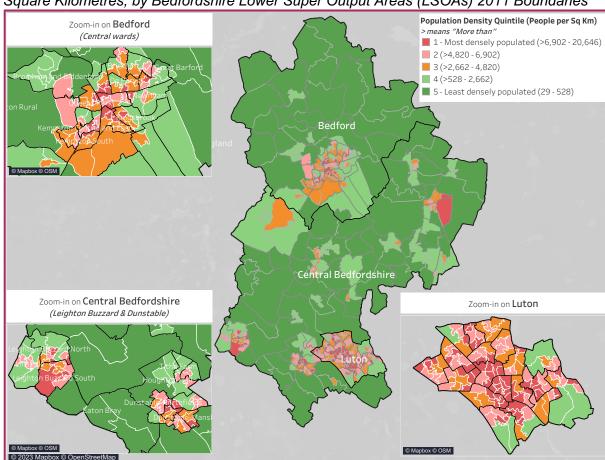


Figure 6: Population Density, by Census 2021 Population Density Quintile, Persons per Square Kilometres, by Bedfordshire Lower Super Output Areas (LSOAs) 2011 Boundaries

Data Source: Office of National Statistics (ONS) Census 2021 Population Density by 2011 Lower Layer Super Output Areas in England

The most densely populated areas in Bedfordshire (with over 6,902 people living in every square kilometre) are in Luton and pockets of areas in central areas of Bedford and in the south of Central Bedfordshire (especially areas in Leighton Buzzard and Dunstable) - see

<sup>&</sup>lt;sup>19</sup> In the 2011 version, there are 381 of these small areas in Bedfordshire (103 in Bedford, 157 in Central Bedfordshire and 121 in Luton). In 2021 version, there are 417 LSOAs in Bedfordshire (117 in Bedford, 175 in Central Bedfordshire and 125 in Luton). The 2011 version is used in this document except otherwise stated.

Figure 6. As a borough, the number of people living in every square kilometre in Luton is 5,196, Central Bedfordshire is 411 and Bedford Borough is 389.

#### 2.4 **Deprivation**

The Index of Multiple Deprivation (IMD) reflects a relative measure of deprivation of small areas (LSOAs) across England based on seven domains of deprivation<sup>20</sup>. Figure 7 maps the IMD 2019<sup>21</sup> data for Bedfordshire based on the quintile<sup>22</sup> of each of the small areas in England.

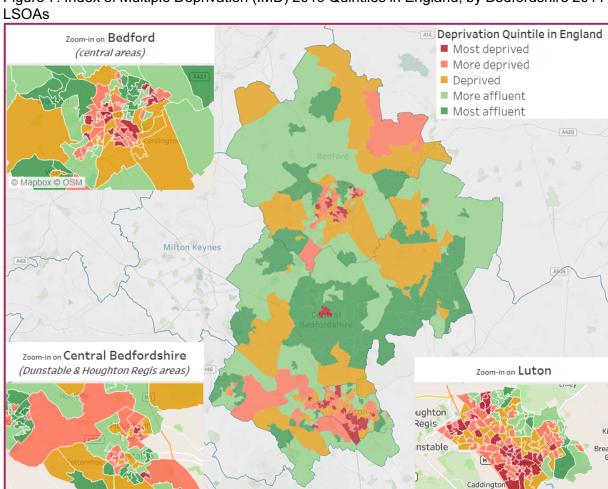


Figure 7: Index of Multiple Deprivation (IMD) 2019 Quintiles in England, by Bedfordshire 2011

Data source: Index of Multiple Deprivation (IMD) 2019; Ministry of Housing, Communities and Local Government

<sup>&</sup>lt;sup>20</sup> These seven domains include deprivation arising from income, employment, education/skills/training, health & disability, crime, barriers to housing and services and the living environment.

<sup>&</sup>lt;sup>21</sup> Ministry of Housing Communities and Local Government. National Statistics- English indices of deprivation 2019 [Internet]. 2019. Available from: https://www.gov.uk/government/statistics/englishindices-of-deprivation-2019

 $<sup>\</sup>frac{\overline{}^{22}}{}$  This represents 20% of a given population. The quintiles are derived when a population is ranked in order of deprivation and split into 5 groups - from the most deprived 20% to the least deprived 20%.

It shows that Bedfordshire is generally a relatively affluent area. In fact, about a quarter (25.7%) of the small areas in Bedfordshire are in the most affluent fifth in England (see *Table* 2). However, most of the affluence is in Central Bedfordshire.

Table 2: Count and proportion of total count of Bedfordshire 2011 LSOAs, by Index of Multiple

Deprivation (IMD) 2019 Quintiles in England, by Borough

|               | Bedford     | Central<br>Bedfordshire | Luton       | Grand Total  |
|---------------|-------------|-------------------------|-------------|--------------|
| Most affluent | 19 (5.0%)   | 74 (19.4%)              | 5 (1.3%)    | 98 (25.7%)   |
| More affluent | 27 (7.1%)   | 38 (10.0%)              | 19 (5.0%)   | 84 (22.0%)   |
| Deprived      | 20 (5.2%)   | 25 (6.6%)               | 28 (7.3%)   | 73 (19.2%)   |
| More deprived | 23 (6.0%)   | 17 (4.5%)               | 36 (9.4%)   | 76 (19.9%)   |
| Most deprived | 14 (3.7%)   | 3 (0.8%)                | 33 (8.7%)   | 50 (13.1%)   |
| Grand Total   | 103 (27.0%) | 157 (41.2%)             | 121 (31.8%) | 381 (100.0%) |

Data source: Index of Multiple Deprivation (IMD) 2019; Ministry of Housing, Communities and Local Government

Conversely, Figure 7 and Table 2 show that about 13% of the small areas in Bedfordshire are in the most deprived quintile in England. These are mainly located in Luton (see Figure 7 and Table 2). However, there are also pockets of deprivation in Bedford Borough (especially in some central wards) and Central Bedfordshire (in Flitwick and southern areas of the borough) – see Figure 7 and Table 2.

A detailed look at the demographics of Bedfordshire is beyond the scope of this document. See data sources used for the overview provided above and the Joint Strategic Needs Assessments (JSNA) for each of the three local council areas for more information<sup>23</sup>.

Central Bedfordshire JSNA (https://bmkjsna.org/central-bedfordshire/)

Luton JSNA

<sup>&</sup>lt;sup>23</sup> Bedford JSNA (<u>https://bmkjsna.org/bedford/</u>)

# 3. VIOLENCE AND EXPLOITATION IN BEDFORDSHIRE

This section provides a high-level identification of the scale of the problem of violent crime and exploitation in Bedfordshire. It provides information that may be useful for providing a focus for further analytic assessment, prioritising operational work, identifying intelligence gaps, highlighting opportunities for prevention and enforcement, and providing justification for actions. Two broad categories of data were used to achieve this. One is the Police Recorded Crime data both from the publicly available police.uk data about crime and policing<sup>24</sup> and the local Bedfordshire Police data. The other is Health Data from the National Health Service (NHS) Hospital Episodes Statistics (HES) and the East of England Ambulance Service. Each data category or source has different strengths and limitations but together they provide a more comprehensive picture of violence than could be obtained from either series alone.

According to the Home Office<sup>25</sup>, interpreting police recorded crime statistics and determining trends over time is complex and is often misunderstood for several reasons. Firstly, there have been changes and improvements in the way that police forces record crime and policing activity. Secondly, there has been an increase in the number of victims reporting crimes that are often "hidden," such as sexual abuse. This has meant that there has been an increase in the number of recorded crimes overall, independent of the trend in the number of crimes being carried out. Therefore, pooled data (for multiple years) is used wherever possible.

Hospital Episode Statistics (HES) can be used to understand the epidemiology of violence related assaults (including sexual violence) presenting to hospital. HES data on all 'ordinary'26 inpatient admissions for Bedfordshire, for the most recent 10 financial years for which data is fully available (2011/12 – 2020/21) was used mainly because of relatively small numbers, particularly at sub-borough geographical levels. In addition, data on A&E attendances related to violence and sexual offences by residents of Bedfordshire after assault from 2011/12 to 2020/21 was extracted although the data for the most recent 5-year period for (2016/17-2020/21) was mostly used. Work is underway locally to transition from the use of HES data to the locally available Secondary Uses Service (SUS)<sup>27</sup> data in future iterations of this SNA.

\_

<sup>&</sup>lt;sup>24</sup> The Home Office publish publicly available open data on the data.police.uk site. The data is provided by the 43 geographic police forces in England and Wales, the British Transport Police, the Police Service of Northern Ireland and the Ministry of Justice.

<sup>&</sup>lt;sup>25</sup> Home Office UK. Serious Violence Strategy. 2018;(April):111. Available from: <a href="https://www.gov.uk/government/publications/serious-violence-strategy">https://www.gov.uk/government/publications/serious-violence-strategy</a>

<sup>&</sup>lt;sup>26</sup> Where the patient classification (CLASSPAT) field is 1 (ordinary admission). It excludes day case, regular attender and other admissions.

<sup>&</sup>lt;sup>27</sup>The single, comprehensive repository for healthcare data in England which enables a range of reporting and analyses to support the NHS in the delivery of healthcare services. More timely than HES.

The ambulance data used is based on a local Information Sharing Agreement signed with the East of England Ambulance Service. This is for the provision of information relating to assaults in Bedfordshire on rolling 12-month period. Therefore, the ambulance data used is limited to 2023 calendar year (January to December 2023).

Furthermore, a variety of other data sources have been used to provide a local picture of violence and exploitation across Bedfordshire. These include locally produced profiles, needs assessments, and nationally curated data sources. As the detailed information is available elsewhere, and some of the information is classified, only a high-level summary is presented in this section<sup>28</sup>.

#### 3.1 Violence and Sexual Offences

## 3.1.1 Police-recorded crimes

According to the open (police.uk) data, there were 313,497 crimes reported by the Bedfordshire Police over the most recent 5-year period (2019-2023). The distribution of these crimes by borough is presented in *Table 3*.

Table 3: Number and percentages of crimes or offences reported by the Bedfordshire Police

to the Home Office, 2019-2023 (five-year) pooled data

| Area                      | No. of crimes | % of Total |
|---------------------------|---------------|------------|
| Bedford Borough           | 85,166        | 27.2%      |
| Central Bedfordshire      | 100,748       | 32.1%      |
| Luton Borough             | 112,298       | 35.8%      |
| Out of area/unknown       | 15,285        | 4.9%       |
| Bedfordshire Police Force | 313,497       | 100%       |

Data source: data.police.uk

The number of crimes and offences which occurred in Bedfordshire and were reported by the Bedfordshire Police Force has been reducing over the 5-year period (see Figure 8). Therefore, though the count of violence and sexual offences has also been falling over the period, the proportion of violence and sexual offences (out of all reported crimes) has marginally increased – about a third of all reported crimes (33%) were violence and sexual offences in 2023, compared to 27% in 2019 (see Figure 8). As previously stated, the broad (police.uk) category of "violence and sexual offences" covers many offences that include violence with

<sup>&</sup>lt;sup>28</sup> If further information is required, please contact the author of the report or contact: <u>VERU@beds.police.uk</u>

injury, violence without injury, homicide, death, or serious injury caused by illegal driving, rape, stalking and harassment, and other sexual offences<sup>29</sup>.

Crime type (group) 70K ■ Violence and sexual offences Possession of weapons 66,794 Drugs 65K 63,507 Burglary & Robbery 61,663 ■ Bicycle theft & Theft from the person 59.992 Shoplifting 60K Other theft Criminal damage and arson 55K Vehicle crime Public order Other crime 19,267 (32.1%) 50K Anti-social behaviour 46.256 323 (0.5%) 1,642 (2.6%) 45K 6,029 (9.0%) 4,116 (6.5%) 40K 1,635 (2.4%) 1,379 (2.2%) 3,046 (4.9%) 3,502 (5.2%) **Conut** 35K 2,516 (4.0%) 3,067 (5.1%) 993 (1.6%) 2,986 (4.8%) 1,212 (2.0%) 3,832 (6.0%) 5,181 (7.8%) 2,832 (4.7%) 3,674 (6.0%) 494 (1.1%) 1,352 (2.9%) 30K 4,932 (7.8%) 4,597 (7.7%) 2,273 (4.9%) 5,408 (8.1%) 4,651 (7.5%) 725 (1.6%) 25K 2,578 (5.6%) 4,396 (7.3%) 5,623 (8.9%) 4,581 (7.4%) 6,547 (9.8%) 3,656 (7.9%) 20K 5,065 (8.4%) 3,587 (7.8%) 5,341 (8.7%) 1,021 (1.6%) 15K 994 (1.6%) 3,901 (8.4%) 943 (1.4%) 1,116 (1.9%) 10K 851 (1.8%) 15,100 (23.8%) 13,954 (22.6%) 12,758 (19.1%) 11,022 (18.4%) 5K 8,155 (17.6%) OΚ 2019 2020 2021 2022 2023

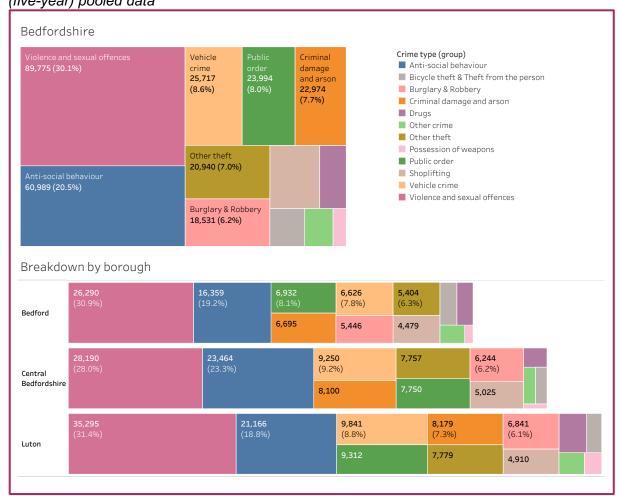
Figure 8: Number and percentages of crimes or offences reported by the Bedfordshire Police to the Home Office and deemed to have occurred in Bedfordshire, by crime category, 2019-2023

Data source: data.police.uk

Over the 5-year period, about 3 in 10 crimes which occurred in Bedfordshire and were handled by the Bedfordshire Police Force were violence and sexual offences (89,775/298,212; 30%). This proportion is broadly similar in the three individual boroughs (see *Figure* 9).

<sup>&</sup>lt;sup>29</sup> For more information, see <u>what-do-the-crime-categories-mean</u> and download a file on the complete mapping between Home Office Offence Codes and the Categories on <u>About police.uk crime data |</u> <u>Police.uk (www.police.uk)</u>.

Figure 9: Number and percentages of crimes or offences reported by the Bedfordshire Police to the Home Office and deemed to have occurred in Bedfordshire, by Borough, 2019-2023 (five-year) pooled data



Data source: data.police.uk

Figure 9 additionally shows that there was a higher count of violence and sexual offences in Luton than the two other boroughs, followed by Central Bedfordshire. Figure 10, which provides a breakdown of the count by LSOA, shows that the highest counts (quintile) of violence and sexual offences are found in the:

- South-central wards and other pockets (such as in Sharnbrook, Riseley, Wyboston and Wilshamstead wards) of Bedford Borough.
- South-western areas (in the Dunstable, Leighton Buzzard, Houghton Hall and Tithe Farm areas/wards) and some northern pockets in Sandy and Biggleswade North of Central Bedfordshire.
- Southern wards and other pockets spread across the north-western wards of Luton.

See Table 4 for full list and the number of LSOAs per ward.

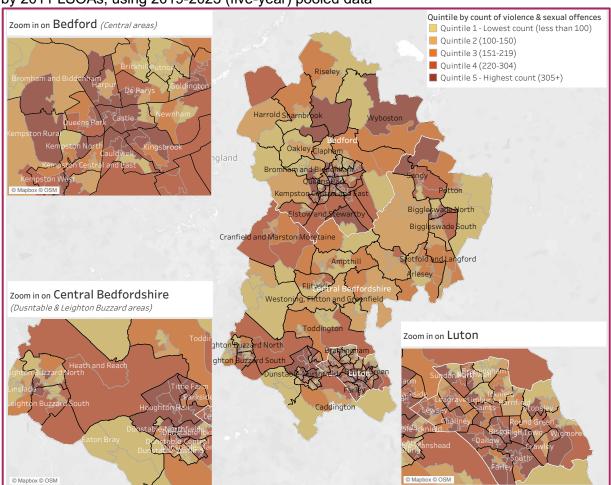


Figure 10: Quintiles by count of police-recorded violence and sexual offences in Bedfordshire, by 2011 LSOAs, using 2019-2023 (five-year) pooled data

Data source: data.police.uk

Table 4: Number of LSOAs with the highest counts (quintile) of violence and sexual offences in Bedfordshire by ward and borough, using 2019-2023 (five-year) pooled data.

| Borough                 | Ward (No. of LSOAs in the highest count quintile)  |
|-------------------------|--|
| Bedford                 | Bromham and Biddenham (1); Castle (3); Cauldwell (3); De Parys (1); Goldington (1); Harpur (3); Kempston Central and East (1); Kempston West (1); Kingsbrook (3); Queens Park (1); Sharnbrook/Riseley (1); Wilshamstead (1); Wootton (1) |
| Central<br>Bedfordshire | Biggleswade North (2); Dunstable-Icknield (2); Dunstable-Manshead (1); Dunstable-Northfields (2); Houghton Hall (5); Leighton Buzzard North (2); Leighton Buzzard South (1); Sandy (2); Tithe Farm (1)                                   |
| Luton                   | Biscot (5); Challney (2); Crawley (1); Dallow (5); Farley (4); High Town (4); Leagrave (1); Lewsey (2); Limbury (1); Northwell (2); Saints (2); South (5); Stopsley (1); Sundon Park (1); Wigmore (1)                                    |

Data source: data.police.uk

In addition, *Figure 10* shows that the LSOAs with the highest counts (quintile) of violence and sexual offences mostly align with the more deprived areas of the county (compare Figure 7 with *Figure 10*) and these 76 LSOAs alone (which represents 20% of all 381 LSOAs in

Bedfordshire) constitute almost half (46%) of the total violence and sexual offences in the county within the period. The count of these 76 LSOAs by ward is in Table 4.

However, the publicly available data from data.police.uk does not contain sufficient information to put the violence and sexual offences data in the context of the demographics of the population and derive more epidemiological information. Therefore, data from the local police (Athena) database was used. This enabled the possibility of age-standardisation<sup>30</sup> of the data and direct comparison among areas. The standardisation was done using the location (LSOA) of the crime and the victims' age alone (as no offenders were recorded for almost 30% of the included violence and sexual offences). Based on this, the locally calculated 5-year (2019-2023) directly standardized rate (DSR) for Police-reported violence and sexual offences for Bedfordshire is 2,876.4 per 100,000. With the use of 95% confidence intervals (CI), the higher rates for Bedford and Luton (compared to the Bedfordshire rate) were found to be statistically significant and the rate for Central Bedfordshire is significantly lower than Bedfordshire and the two other boroughs (see Table 5).

Table 5: Directly age-standardised rates (DSRs) of Police-recorded violence and sexual offences, by borough, 5-year (2019-2023) pooled data

| Area                 | DSR per<br>100,000 | Lower CI | Upper CI | Compared to Bedfordshire DSR |
|----------------------|--------------------|----------|----------|------------------------------|
| Bedford              | 3,377.0            | 3,360.5  | 3,393.6  | Significantly Higher         |
| Central Bedfordshire | 2,185.5            | 2,175.6  | 2,195.6  | Significantly Lower          |
| Luton                | 3,371.7            | 3,353.7  | 3,389.8  | Significantly Higher         |
| Bedfordshire         | 2,876.4            | 2,868.4  | 2,884.5  |                              |

Data source: Athena (for the Police data); and Office of National Statistics (ONS) mid-year estimates 2016-2020

The comparison of the DSRs of LSOAs (whether they are significantly higher, significantly lower, or similar) to the Bedfordshire rate is presented in Figure 11. Just over a quarter of the 381 LSOAs in Bedfordshire (n=107; 28%) were identified as having significantly higher rates than the Bedfordshire rate. They mostly align with the more deprived areas of the county. Moreover, Figure 12 shows that the rate of violence and sexual offences in Bedfordshire increases with deprivation. Where the deprivation level is known, the most deprived decile has a significantly higher rate (7,962 per 100,000) than other deciles and has a rate that is about six times that of the least deprived decile (1,314 per 100,000) – see Figure 12.

<sup>&</sup>lt;sup>30</sup> Directly age-standardisation using the European Standard Population as the reference population and the ONS population estimates by LSOA for the most recent 5 years (2016-2020) as the denominator

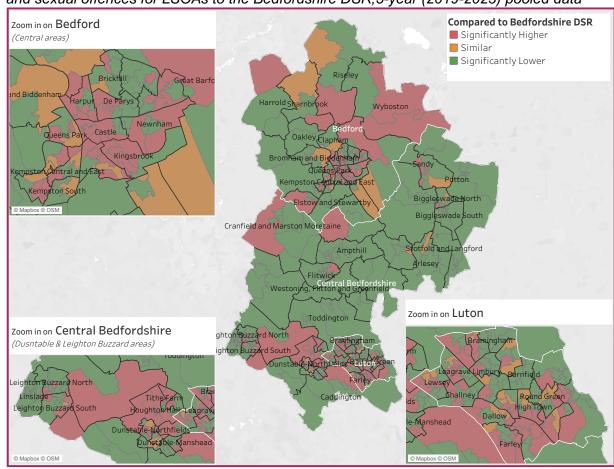


Figure 11: Comparison of directly age-standardised rates (DSRs) of Police-recorded violence and sexual offences for LSOAs to the Bedfordshire DSR,5-year (2019-2023) pooled data

Data source: Athena (for the Police data); and Office of National Statistics (ONS) mid-year estimates 2016-2020

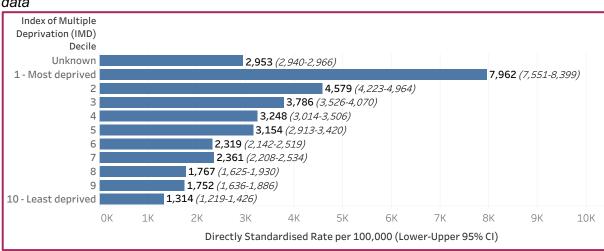


Figure 12: Bedfordshire directly age-standardised rates (DSRs) of Police-recorded violence and sexual offences by Index of Multiple Deprivation (IMD) decile, 5-year (2019-2023) pooled data

Data source: Athena (for the Police data); and Office of National Statistics (ONS) mid-year estimates 2016-2020

Targeting the small areas with significantly higher rates for the right interventions should reduce violence in the county.

Some other observations from the Athena data include the following:

- About 8% of the violence and sexual offences were related to alcohol.
- 2.2% were knife crimes and 0.2% were gun crimes.
- 2.9% were hate motivated: 2.1% were motivated by racial hate; 0.3% disability hate;
   0.2% religious hate; 0.4% sexual hate; and 0.1% transgender hate.
- About 6% were online-related crimes.
- About 17% of the offenders with recorded age were aged under 25 years old and about 7% of the offenders with recorded age were aged under children (aged under 18 years old).
- About 10% of the crimes were identified as serious youth violence (1% knife-related;
   0.1% gun-related; and 8.7% other).
- Over a third (35%) of the recorded violence and sexual offences were related to domestic abuse. Furthermore, Figure 13 presents the most relevant aggravating factors for the violence and sexual offences in Bedfordshire over the 5-year period, by keyword search. It shows that domestic abuse is the top aggravating factor.

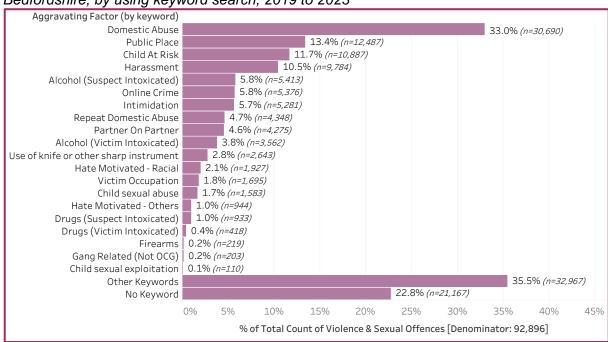


Figure 13: Top aggravating factors mentioned for violence and sexual offences in Bedfordshire, by using keyword search, 2019 to 2023

Data source: Athena

Public place, child at risk, harassment, alcohol (suspect intoxicated), online crime, intimidation, repeat domestic abuse, 'partner on partner', alcohol (victim intoxicated), and use of knife or other sharp instrument were the next top aggravating factors (after domestic abuse, and in that order) for violence and sexual offences in Bedfordshire (see Figure 13).

Figure 14 presents the distribution of the 5-year pooled Athena data by month and then by weekday and hour group. It suggests that there are relatively more violent and sexual crimes committed in May, June and July. In addition, Figure 14 shows that almost half (47%) of all these crimes occur at night (from 12 midnight to just before 4am).

Figure 14: Distribution of violence and sexual offences in Bedfordshire, by month & borough and by weekday & hour group, 2019 – 2023 (five-year) pooled data

| Distributio   | 9.1% Wight of Total Count 7.4% 9.1%                                      |   |  |  |  |   |   |   |
|---|--|---|--|--|--|---|---|---|
|   | Bedford E  | Borough   | Centra<br>Bedfords   |  | Luton Boroı  |   | Grand Tota  |   |
| January   | 2,116 (  | 8.0%)   | 2,259 (8.  | 1%)  | 3,035 (8.39  | %) 7  | ,410 (8.1%  | )   |
| February  | 1,977 (  | 7.4%)   | 2,117 (7.  | 5%)  | 2,725 (7.49  | %) ε  | ,819 (7.5%  | )   |
| March   | 2,178 (  | 8.2%)   | 2,401 (8.  | 6%)  | 3,125 (8.5%  | %) 7  | 7,704 (8.4%   | )   |
| April   | 2,193 (  | 8.2%)   | 2,219 (7.  | 9%)  | 2,817 (7.79  | %) 7  | 7,229 (7.9%   | )   |
| May   | 2,406 (  | 9.0%)   | 2,410 (8.  | 6%)  | 3,288 (9.09  | %) 8  | ,104 (8.9%  | )   |
| June  | 2,286 (  | 8.6%)   | 2,467 (8.  | 8%)  | 3,305 (9.09  | %) 8  | ,058 (8.8%  | )   |
| July  | 2,417 (  | 9.1%)   | 2,524 (9.  | 0%)  | 3,193 (8.79  | %) 8  | ,134 (8.9%  | )   |
| August  | 2,144 (  | 8.1%)   | 2,315 (8.  | 3%)  | 3,180 (8.79  | %) 7  | ,639 (8.4%  | )   |
| September   | 2,192 (  | 8.2%)   | 2,429 (8.  | 7%)  | 3,150 (8.69  | %) 7  | 7,771 (8.5%   | )   |
| October   | 2,339 (  | 8.8%)   | 2,445 (8.  | 7%)  | 3,137 (8.5%  | %) 7  | ,921 (8.7%  | )   |
| November  | 2,209 (  | 8.3%)   | 2,308 (8.  | 2%)  | 2,875 (7.89  | %) 7  | ,392 (8.1%  | )   |
| November  |  |   |  |  | 2.067/7.00   | v)   -  | 1 1 5 2 / 7 00/   | \   |
| December  Distributio   | 2,135 (i<br>n by weel  |   | 2,151 (7.<br>d time (ho  |  | 2,867 (7.89  | % of Tot  | 7,153 (7.8%<br>al Count   |   |
| December  |  |   |  |  | )  | , , , , , , , , , , , , , , , , , , ,   |   | 7.5%  |
| December  |  | k day and   |  | ur group)<br>Weel  | )  | % of Tot  |   | 7.5%  |
| December Distributio  | n by weel  | k day and   | d time (ho<br>Wednesday  | ur group)<br>Weel  | )<br>‹ Day   | % of Tot  | al Count  | 7.5%<br>Grand Total   |
| December  Distributio  Hour group  00:00 - 03:00  | n by weel<br>Monday  | k day and<br>Tuesday  | d time (ho<br>Wednesday  | ur group)<br>Weel<br>Thursday  | )<br>‹ Day<br>Friday   | % of Tot<br>0.4%<br>Saturday  | al Count<br>,<br>Sunday   | 7.5%<br>Grand Total<br>43,276   |
| December  Distributio  Hour group  00:00 - 03:00  hours   | n by weel<br>Monday<br>5,914   | k day and<br>Tuesday<br>5,815   | d time (ho<br>Wednesday<br>5,922   | ur group)<br>Weel<br>Thursday<br>5,708                                     | )<br>CDay<br>Friday<br>6,117                                     | % of Tot<br>0.4%<br>Saturday<br>6,842   | al Count Sunday 6,959   | 7.5%<br>Grand Total<br>43,276<br>46.6%  |
| December  Distributio  Hour group  00:00 - 03:00  hours  04:00 - 07:00  | n by weel  Monday  5,914 6.4%  | k day and<br>Tuesday<br>5,815<br>6.3%                                     | d time (ho<br>Wednesday<br>5,922<br>6.4%   | ur group)<br>Weel<br>Thursday<br>5,708<br>6.1%                             | )<br>CDay<br>Friday<br>6,117<br>6.6%                             | % of Tot<br>0.4%<br>Saturday<br>6,842<br>7.4%   | al Count Sunday 6,959 7.5%  | 7.5%  Grand Total  43,276  46.6%  2,871   |
| December  Distributio  Hour group  00:00 - 03:00  hours  04:00 - 07:00  hours   | n by weel  Monday  5,914 6.4%  348                                       | t day and  Tuesday  5,815  6.3%  335                                      | Wednesday<br>5,922<br>6.4%<br>340  | ur group)<br>Week<br>Thursday<br>5,708<br>6.1%<br>335                      | Oay<br>Friday<br>6,117<br>6.6%                                   | % of Tot<br>0.4%<br>Saturday<br>6,842<br>7.4%<br>565  | al Count  Sunday  6,959  7.5%                                       | 7.5%  Grand Total  43,276  46.6%  2,871  3.1%   |
| December  Distributio  Hourgroup  | Monday 5,914 6.4% 348 0.4%   | Tuesday<br>5,815<br>6.3%<br>335<br>0.4%                                   | Wednesday<br>5,922<br>6.4%<br>340<br>0.4%  | ur group) Week Thursday 5,708 6.1% 335 0.4%                                | Day<br>Friday<br>6,117<br>6.6%<br>346<br>0.4%                    | % of Tot<br>0.4%<br>Saturday<br>6,842<br>7.4%<br>565<br>0.6%  | al Count  Sunday  6,959  7.5%  602  0.6%                            | 7.5%  Grand Total  43,276  46.6%  2,871  3.1%  8,828                                  |
| December  Distributio  Hour group  00:00 - 03:00 hours  04:00 - 07:00 hours  08:00 - 11:00  | Monday 5,914 6.4% 348 0.4% 1,343   | Tuesday<br>5,815<br>6.3%<br>335<br>0.4%<br>1,305<br>1.4%<br>1,866         | Wednesday<br>5,922<br>6.4%<br>340<br>0.4%<br>1,320   | ur group) Week Thursday 5,708 6.1% 335 0.4% 1,318                          | Day<br>Friday<br>6,117<br>6.6%<br>346<br>0.4%<br>1,265           | % of Tot<br>0.4%<br>Saturday<br>6,842<br>7.4%<br>565<br>0.6%<br>1,203<br>1.3%<br>1,638                          | al Count  Sunday  6,959  7.5%  602  0.6%  1,075                     | 7.5%  Grand Total 43,276 46.6% 2,871 3.1% 8,828 9.5% 12,744                           |
| December  Distributio  Hour group  00:00 - 03:00 hours  04:00 - 07:00 hours  08:00 - 11:00 hours                                      | Monday 5,914 6.4% 348 0.4% 1,343 1.4%                                    | Tuesday<br>5,815<br>6.3%<br>335<br>0.4%<br>1,305<br>1.4%                  | Wednesday<br>5,922<br>6.4%<br>340<br>0.4%<br>1,320<br>1.4%                                   | ur group) Week Thursday 5,708 6.1% 335 0.4% 1,318 1.4%                     | C Day<br>Friday<br>6,117<br>6.6%<br>346<br>0.4%<br>1,265<br>1.4% | % of Tot<br>0.4%<br>Saturday<br>6,842<br>7.4%<br>565<br>0.6%<br>1,203<br>1.3%                                   | al Count  Sunday  6,959  7.5%  602  0.6%  1,075  1.2%               | 7.5%  Grand Total 43,276 46.6% 2,871 3.1% 8,828 9.5% 12,744                           |
| December  Distributio  Hour group  00:00 - 03:00 hours  04:00 - 07:00 hours  08:00 - 11:00 hours  12:00 - 15:00 hours                 | Monday<br>5,914<br>6.4%<br>348<br>0.4%<br>1,343<br>1.4%                  | Tuesday<br>5,815<br>6.3%<br>335<br>0.4%<br>1,305<br>1.4%<br>1,866         | Wednesday<br>5,922<br>6.4%<br>340<br>0.4%<br>1,320<br>1.4%<br>1,919                          | week<br>Thursday<br>5,708<br>6.1%<br>335<br>0.4%<br>1,318<br>1.4%<br>1,841 | C Day Friday 6,117 6.6% 346 0.4% 1,265 1.4% 1,858                | % of Tot<br>0.4%<br>Saturday<br>6,842<br>7.4%<br>565<br>0.6%<br>1,203<br>1.3%<br>1,638                          | al Count  Sunday 6,959 7.5% 602 0.6% 1,075 1.2% 1,722               | 7.5%  Grand Total 43,276 46.6% 2,871 3.1% 8,828 9.5% 12,744 13.7% 13,743              |
| December  Distributio  Hour group  00:00 - 03:00 hours  04:00 - 07:00 hours  08:00 - 11:00 hours  12:00 - 15:00                       | Monday<br>5,914<br>6.4%<br>348<br>0.4%<br>1,343<br>1.4%<br>1,900<br>2.0% | Tuesday<br>5,815<br>6.3%<br>335<br>0.4%<br>1,305<br>1.4%<br>1,866<br>2.0% | Wednesday<br>5,922<br>6.4%<br>340<br>0.4%<br>1,320<br>1.4%<br>1,919<br>2.1%                  | week Thursday 5,708 6.1% 335 0.4% 1,318 1.4% 1,841 2.0%                    | C Day Friday 6,117 6.6% 346 0.4% 1,265 1.4% 1,858 2.0%           | % of Tot<br>0.4%<br>Saturday<br>6,842<br>7.4%<br>565<br>0.6%<br>1,203<br>1.3%<br>1,638<br>1.8%                  | al Count  Sunday 6,959 7.5% 602 0.6% 1,075 1.2% 1,722 1.9%          | 7.5%  Grand Total 43,276 46.6% 2,871 3.1% 8,828 9.5% 12,744 13.7% 13,743              |
| December  Distributio  Hour group 00:00 - 03:00 hours 04:00 - 07:00 hours 08:00 - 11:00 hours 12:00 - 15:00 hours 16:00 - 19:00       | Monday 5,914 6.4% 348 0.4% 1,343 1.4% 1,900 2.0% 1,975                   | Tuesday<br>5,815<br>6.3%<br>335<br>0.4%<br>1,305<br>1.4%<br>1,866<br>2.0% | Wednesday<br>5,922<br>6.4%<br>340<br>0.4%<br>1,320<br>1.4%<br>1,919<br>2.1%<br>1,953<br>2.1% | week Thursday 5,708 6.1% 335 0.4% 1,318 1.4% 1,841 2.0% 1,983              | C Day Friday 6,117 6.6% 346 0.4% 1,265 1.4% 1,858 2.0% 1,932     | % of Tot<br>0.4%<br>Saturday<br>6,842<br>7.4%<br>565<br>0.6%<br>1,203<br>1.3%<br>1,638<br>1.8%<br>1,948         | al Count  Sunday 6,959 7.5% 602 0.6% 1,075 1.2% 1,722 1.9% 1,964    | 7.5%  Grand Total 43,276 46.6% 2,871 3.1% 8,828 9.5% 12,744 13.7% 13,743 14.8%        |
| December  Distributio  Hour group 00:00 - 03:00 hours 04:00 - 07:00 hours 08:00 - 11:00 hours 12:00 - 15:00 hours 16:00 - 19:00 hours | Monday 5,914 6.4% 348 0.4% 1,343 1.4% 1,900 2.0% 1,975 2.1%              | Tuesday 5,815 6.3% 335 0.4% 1,305 1.4% 1,866 2.0% 1,988 2.1%              | Wednesday<br>5,922<br>6.4%<br>340<br>0.4%<br>1,320<br>1.4%<br>1,919<br>2.1%<br>1,953<br>2.1% | week Thursday 5,708 6.1% 335 0.4% 1,318 1.4% 1,841 2.0% 1,983 2.1%         | Day Friday 6,117 6.6% 346 0.4% 1,265 1.4% 1,858 2.0% 1,932 2.1%  | % of Tot<br>0.4%<br>Saturday<br>6,842<br>7.4%<br>565<br>0.6%<br>1,203<br>1.3%<br>1,638<br>1.8%<br>1,948<br>2.1% | al Count  Sunday  6,959  7.5%  602  0.6%  1,075  1,722  1,964  2.1% | 7.5%  Grand Total 43,276 46.6% 2,871 3.1% 8,828 9.5% 12,744 13.7% 13,743 14.8% 11,434 |

Data source: Athena

Furthermore, as previously noted, offenders were not recorded for almost 30% of the recorded violence and sexual offences within the 5-year period. However, where offender details were recorded, 75% of them were identified as males and 25% female. Conversely, Figure 15 shows that over half (54%) of the victims were female. In addition, Figure 15 shows that:

- The top 3 age groups of victims were young adults aged 30-34 years, 25-29 years, and 20-24 years old.
- The breakdown of victims by ethnicity is less useful because the proportion of "unknown or unspecified" ethnicity is too high. Therefore, it would be difficult to conclusively comment on whether any of the ethnic groups is overrepresented (compared to the ethnic profile of Bedfordshire and each Local Authority area, as discussed in section 2.2).

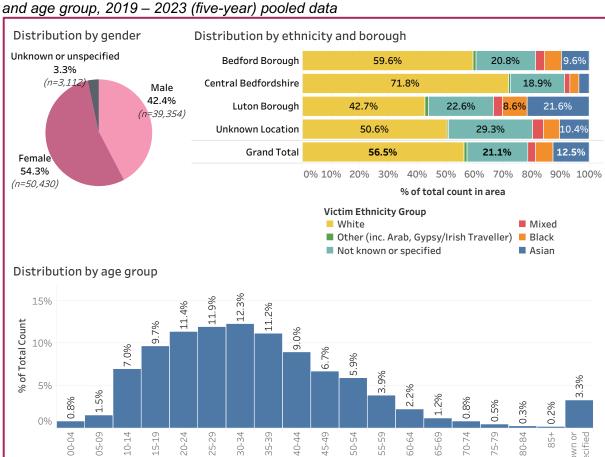


Figure 15: Distribution of violence and sexual offences in Bedfordshire, by gender, ethnicity and age group, 2019 – 2023 (five-year) pooled data

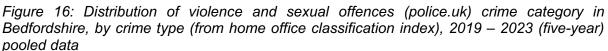
Data source: Athena

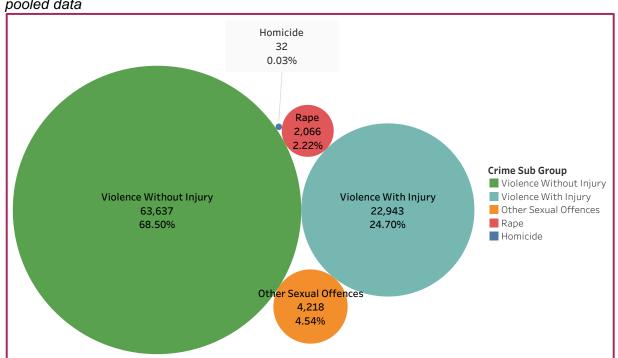
Not

Excluding the unknowns, the top 5 Mosaic<sup>31</sup> groups alone (out of 15 groups) account for over half of the violence and sexual offences included in this analysis. The top 5 Mosaic groups are described in Appendix 1 though it seems to be a legacy version of the Mosaic resource.

It should be noted that the broad violence and sexual offences crime category is heavily composed of – and hence significantly influenced by – the "violence without injury" crime type (review Table 1 again and see Figure 16). Figure 16 shows that violence without injury crime type makes up almost 7 in every 10 crimes (69%) of the violence and sexual offences crime category.

Therefore, the other crime types with smaller proportions (but which cause greater harm) are looked at below, in case some of their peculiar nuances have been masked by the larger crime types. Health data is used below to further look at the "violence with injury" crime type, which makes up about a quarter of the crime category of interest.





Data source: Athena

<sup>&</sup>lt;sup>31</sup> Mosaic is a geodemographic product built by Experian to help understand what types of people live in the UK. It groups all UK households and residents based on demographics, income, composition, and property type, detailing an accurate understanding of each citizen's demographics, lifestyles, behaviours and location.

# **3.1.1.1 Homicide**

Homicide includes murder, manslaughter, and corporate manslaughter. As shown in Figure 16, there were 32 homicides committed in Bedfordshire and recorded by the Bedfordshire Police in the most recent 5-year period (2019 – 2023). Almost half of these (14; 44%) were knife crimes; and 11 of them (34%) had offenders aged under 25 years old. Due to small numbers, the data on homicide at a more local level is not presented in this document.

However, a more in-depth look at the 28 homicides between June 2018 and September 2022 in Bedfordshire as part of the Drug and Alcohol Needs Assessment 2022/23<sup>32</sup> shows that of the 28 homicides within that period, 6 were motivated by drugs supply<sup>33</sup> and 8 involved the consumption of drugs or alcohol or involved substance abuse<sup>34</sup>. This suggest that half of Bedfordshire's homicides involved drugs or alcohol in some way. It is also worthy to note that a fifth (21%) of the homicides involving drugs, alcohol or substance misuse were domestic homicides. In addition, there were 78 attempted murders between June 2018 and September 2022: of these, less than 5 were motivated by drugs supply or County Lines, 5 involved the consumption of alcohol and less than 5 involved the consumption of drugs. This means that at least 10% of Bedfordshire's Attempted Murders have involved drugs or alcohol in some way.

# 3.1.1.2 Rape and Sexual Offences

A Rape and Serious Sexual Offences Problem Profile for Bedfordshire was produced in February 2023<sup>35</sup>. The aim of the report was to provide an updated rape and serious sexual offences problem profile for Bedfordshire. As part of this aim, the objectives were to establish trends, risk levels and hotspots throughout the county, as well as to highlight any other information of note. The data used for the profile report was three years of rape and sexual offences crime data for Bedfordshire, between September 2019 and August 2022, based on the committed date and including the offences in Table 6. Below are some of the key findings from the Problem Profile.

<sup>&</sup>lt;sup>32</sup> See section 3.4 (Drugs & Alcohol, Organised Crime Groups (OCGs), Gangs and County Lines) for more information. Authors: Alice McGushin and Lilli Peters (Public Health Bedford Borough, Central Bedfordshire, and Milton Keynes), Mark Sheldon, Jolene Jefferson, and Elizabeth Bailey (Public Health Luton Borough Council), Analytical Team & DCI (Bedfordshire Police Service)

<sup>&</sup>lt;sup>33</sup> Drug supply indicates that the suspect or offender are linked to drug supply either by criminal history or by intelligence or the motive is directly linked to drugs supply such as the murder happened as a result of a drug dealer being robbed etc. or as a result of a territorial feud.

<sup>&</sup>lt;sup>34</sup> Alcohol/Drug/substance abuse is used when either the suspect or victim were under the influence or known to be an alcoholic or heavy drug user.

<sup>&</sup>lt;sup>35</sup> Authors: Analytical Team, Bedfordshire Police

Table 6: Offences included in the Rape and Serious Sexual Offences Problem Profile for Bedfordshire 2023

| Code | Offence  |
|------|--|
| 17A  | Sexual Assault on a Male Aged 13 And Over                |
| 17B  | Sexual Assault on a Male Child Under 13                  |
| 19C  | Rape of a Female Aged 16 And Over                        |
| 19D  | Rape of a Female Child Under 16                          |
| 19E  | Rape of a Female Child Under 13                          |
| 19F  | Rape of a Male Aged 16 And Over                          |
| 19G  | Rape of a Male Child Under 16                            |
| 19H  | Rape of a Male Child Under 13                            |
| 19J  | Rape of a Female - Multiple Undefined Offenders          |
| 19K  | Rape of a Male - Multiple Undefined Offenders            |
| 20A  | Sexual Assault on a Female Aged 13 And Over              |
| 20B  | Sexual Assault on a Female Child Under 13                |
| 21   | Sexual Activity Involving a Child Under 13               |
| 22A  | Causing Sexual Activity Without Consent                  |
| 70   | Sexual Activity etc With a Person With A Mental disorder |
| 71   | Abuse of Children through Sexual Exploitation            |

Source: Rape and Serious Sexual Offences Problem Profile for Bedfordshire 2023

#### **Peak Time of offending:**

Common peak months of offending were March, May, and December. In these months
there were no repeat locations of note, although this could be due to locations not
being recorded accurately. There were no peak days in March. Whereas in May peak
days were Thursday, Friday and Sunday, and the peak day in December was Sunday.
The latter indicates that there could be a link to the night-time economy, with offences
on Sunday often occurring in the early hours following Saturday night activity.

### Geographical analysis:

- The number of reports in Bedford Borough per year remained almost the same over the course of the three years and on average accounted for 30% of the total reported in the county.
- Reports in Central Bedfordshire increased each year, despite the impact of the lockdown, and increased by 22% when comparing the first year to the third.
   Furthermore, in the first year, Central Bedfordshire reports accounted for 25% of total reports in the county and this increased to 29% in the third year.

- Reports that occurred in the Luton Borough accounted for 36% on average over the three years and similarly, when comparing the first year to the third there was a 10% increase in the number of reports.
- All the hotspots identified feature in the top 25 LSOAs for serious violence and have already been previously identified. All the hotspots identified were in town centres and five out of the six hotspots are areas which feature in areas in the most deprived decile in terms of crime.

#### Crime type:

- The top five most reported crimes each year were consistent, although Rape of a female aged 16 or over was the most reported for the first two years, then second most reported for year three.
- The overall top five most reported offences are in Table 7. Table 7 further confirmed why there was a need to develop a Violence Against Women and Girls (VAWG) framework to address crimes that are committed primarily, but not exclusively, by men against women, both on a local and national level.

Table 7: Top five most reported offences from the offences included in the Rape and Serious Sexual Offences Problem Profile for Bedfordshire 2023 (see Table 6)

| Offence Recorded                                   | % of total reports |
|--|--------------------|
| 020/05 - Sexual assault on a female                | 31%                |
| 019/08 - Rape of a female aged 16 or over          | 30%                |
| 020/06 - Sexual assault of a female child under 13 | 6%                 |
| 017/15 - Sexual assault on a male                  | 5%                 |
| 019/07 - Rape of a female aged under 16            | 5%                 |

Source: Rape and Serious Sexual Offences Problem Profile for Bedfordshire 2023

#### Victim demographics:

- Overall, 84% of victims were female, 12% were male and in the case of 4% of reports
  the victim's gender was not disclosed and/or recorded. These ratios were consistent
  in each year of the data set.
- As shown in Table 8, in relation to offences that took place in Luton, a higher proportion
  of victims were female. Equally, there were relatively more male victims recorded in
  Bedford Borough.

Table 8: Distribution of rape and serious sexual offences by gender and borough, September 2019 to August 2022

| 2010 to 1 tagast 2022 |                 |                      |               |       |  |  |  |
|-----------------------|-----------------|----------------------|---------------|-------|--|--|--|
| Victim Gender         | Bedford Borough | Central Bedfordshire | Luton Borough | Total |  |  |  |
| Female                | 79.8%           | 82.8%                | 86.6%         | 84%   |  |  |  |
| Male                  | 15.8%           | 12.7%                | 10.0%         | 12%   |  |  |  |
| Unknown               | 4.4%            | 4.5%                 | 3.4%          | 4%    |  |  |  |

Source: Rape and Serious Sexual Offences Problem Profile for Bedfordshire 2023

- The most common victim age category was Under 18 (35%) followed by 18-25 (24%).
   10% of offences where the victim was under 18 were committed in an educational setting<sup>36</sup>.
- The most common victim ethnicity was White North European (54.5%). The ethnicity of the victim was unknown in 23.7% of the cases. 9.4% were Asian; 7.8% were Black; 3.5% were White South European; 0.7% were Middle Eastern; and 0.5% were Chinese, Japanese, or South-East Asian.
- The top Mosaic types for victims based on their recorded home postcodes were "N59 Large Family Living" and "O63 Flexible Workforce". The Mosaic type "N59 Large Family Living" is a consumer group which are predominantly large families living in neighbourhoods with a strong community identity. Key features of this group are that they have low discretionary income and even though household technology adoption is high, they are not internet savvy. Therefore, the most effective, realistic methods of communication with this group would be by post and text. Furthermore, the Mosaic type "O63 Flexible Workforce" is a group who are predominantly aged 26-35 years old, in rented accommodation and they don't use landlines. Household technology adoption is very high, and most are very internet savvy, therefore communication via social media would be an appropriate way to engage with this group.

### **Vulnerability factors and repeat victimisation:**

- The top three recorded vulnerabilities for all victims were Age/Under 18, Domestic Abuse and Child Abuse. This correlates with the most common victim age category being under 18.
- The most common vulnerability for repeat victims was Domestic Abuse.
- For offences where the victims were under 18, the top high-volume offence locations were a Bedford and Luton school/academy.

<sup>&</sup>lt;sup>36</sup> Caveat – manual coding was used to identify location/premises type.

• This data is based on vulnerabilities recorded on Athena which relies on information being inputted and often information being disclosed by the victim. Just 49% of all the crime reports had a vulnerability factor recorded for the victim and similarly, the victim was flagged as a repeat victim in the case of 33% of reports. It is likely that these figures are under-reported.

### Repeat victims:

- The top repeat victims based on sexual offences which were recorded on Athena in the period of the data set were identified. The information regarding vulnerabilities was also gleaned from Athena, primarily from safeguarding referrals. The most common vulnerabilities amongst the top repeat victims were poor mental health, drug use, alcohol abuse & child sexual exploitation (CSE).
- In relation to these repeat victims, the crime reports indicate that they have been assaulted by multiple offenders, which emphasizes their vulnerability.

## Offender demographics:

- Overall, 95.8% of suspects were recorded as male, 3.6% were female and in the case of 0.6% of reports the suspect's gender was not disclosed and/or recorded<sup>37</sup>.
- The most common offender age category was 26-35 (23%), followed by 36-45 (20%). The most common offender ethnicity was White North European (47.8%). This mirrors the victims' data, but the offenders' age categories are more evenly proportioned in comparison. The ethnicity of the offender was unknown in 18% of the cases. 15% were Asian; 14.2% were Black; 3.8% were White South European; 0.8% were Middle Eastern; and 0.2% were Chinese, Japanese, or South-East Asian.
- The top Mosaic types for offenders based on their recorded home postcodes were "I36 Solid Economy" and "N59 Large Family Living" 38. "I36 Solid Economy" are a group who are primarily stable families with children in council/housing association housing and with low discretionary income. They are fairly internet savvy and with smartphone use ever-increasing, social media would be the most effective way to communicate with this group. The second most common Mosaic type for offenders, "N59 Large Family Living", was also the most common type for victims. This correlates with the fact that,

<sup>37</sup> Caveat – manual coding was added in reports where the suspect's gender was not recorded.

<sup>&</sup>lt;sup>38</sup> Caveat – not all crime reports had the offender's home address recorded and only addresses in Bedfordshire were taken into consideration.

where the relationship between the victim and offender was recorded, the offender was known to the victim in 84% of cases.

#### Relationship between victim and offender:

- The relationship between the victim and the offender was recorded in just over half (51%) of the reports.
- The most common relationship between the victim and offender was Spouse, Partner, or Ex-Partner (40%), followed by Friend or Associate (26%), and then Stranger (8%).
- In terms of reports where the relationship was recorded as Spouse/Partner/Ex-Partner and Friend/Associate, the offenders were predominantly male (96%).

For more information, see the Rape and Serious Sexual Offences Problem Profile for Bedfordshire 2023<sup>39</sup>.

# 3.1.2 Violence with injury: Health-recorded assaults

As seen in Figure 16, violence with injury crime type makes up about a quarter of the violence and sexual offences crime category. It is assumed that many of the victims of this crime type and others will be seen by the health sector, but some injured persons may not call an ambulance or present at hospital with their injury for various reasons. Therefore, whilst the health-related data is useful for deriving insight, the data alone (as previously stated for health and police data sources) is likely to under-report the level of violence with injury.

# 3.1.2.1 Ambulance callouts related to assaults

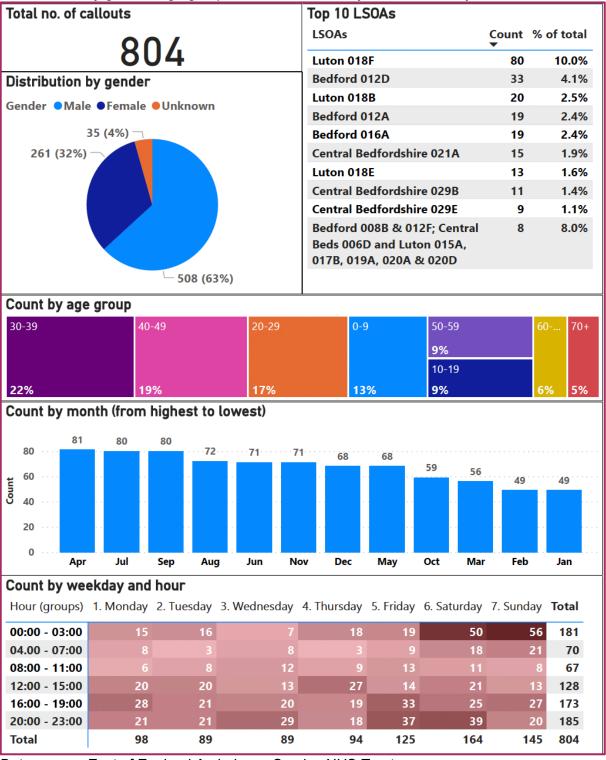
Based on the East of England Ambulance Service data, there were 804 ambulance callouts related to assaults in Bedfordshire from in 2023, an increase of 14% from the previous year (n=703). A summary of the distribution of the 2023 data is presented in Figure 17. It suggests that:

- The top 10 small areas (LSOAs), where ambulances were called to, were mostly in Luton and Bedford Boroughs. These top 10 small areas accounted for over half (n=453; 56%) of all these ambulance callouts within the year<sup>40</sup>.
- About 2 in every 3 victims (63%) were males.

<sup>&</sup>lt;sup>39</sup> Official sensitive document. Only available for internal stakeholders on a need-to-know basis.

<sup>&</sup>lt;sup>40</sup> Note that the 10th place is jointly shared by 8 small areas, and each accounted for 8 callouts (making this a total of 64 callouts) – see Figure 17.

Figure 17: Top 10 LSOAs and Distribution of Ambulance Callouts related to Assaults in Bedfordshire by gender, age group, month and weekday & hour, January to December 2023



Data source: East of England Ambulance Service NHS Trust

• The top 3 age groups – 30–39-year-olds, 40–49-year-olds, and 20–29-year-olds – accounted for over half (58%) of the callouts.

- April, July, and September were the top 3 months for activity. The top-3 month in the previous year were May and the summer months (of July and August).
- There were generally higher ambulance callouts on weekend nights. This is corroborated by the A&E attendances data<sup>41</sup>, which shows arrival at A&E by ambulance was highest at night and early hours (from 8pm to 7am).

# 3.1.2.2 Violence-related A&E Attendances

A&E attendances related to violence and sexual offences are "first A&E attendances" where assault was specified in the Patient Group field<sup>43</sup> of the HES A&E dataset.

The annual number of A&E attendances, based on the HES data, by residents in Bedfordshire after assault from 2011/12 to 2020/21 is in Figure 18<sup>44</sup>. Over the most recent 5-year period for which data is fully available (2016/17-2020/21), there were 5,616 A&E attendances.



Figure 18: A&E Attendances after assault

Data Source: Hospital Episodes Statistics (HES), NHS Digital

Almost half of the A&E attendances in the five-year period (48%; n=2,694) were from Luton Borough, 1,504 attendances were from Bedford Borough (26.8%) and 1,418 were from Central Bedfordshire (25.2%). The directly age-standardised rate of A&E attendances in the five-year period for Bedfordshire is 161.2 per 100,000 (159.5-162.9 95% CI). The higher rates for

<sup>&</sup>lt;sup>41</sup> From Hospital Episode Statistics (HES).

<sup>&</sup>lt;sup>42</sup> Where the attendance category (AEATTENDCAT) field is "1", meaning First A&E attendance. That is, follow-up and other attendance categories are excluded.

<sup>&</sup>lt;sup>43</sup> AEPATGROUP field is '20', meaning assault.

<sup>&</sup>lt;sup>44</sup> As with admissions, the sudden decline in 2020/21 is most likely due to the impact of the COVID-19 pandemic.

Bedford and Luton (compared to the Bedfordshire rate) are statistically significant and the rate for Central Bedfordshire is significantly lower than Bedfordshire and the two other boroughs (see Table 9). The comparison of the DSRs of LSOAs (whether they are significantly higher, significantly lower or similar) to the Bedfordshire rate is presented in Figure 19.

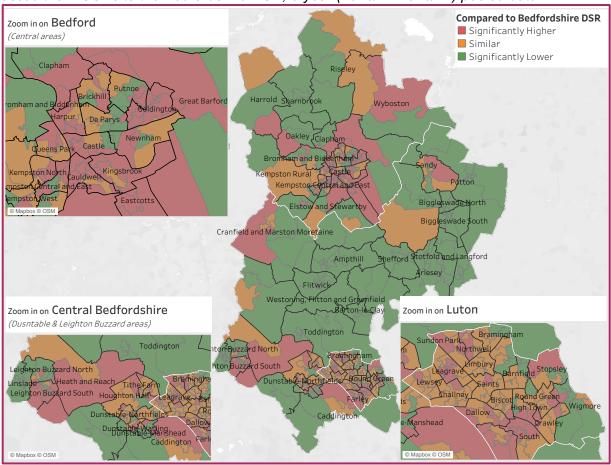
Table 9: Directly age-standardised rates (DSRs) of A&E Attendances after assault, by

borough, 2016/17-2020/21 (five-year pooled data)

| Area                 | DSR per<br>100,000 | Lower CI | Upper<br>CI | Compared to Bedfordshire DSR |
|----------------------|--------------------|----------|-------------|------------------------------|
| Bedford              | 199.8              | 196.3    | 203.5       | Significantly Higher         |
| Central Bedfordshire | 102.5              | 100.7    | 104.5       | Significantly Lower          |
| Luton                | 202.7              | 198.8    | 206.6       | Significantly Higher         |
| Bedfordshire         | 161.2              | 159.5    | 162.9       |                              |

Data Source: Hospital Episodes Statistics (HES), NHS Digital

Figure 19: Comparison of directly age-standardised rates (DSRs) of A&E Attendances after assault for LSOAs to the Bedfordshire DSR, 5-year (2016/17-2020/21) pooled data



Data source: Hospital Episodes Statistics (for the A&E data); and Office of National Statistics (ONS) mid-year estimates 2016-2020

A quarter of the 381 LSOAs in Bedfordshire (n=96; 25%) were identified as having significantly higher rates than the Bedfordshire rate. They mostly align with the most deprived areas of the county and most of them also have significantly higher rates of police-recorded violence and sexual offence crimes (as described in section 3.1.1 above). Furthermore, Figure 20 shows that the rate of assault in Bedfordshire increases with deprivation. The most deprived decile has a significantly higher rate (451.9 per 100,000) than almost all the other deciles and has a rate that is about six times that of the least deprived decile (74.9 per 100,000) – a very similar pattern to the DSRs for police-recorded data for violence and sexual offences in Bedfordshire (compare Figure 20 with Figure 12).

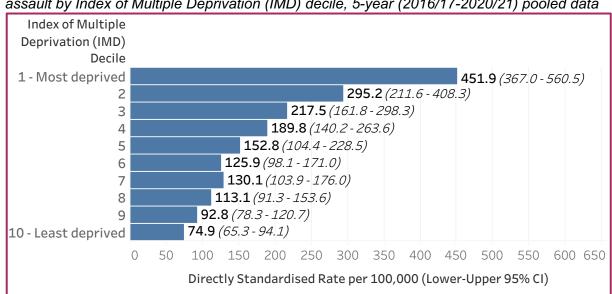


Figure 20: Bedfordshire directly age-standardised rates (DSRs) of A&E Attendances after assault by Index of Multiple Deprivation (IMD) decile, 5-year (2016/17-2020/21) pooled data

Data source: Hospital Episodes Statistics (for the A&E data); and Office of National Statistics (ONS) mid-year estimates 2016-2020

Other observations from the analysis of the HES A&E data include the following:

- The greatest proportion of A&E attendances after assault in males aged 20-24 years old, followed by males aged 15-19 years old (see Figure 21) though there were too many attendances with the patient's age unknown or unstated.
- The proportion of admissions by ethnicity is not too dissimilar to the ethnic profile of Bedfordshire and each Local Authority area (see section 2.2), if the count of the unknown ethnic group is factored in (see Figure 21).
- Almost 6 in every 10 attendances (58.2%) were from the two most deprivation quintiles.
- The mode of transport used to get to A&E is coded as being by ambulance or by any other means of transport. Figure 21 shows the percentage arriving by either method by arrival

hour. Overall, 27.4% of patients arrived by ambulance. Arrival by ambulance was highest at night and early hours (from 8pm to 7am).

A&E attendances by sex and age group A&E attendances by ethnic group Ethnic Group Asian or Asian British Not known Black or Black British 85+ Mixed 586 (22%) 217 (15%) 80-44 103 (7%) Not known or stated 75-79 Other ethnic group 70-74 242 (9%) 65-69 775 (14%) 60-64 55-59 60% 167 (3.0%) 488 (18%) 236 (4.2%) 45-49 40-44 271 (4.8%) 35-39 309 (5.5%) 40% 1,118 (79%) 400 (7.1%) 30-34 1.033 (69%) 516 (9.2%) 25-29 3,367 (60%) 625 (11.1%) 20-24 15-19 612 (10.9%) 1,216 (45%) 20% 156 (2.8%) 10-14 05-09 00-04 Sex 500 400 300 200 100 Male Bedford Central Bed Luton Grand Total PopPyramid Female A&E attendances by deprivation quintile in A&E attendances by arrival hour and mode England 00:00 - 03:00 hours 04:00 - 07:00 hours 407 (58.7% (9.9%) 1.752 763 498 (84.4%) 08:00 - 11:00 hours (31.2%)(13.6%) 12:00 - 15:00 hours 16:00 - 19:00 hours 398 (32.49 20:00 - 23:00 hours IMD Quintile Grand Total ■ 1 - Least deprived 1.026 40% 60% 1009 (18.3%)2 1,518 % of Total Count of Extract 3 (27.0%)Arrival mode 4 ■ 5 - Most deprived ■ Brought in by ambulance (including helicopter / Air Ambulance)

Figure 21: Distribution of violence related A&E attendances by age group & sex, ethnic group, index of multiple deprivation (IMD) quintile and arrival hour & mode, 2016/17-2020/21 (five-year pooled data)

Data Source: Hospital Episodes Statistics (HES), NHS Digital

### 3.1.2.3 Violence-related admissions

Violence admissions (including sexual violence) are defined as the number of first finished emergency inpatient ordinary admission episodes<sup>45</sup>, where the cause of the admission was 'violence' or assault<sup>46</sup> in the financial year in which the episode ended. According to the HES data, there was a total of 3,183 admissions due to violence across the most recent 10 financial

<sup>&</sup>lt;sup>45</sup> That is, episode number = 1, admission method starts with 2, and the patient classification (CLASSPAT) field is 1 (ordinary admission), which excludes day case, regular attender and other admissions.

<sup>&</sup>lt;sup>46</sup> As classified by ICD-10 diagnosis codes X85 to Y09, occurring in any diagnosis position (primary or secondary). Admissions are only included if they have a valid Local Authority code.

years for which data is fully available (2011/12 – 2020/21) in Bedfordshire. The number of Bedfordshire residents admitted to hospital was on the increase from 2014/15 until there was a sharp decrease in 2020/21 (see Figure 22). However, the sudden decline in 2020/21 is most certainly due to the impact of the COVID-19 pandemic, when there were lockdowns and hospitals were more focused on the global pandemic.

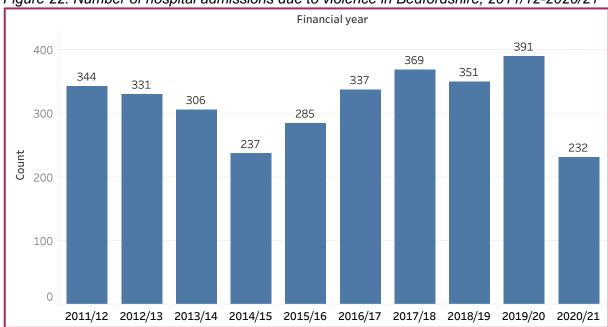


Figure 22: Number of hospital admissions due to violence in Bedfordshire, 2011/12-2020/21

Data Source: Hospital Episodes Statistics (HES), NHS Digital

Almost half of the admissions in the ten-year period (47.9%; n=1,526) were from Luton Borough, 822 admissions were from Bedford Borough (25.8%) and 835 were from Central Bedfordshire (26.2%). The directly age-standardised rate of hospital admissions due to violence in the ten-year period for Bedfordshire is 53.1 per 100,000 (52.4-53.8 95% CI). The higher rate for Luton (compared to the Bedfordshire rate) is statistically significant, the rate for Bedford Borough is statistically similar to the Bedfordshire rate and the rate for Central Bedfordshire is significantly lower than Bedfordshire and the two other boroughs (see Table 10). The comparison of the DSRs of LSOAs (whether they are significantly higher, significantly lower, or similar) to the Bedfordshire rate is presented in Figure 23.

Table 10: Directly age-standardised rates (DSRs) of hospital admissions due to violence, by

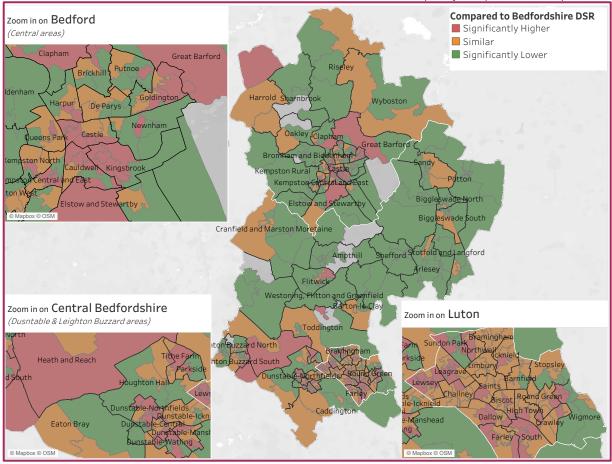
borough, 2011/12-2020/21 (ten-year pooled data)

| Area                 | DSR per<br>100,000 | Lower<br>CI | Upper<br>Cl | Compared to<br>Bedfordshire DSR |
|----------------------|--------------------|-------------|-------------|---------------------------------|
| Bedford              | 55.2               | 53.8        | 56.5        | Statistically Similar           |
| Central Bedfordshire | 35.2               | 34.4        | 36.0        | Significantly Lower             |

| Area         | DSR per<br>100,000 | Lower<br>Cl | Upper<br>Cl | Compared to<br>Bedfordshire DSR |
|--------------|--------------------|-------------|-------------|---------------------------------|
| Luton        | 73.0               | 71.3        | 74.7        | Significantly Higher            |
| Bedfordshire | 53.1               | 52.4        | 53.8        |                                 |

Data source: Hospital Episodes Statistics (for the hospital admissions data); and Office of National Statistics (ONS) mid-year estimates 2011-2020

Figure 23: Comparison of directly age-standardised rates (DSRs) of hospital admissions due to assault for LSOAs to the Bedfordshire DSR, 2011/12-2020/21 (ten-year pooled data)



Data source: Hospital Episodes Statistics (for the hospital admissions data); and Office of National Statistics (ONS) mid-year estimates 2011-2020

A fifth of the 381 LSOAs in Bedfordshire (n=77; 20%) were identified as having significantly higher rates than the Bedfordshire rate. They mostly align with the most deprived areas of the county and many of them also have significantly higher rates of police-recorded violence and sexual offence crimes (as described in section 3.1.1 above) and significantly higher rates of A&E attendances (as described in section 3.1.2.3 above).

Furthermore, Figure 20 shows that the rate of assault in Bedfordshire increases with deprivation. The most deprived decile has a significantly higher rate (451.9 per 100,000) than

almost all the other deciles and has a rate that is about six times that of the least deprived decile (74.9 per 100,000) – a very similar pattern to the DSRs for police-recorded data for violence and sexual offences in Bedfordshire (compare Figure 20 with Figure 12).

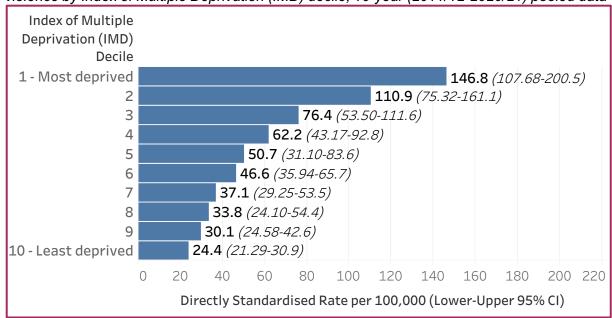


Figure 24: Bedfordshire directly age-standardised rates (DSRs) of hospital admissions due to violence by Index of Multiple Deprivation (IMD) decile, 10-year (2011/12-2020/21) pooled data

Data source: Hospital Episodes Statistics (for the hospital admissions data); and Office of National Statistics (ONS) mid-year estimates 2011-2020

A monthly view of the data suggests a peak of admissions was during the summer months of July, August, and September (but also May in Central Bedfordshire) – see Figure 25.

A view of the data by weekday (see *Figure 26*) unsurprisingly shows that the number of admissions overall and in each borough is highest on a Sunday. This may be explained by the fact that a Sunday will include the early hours of Sunday morning (from 00:00 hours) after the Saturday night-time economy. The second highest number of admissions occurs on a Saturday (see *Figure 26*).

The "arrival hour" of patients who were the subjects of admissions is not an available field in the HES inpatient data. However, this is likely to be similar to the arrival hour pattern found from the Accident & Emergency (A&E) data (see section 3.1.2.2 above), as a majority of the admissions related to violence (1,998 out of 3,183; 63%) were via A&E.

Figure 25: Distribution of violence related admissions by month of admission, 2011/12-

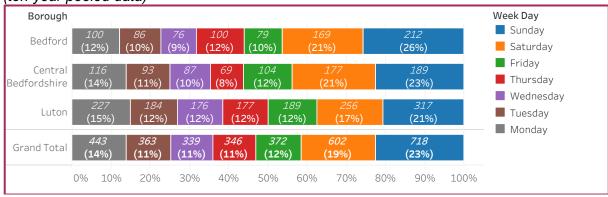
2020/21 (ten-year pooled data)

|             | Bedford      | Central<br>Bedfordshire | Luton          | Grand Total    | % of Total Count |
|-------------|--------------|-------------------------|----------------|----------------|------------------|
| January     | 68 (8.3%)    | 66 (7.9%)               | 130 (8.5%)     | 264 (8.3%)     | 5.6% 10.8%       |
| February    | 46 (5.6%)    | 53 (6.3%)               | 94 (6.2%)      | 193 (6.1%)     |                  |
| March       | 65 (7.9%)    | 63 (7.5%)               | 116 (7.6%)     | 244 (7.7%)     |                  |
| April       | 68 (8.3%)    | 71 (8.5%)               | 130 (8.5%)     | 269 (8.5%)     |                  |
| May         | 71 (8.6%)    | 86 (10.3%)              | 133 (8.7%)     | 290 (9.1%)     |                  |
| June        | 77 (9.4%)    | 71 (8.5%)               | 129 (8.5%)     | 277 (8.7%)     |                  |
| July        | 89 (10.8%)   | 70 (8.4%)               | 148 (9.7%)     | 307 (9.6%)     |                  |
| August      | 82 (10.0%)   | 82 (9.8%)               | 112 (7.3%)     | 276 (8.7%)     |                  |
| September   | 70 (8.5%)    | 88 (10.5%)              | 150 (9.8%)     | 308 (9.7%)     |                  |
| October     | 53 (6.4%)    | 51 (6.1%)               | 132 (8.7%)     | 236 (7.4%)     |                  |
| November    | 67 (8.2%)    | 65 (7.8%)               | 129 (8.5%)     | 261 (8.2%)     |                  |
| December    | 66 (8.0%)    | 69 (8.3%)               | 123 (8.1%)     | 258 (8.1%)     |                  |
| Grand Total | 822 (100.0%) | 835 (100.0%)            | 1,526 (100.0%) | 3,183 (100.0%) |                  |

Data Source: Hospital Episodes Statistics (HES), NHS Digital

Figure 26: Distribution of violence related admissions by day of the week, 2011/12-2020/21

(ten-year pooled data)

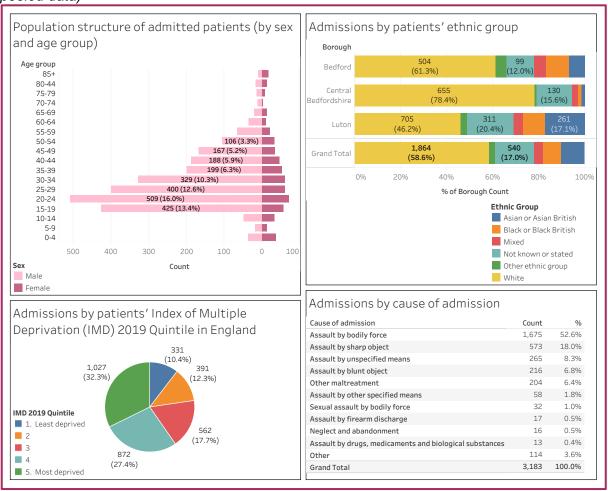


Data Source: Hospital Episodes Statistics (HES), NHS Digital

Other observations from the analysis of the HES hospital admissions data include the following:

- Almost half of the admissions (45%) were for "0 days" (i.e., the patients were discharged without an overnight stay), 44% stayed in hospital for 1-3 days, about 6% stayed for 4-6 days, and about 5% stayed in hospital for one week or more. It can be inferred that admissions for a longer stay period are due to a higher level of violence or severity of injury.
- The greatest proportion of violence-related admissions was in males aged 20-24 years old, followed by males aged 15-19 years old (see Figure 27).

Figure 27: Distribution of violence related admissions by age group & sex, ethnic group, index of multiple deprivation (IMD) quintile and cause of admission, 2011/12-2020/21 (ten-year pooled data)



Data Source: Hospital Episodes Statistics (HES), NHS Digital

- The proportion of admissions by ethnicity is not too dissimilar to the ethnic profile of Bedfordshire and each Local Authority area (see section 2.2). However, compared to their respective population profiles, the Black ethnic group is overrepresented in hospital admissions due to violence (especially in Bedford Borough), and the White and Asian/Asian British ethnic groups are underrepresented across the county and all three Local Authorities in admissions (see Figure 27).
- The most common cause of violence-related admission was assault by bodily force, followed by assault by sharp object (see Figure 27). Together, they cause about 7 in every 10 violence-related admissions in Bedfordshire.

Alcohol, substance misuse and/or mental health<sup>47</sup> were factors at play in violence-related admissions in Bedfordshire. Almost half of the violence-related admissions were related to mental health, about 4 in every 10 of them were related to substance misuse, and almost 2 in every 10 of them were wholly attributable to alcohol<sup>48</sup>.

# 3.2 Violence against women and girls (VAWG)

In September 2022, analysts from the Bedfordshire Police produced a Violence against women and girls (VAWG) Problem Profile<sup>49</sup>. This follows one of the actions embedded within the NPCC VAWG Framework<sup>50</sup>, which required every police force to produce a VAWG problem profile that should be used to support the local VAWG strategy and direct activities and resources at the highest harm locations and offenders.

VAWG offences refer to offences where at least one victim is female, the victim(s) are aged over 10 years, and the perpetrator can be any gender or age (or is unknown). Crime types with VAWG include:

- All Domestic Abuse offences.
- Child Sexual Exploitation and Abuse.
- Honour based; Forced Marriage and Female Genital Mutilation (FGM).
- Non-domestic Homicide, Rape, Other Sexual Offences and Violence with Injury.
- Non-domestic Exploitation of Prostitution; Stalking and Harassment and Modern Slavery.

The problem profile reviewed Violence against Women and Girls (VAWG) within Bedfordshire for female victims aged over 10 years old under 4 category headings: Public spaces, private spaces, online spaces and in educational establishments. It drew on a range of data both from Bedfordshire Police and partners to determine harmful locations and offenders as well as key intelligence gaps and recommendations.

Overall, the profile found that, between 1st June 2018 and 31st May 2022,

<sup>&</sup>lt;sup>47</sup> Mental Health: ICD-10 codes F00 to F99 in any diagnosis position (primary or secondary; Substance misuse: ICD-10 codes F11-F19, T40, T52, T59, T436, Y12, Y16, and Y19 in any diagnosis position (primary or secondary; and Alcohol-related: alcohol-specific (wholly attributable) ICD-10 code in any diagnosis position, where the value for the Principal Alcohol Related Fraction (ALCFRAC) field is 1.

<sup>&</sup>lt;sup>48</sup> That is, caused solely by alcohol.

<sup>&</sup>lt;sup>49</sup>Authors: Analytical Team, Bedfordshire Police

<sup>&</sup>lt;sup>50</sup>Online: <a href="https://www.npcc.Police.uk/documents/VAWG/Policing%20VAWG%20national%20framework%20for%20delivery.pdf">https://www.npcc.Police.uk/documents/VAWG/Policing%20VAWG%20national%20framework%20for%20delivery.pdf</a>

- 43,471 of the 77,294 crimes committed in Bedfordshire which fell into the specific crime types/offences (as outlined by the VAWG crime types) were committed against female victims aged over 10 years old. This represents 56% of all the crimes under review. 29,235 (38%) of these crimes were committed against male victims, 3,908 (5%) of these crimes had no victim identified and 680 (1%) of crimes the gender of the victim was unknown.
- 48% (20,924) of the 43,471 offences that were committed against female victims aged over 10 years were classified as violence without injury. The second highest crime type is public order offences (n= 7,926; 18.2%) and the third highest is violence with injury offences (n=7,645; 17.6%). The remaining crime sub-group each equated to 5% or less of the overall crimes.
- 30,586 of all crimes within the period were related to domestic abuse. Of these 30,586 domestic abuse related crimes, 21,881 (72%) were committed against female victims aged over 10 years. The majority of the 21,881 domestic abuse related crimes committed against female victims aged over 10 years (n=18,991, 87%) were committed by at least one male perpetrator.
- Generally, the pattern of offending follows a similar course for the first 5 months of the year (January to May), falling between January and February, before generally trending upward from February peaking in one of the summer months (June to August), where in every year except 2018/19 the highest number of offences are recorded. This is followed by lower levels through autumn apart from a peak in October in 3 of the 4 years within the period (except for October 2020). Then the number of offences increase again over the winter months peaking in January.

The summary of findings by the various spaces VAWG occurs is presented in Table 11. See the Bedfordshire Police's VAWG Problem Profile for more information.

Table 11: Bedfordshire VAWG Problem Profile 2022 Findings by Space where the violence occurred

| Theme           | VAWG in Public Spaces       | VAWG in Private Spaces                  | VAWG in Online             | VAWG in Educational           |
|-----------------|-----------------------------|---|----------------------------|-------------------------------|
|                 |                             |   | Spaces                     | Establishments                |
| Distribution of | 39.1% were identified as    | 52.8% were identified as being          | 5.7% were identified as    | 1.2% were identified as       |
| VAWG crimes     | being committed in a        | committed in a private space.           | being committed in an      | being committed in an         |
|                 | public space.               |   | online space.              | educational establishment.    |
| Gender at risk  | Unlike the other 3 spaces,  | Private space offending has the         | Female victims             | Female victims represented    |
|                 | males are slightly more at  | highest proportion of female victims    | represented over half      | over half (52.9%) of all      |
|                 | risk.                       | (65.5%).                                | (56.4%) of all victims of  | victims of educational        |
|                 |                             |   | online offences.           | offences defined by the       |
|                 |                             | 70.34% of Blue Bell survey              |                            | Home Office as falling within |
|                 |                             | participants have either experienced    |                            | VAWG.                         |
|                 |                             | or witnessed or both sexual             |                            |                               |
|                 |                             | inappropriateness in the workplace.     |                            |                               |
|                 |                             | 75.9% of these were female.             |                            |                               |
| Place/location  | Luton was the               | Offending is concentrated within        | Online space offending     | Offending was                 |
|                 | predominant CSP for         | both Bedford and Luton Town             | had a slightly higher      | predominantly committed in    |
|                 | offending with more         | Centres, both long and shorter term.    | proportion of offending in | Luton. Educational            |
|                 | deprived areas of Luton     | Further hotspots were identified in     | Central Bedfordshire       | establishments were mostly    |
|                 | and Bedford Town            | Marsh Farm and Bury Park within         |                            | schools and offending was     |
|                 | Centres regularly featuring | Luton CSP, Cauldwell in Bedford         | Facebook was the most      | predominantly peer on peer.   |
|                 | as hotspots. Smaller        | Borough CSP and a Dunstable             | common platform used       |                               |
|                 | hotspots in Dunstable,      | estate. All these hotspots were         | by victims (accounting     |                               |
|                 | Bury Park and Leighton      | linked to higher levels of deprivation. | for almost a quarter of    |                               |
|                 | Buzzard were also           |   | offences – 24.3%)          |                               |
|                 | identified.                 |   | predominantly aged         |                               |
|                 |                             |   | between 20 and 40 years    |                               |
|                 |                             |   | old.                       |                               |
|                 |                             |   |                            |                               |

| Theme                         | VAWG in Public Spaces   | VAWG in Private Spaces  | VAWG in Online<br>Spaces  | VAWG in Educational<br>Establishments   |
|-------------------------------|---|---|---|---|
| Highest<br>volume crimes      | 125/09 - Causing intentional harassment, alarm or distress.  125/11 - Fear or provocation of violence                 | 105/01 - Assault without Injury - Common assault and battery  008/06 - Assault with Injury - Assault occasioning actual bodily harm   | 008/72 - Sending letters etc with intent to cause distress or anxiety.  195/94 - Harassment   | 008/06 - Assault with Injury - Assault occasioning actual bodily harm.  020/05 - Sexual assault on a female |
| Highest<br>severity<br>crimes | 019/08 - Rape of a female aged 16 or over.  008/06 - Assault with Injury - Assault occasioning actual bodily harm     | 019/08 - Rape of a female aged 16 or over.  008/06 - Assault with Injury - Assault occasioning actual bodily harm   | 022/20 - Causing or inciting a female child under 16 to engage in sexual activity No Penetration - Offender 18 or over.  022/24 - Causing or inciting a female child under 16 to engage in sexual activity No Penetration - Offender Under 18 | 008/06 - Assault with Injury - Assault occasioning actual bodily harm.  020/05 - Sexual assault on a female |
| Aggravating factors           | Domestic abuse was seen as an aggravating factor in 20.5% of cases.  Influence of gangs, drug / alcohol abuse and sex | Domestic abuse was reported as an aggravating factor for 78.4% of crimes. Alcohol was reported to be involved in just over 6% of offences. This was replicated in intelligence. | Most predominant aggravating factor for online VAWG offending was harassment seen in 35.6% of cases.  | The top aggravating factor for crimes was child at risk in 37.1% of cases.                                  |

| Theme     | VAWG in Public Spaces  | VAWG in Private Spaces   | VAWG in Online<br>Spaces   | VAWG in Educational<br>Establishments  |
|-----------|--|--|--|--|
|           | work were also frequently featured on intelligence.  | Repeat private spaces are predominantly associated with repeat victim-offender with the majority referring to ongoing domestic abuse between persons living at the address.  |  |  |
| Offenders | 53.4% of offences had offenders recorded with 6.4% having 2 or more offenders. Males accounted for 70.3% of offenders predominantly aged 26-35 years old. 54.1% were identified as White – North European, predominantly living in more socially deprived areas. 1085 repeat offenders were identified. 14.5% of offenders were ex-partners of the victim (predominantly all male offenders). Neighbours were also common offenders of victims | Unsurprisingly, private space offending is predominantly committed by non-strangers with intimate known persons representing just over half, 51.6%, of relationship types.  84.7% of offences had offenders recorded with 4.4% having 2 or more offenders. Males accounted for 84.4% of offenders predominantly aged 26-35 years old. 53.4%, were identified as White – North European, predominantly living in more socially deprived areas. 4174 repeat offenders were identified. | Online offences are more commonly committed by a non-stranger (33%) but where relationship type was identified, 33.15% of offenders were expartners of the victim.  52.5% of offences had offenders recorded, 4.6% having 2 or more offenders. Males accounted for 62.5% of offenders predominantly aged 26-35 years old. 56.3%, were identified as White – North European, predominantly living in more socially deprived areas. 192 repeat | Only 41% of offences had an offender recorded, with 8% having 2 or more offenders. Males accounted for 59% of offenders predominantly aged 11-17 years old. 39%, were identified as White – North European, predominantly living in more socially deprived areas. 25 repeat offenders were identified in the data. |

| Theme                  | VAWG in Public Spaces   | VAWG in Private Spaces  | VAWG in Online<br>Spaces   | VAWG in Educational<br>Establishments  |
|------------------------|---|---|--|--|
|                        | representing 14.3% of all offenders.  |   | offenders were identified in the data.   |  |
| Victims                | Victim ethnicity was predominantly White – North European (72%) with most common ages of victims fall in the 26 to 35 age category (26.3%).  The top 3 recorded vulnerabilities are: domestic abuse (15.72%), repeat victim (10.14%), and age/under 18 (9.50%). | Victim ethnicity was predominantly White – North European (60.2%) with most common ages of victims fall in the 26 to 35 age category (29.7%). 40.94% of victims had domestic abuse identified as a vulnerability. | Victim ethnicity was predominantly White – North European (61%) with most common ages of victims fall in the 26 to 35 age category (24.6%). The top victim vulnerability was age under 18 despite highest age category being above this.  Victim did not support Police action in 45.35% of cases. | Victim ethnicity was predominantly White – North European (51.5%) with most common ages of victims fall in the 11-17 age category (63.6%). The top victim vulnerability was age under 18.  Victim does not support action in 34% of cases.   |
| Time and other factors | Peak times of offending are summer months (July and August) predominantly on Fridays and Saturdays with night (0000-0100hrs) and last afternoon/evening (1500-1900hrs) representing peak times of offending.  |   |  | Peak times for offending were between 1500-1600hrs at the end of the school day.  Summer and Christmas holidays unsurprisingly see a drop in offending year on year with offending also reduced during Covid-19 lockdown, likely a result of |

| Theme        | VAWG in Public Spaces   | VAWG in Private Spaces  | VAWG in Online<br>Spaces  | VAWG in Educational Establishments   |
|--------------|---|---|---|--|
|              | Drivers: Night-Time Economy is identified as a big driver of public space VAWG which is supported by Streetsafe data identifying females feeling more unsafe at night. Key NTE locations such as bars and nightclubs were also identified on risk terrain modelling as locations that increase risk of VAWG. Operation Firefly is currently tackling VAWG in NTE. |   |   | lack of engagement with staff and thereby not identifying or reporting crimes.   |
| Other points | External surveys indicated that 77.6% of participants answered that they had either experienced directly or witnessed cat calling, wolf whistling, up skirting, or other inappropriate behaviour. 96.5% of these were female.   | Honour based abuse, FGM and forced marriage represent large intelligence gaps for Police because of their hidden nature and reluctance of communities to report. Increased education and support for these victims is ongoing.  Bedfordshire Police have set up campaigns such as 'I only hit her once' to better educate and | Online platforms used are continually evolving and rely on reporting by the platform or victim to identify offending. | There is a correlation seen between offending and school exclusions.  Highest harm schools were often from more deprived locations with some overlap with gang hotspots.  The highest harm school by volume and by severity were identified. |

| Theme | VAWG in Public Spaces     | VAWG in Private Spaces                | VAWG in Online<br>Spaces | VAWG in Educational<br>Establishments |
|-------|---------------------------|---------------------------------------|--------------------------|---------------------------------------|
|       | Spiking was identified as | encourage reporting around            |                          |                                       |
|       | new emerging trend over   | domestic abuse.                       |                          | SHEU surveys identified the           |
|       | the last year.            |                                       |                          | need to implement further             |
|       |                           | The Multi-Agency Risk Assessment      |                          | education and support to              |
|       |                           | Conference (MARAC) shares             |                          | encourage healthy                     |
|       |                           | information on the highest risk cases |                          | relationships from an early           |
|       |                           | of domestic abuse between criminal    |                          | age.                                  |
|       |                           | justice agencies and partners.        |                          |                                       |

Source: Bedfordshire Police VAWG Problem Profile

For more information, see the Bedfordshire Police VAWG Problem Profile<sup>51</sup>.

<sup>51</sup> Official sensitive document. Only available for internal stakeholders on a need-to-know basis.

# 3.3 Night-Time Economy

As shown previously, the Night-Time Economy (NTE) is one of the drivers of violence in Bedfordshire. Whilst it is an important aspect and feature of any thriving community, it should be safe for the public to participate in without the fear of becoming a victim of violent crime or the vulnerable being preyed upon.

A NTE profile 2022 was completed in January 2023 by the Bedfordshire Police. The profile used data between May 2021 and October 2022 and between 1900 and 0700 hours from the following sources:

- ATHENA where crime types consisted of either violence against the person, criminal damage, public order, sexual offences (including rape), drugs, weapons, or crime related incidents for domestic and hate.
- STORM incidents where closing category was anti-social behaviour.
- ATHENA Custody All nominals arrested from the identified hotspot streets.
- Prison and police station locations were removed from data as these are not NTE locations.
- Partner and other data sources used: Mosaic, NHS, BTP, open source, College of Policing "What Works" toolkit. Partner data from NHS, BTP and BFRS supported findings of crime data.
- Benchmarking requests were submitted to all forces and responses recorded.

The NTE profile identified and focused on four hotspots in Bedfordshire: Luton hotspot, Central Bedfordshire hotspots (in Leighton Buzzard and Dunstable) and Bedford hotspot. Some of the key findings per hotspot are summarized in Table 12.

Some of the concerns related to some or all of the hotspots identified in the NTE profile include underage buying and drinking of alcohol; drug dealing, drug possession/trafficking; drink driving; not enough officers on foot; some links with gang/OCG nominals relating to violence, sexual assault and drug offences; gang fights; underage females being let into a pub on Saturday nights; lack of CCTV in some areas; fights with bar staff; and a higher proportion of criminal damage.

For more information, see the Night-Time Economy Profile for Bedfordshire<sup>52</sup>.

<sup>52</sup> Official sensitive document. Only available for internal stakeholders on a need-to-know basis.

Table 12: Summary of key finding from the Night-Time Economy profile for Bedfordshire, by identified four hotspots – Luton hotspot, Central Bedfordshire hotspots (in Leighton Buzzard and Dunstable) and Bedford hotspot, based on May 2021 to October 2022 data

**Luton Hotspot Dunstable Hotspot Leighton Buzzard Hotspot Bedford Hotspot** Theme 272 offences and 117 ASB 1.488 offences and 381 ASB 2112 offences and 625 482 offences and 140 Number of offences and ASB incidents - the ASB incidents in the incidents in the 18-months incidents in the 18-months highest count of all the 18-months antisocial hotspots. behaviour (ASB) incidents in the Average 10.4 offences 18-month period Average 2.7 offences Average 2.2 offences per Average 9.4 offences per per weekend. per weekend. weekend. weekend. The Mall (5%) including The Old Sugar Loaf, The Picture House (9%) Voque nightclub (5%), The Key locations Thistle Express Hotel, High Street North (4%) Pilgrims Progress (2%), The Rose (2%) and The George and Dragon The Galaxy (5%), Flame and Asda carpark on (3%) and Off the Wall Court Drive (2.5%). (2%). (ASB: Mercure Centre (2%). Court Drive is the Hotel). biggest issue for ASB. Violence without injury Violence without injury (35%), Top Offences Violence without injury Violence without injury (38%), (35%). Violence with (38%). Violence with Violence with injury (22%) Violence with injury (22%) and and Criminal Damage (21%). Public Order offences (16%). injury (22%) and Public injury (23%) and Public Order offences (17%). Order offences (15%). 16% of crimes flagged as 16% of crimes flagged 5% of crimes flagged as 14% of crimes flagged as domestic Domestic and hate crimes domestic and 3.5% hate as domestic and 3% domestic and 5% hate crime. and 4% hate crime. crime. hate crime. Peak Davs and Saturday into Sunday Friday into Saturday Friday into Saturday and Friday into Saturday followed by followed by Friday into followed by Saturday Saturday into Sunday Saturday into Sunday between Times Saturday between 00 – into Sunday. 23-0300 between 00-0200 hours. 23-0300 hours. (ASB peaked 0100 and 21 - 2200 hours and a smaller Saturday into Sunday. Peak times (ASB: Saturday into Sunday hours. (ASB: Saturday followed by Sunday into 21–0100 hours.) peak 19-2000 hours. into Sunday followed by (ASB: Saturday into Monday. 19 - 2200 hours, Friday into Saturday. Sunday followed by Footfall data identifies July 2022 with a further peak at 23 -0000hours and 01 - 0200ASB is relatively Friday into Saturday. as the peak month and 19-2200hrs consistent until around Between 19 – 2200 as the peak time of footfall. BTP hours.) 01:00 hours when it hours.) also identified 34% of offences occurring at Bedford Railway starts to reduce.)

| Theme  | Luton Hotspot   | Dunstable Hotspot  | Leighton Buzzard Hotspot  | Bedford Hotspot  |
|--|---|--|---|--|
|  |   |  |   | station, peaking Saturdays and<br>Fridays between 1900-2200hrs.<br>Predominantly theft / violence. |
| Offenders' demographics (See Error! Not a valid result for table.) | Mostly male, aged 20-32 years, and 50:50 White or Ethnic minority.        | Mostly male, aged 20-<br>29 years, and White.                      | Mostly male, aged 11-29 years, and White.                           | Mostly male, aged 18-25 years, and White.  |
| Victims' demographics (See Error! Not a valid result for table.)   | Mostly male, aged 20-31 years, and almost 50:50 White or Ethnic minority. | 50:50 male or female,<br>and mostly aged 20-29<br>years and White. | Almost 50:50 male or female, and mostly aged 40-59 years and White. | Mostly male, aged 18-25 years, and White.  |

Source: Night-Time Economy (NTE) Profile for Bedfordshire.

## 3.4 Drugs & Alcohol, Organised Crime Groups (OCGs), Gangs and County Lines

As shown previously, drug, alcohol and substance misuse are one of the drivers of violence in Bedfordshire. This section provides more information on this, based on the cross-partnership Drug and Alcohol Needs Assessment required by the 10-Year National Drug Strategy – From Harm to Hope 2021.

The Drug and Alcohol Needs Assessment 2022/23<sup>53</sup> underpinning this section has been completed and coordinated by the Public Health teams in Bedford Borough, Central Bedfordshire, and Luton Borough Councils, with significant contributions from the Bedfordshire Police Service and other partners of the Combating Drugs Partnership. It is aimed at delivering on the three key priorities outlined in the national strategy:

- i. Breaking drug supply chains,
- ii. Delivering a world-class treatment and recovery system, and
- iii. Achieving a generational shift in demand for drugs.

#### 3.4.1 Summary from Drugs Crime Data

Based on the Bedfordshire Police crime data, the Drug and Alcohol Needs Assessment 2022/23 showed that:

- Drug crime makes up 3% of all crimes in Bedfordshire.
- Alcohol is marked as an aggravating factor in 3% of crimes in Bedfordshire.
- Cannabis appears to be the leading drug in Bedfordshire with 3 in every 4 of all drug crimes being cannabis related.
- 3 in every 4 of drug crimes resulted in a positive outcome and took an average of 2 months to achieve.
- Where recorded, analysis shows that 90% of the suspects in drug offences in Bedfordshire were male and over half (54%) of the cohort were 24 years old or younger. Within this age range specifically, the largest number of offenders were between the ages of 18 and 21 years.
- The top Mosaic groups for drug crime offenders aligned with youth violence offenders.
   These tend to be families with limited resources who budget to make ends meet or are residents of settled urban communities whose younger generation love technology.

<sup>&</sup>lt;sup>53</sup> Authors: Alice McGushin and Lilli Peters (Public Health Bedford Borough, Central Bedfordshire and Milton Keynes), Mark Sheldon, Jolene Jefferson, and Elizabeth Bailey (Public Health Luton Borough Council), Analytical Team & DCI (Bedfordshire Police Service)

This shows the link between drugs, its reliance on phones and the exploitation of vulnerable children seeking inclusion and money for nicer things.

- Luton accounts for half of all drug crimes within Bedfordshire, with the main hotspot
  being a LSOA located in the Luton town centre and accounting for 6% of all drug
  crimes. This is one of the hotspots variously identified in other parts of this SNA and is
  also one of the main hotspots for other partners (based on health data). This means
  that work to reduce the problem in this area could benefit all partners and stakeholders.
- The other hotspots were linked to the Luton and Bedford town centres.
- As well as youth violence, there is a significant overlap between drugs and general violence, because drug crime hotspots overlap with violent crime hotspots as well as Bedfordshire's highest harm hotspots.
- Alcohol is marked up as an aggravating factor in more violent crimes than drugs are, with alcohol accounting for 8% of violent crime and drugs accounting for potentially up to 3%.
- However, due to crime recording issues, drugs could be an aggravating factor in more crimes than represented. Over half of violent crime offenders also had links to drugs in the same period as their violent offence.
- There is a known link between cannabis factories and violence.
- Half of Bedfordshire's homicides can be linked to drugs or alcohol.
- Drugs and alcohol are significant factors in Domestic Abuse investigations and Adult Protection Investigations showing a link between drugs/alcohol and vulnerable adults/domestic abuse.
- 29% of crimes relating to prohibited articles coming into prison are related to drugs.
   Although due to recording issues, this figure could be higher.

## 3.4.2 Summary from Arrest Data

Based on the Bedfordshire Police arrest data, the Drug and Alcohol Needs Assessment 2022/23 found that:

- 22% of all Bedfordshire's arrests are for drug or alcohol offences.
- Young people are more likely to be involved in drug crimes whilst those aged 31-40 years are more likely to be dependent on drugs or alcohol.
- Mosaic data suggests that 30% of those testing positive for drugs on arrest or declaring a dependency upon arrest are from the Rental Hubs group.

- Mosaic group Rental Hubs overlaps with cuckooed addresses<sup>54</sup>. Almost 1 in every 4 of cuckooed addresses (24%) in Bedfordshire fall within this group. This aligns to the county lines business model which targets the homes of drug users as a base for criminal activity.
- If used regularly, Drug Testing on Arrest (DTOA) can give a useful insight into the influence drugs has on certain offences because it provides information on the proportion of detainees under the influence of drugs at the time of their arrest. DTOAs also allow the police to appropriately care for its detainees.
  - Where a DTOA was authorised and the detained person was tested, just under half (47%) tested positive for drugs.
  - Of those testing positive from a DTOA, there were more detainees under the influence of both cocaine and opiates than there was just one drug.
  - The summer months appear to have produced the most positive results from a DTOA.
- Recording dependency issues concerning detainees that may not be subject to a DTOA, gives a wider insight into the link between drugs and all offences, not just those that trigger a DTOA.
  - Almost 1 in 5 (18%) of all detainees in custody declared some kind of dependency on drugs or alcohol.
  - Two thirds of these also declared mental health issues.
- Possession with Intent to Supply (PWITS) offences where suspects are Released under Investigation (RUI) as opposed to charged can be linked to re-offending.
  - Of a cohort analysed, 42% went on to commit further offences and 1 in 5 went on to become a victim of crime.
  - The largest proportion of re-offending involved further drug offences and violence. Therefore, there is a need to achieve charges for PWITS offences at the earliest opportunity in order to potentially prevent these offences.

## 3.4.3 Organised Crime Groups (OCGs), Gangs and County Lines

OCGs are Individuals, normally working with others, with the intent and capability to commit serious crime on a continuing basis, which includes elements of planning, control, coordination, structure, and group decision-making. There are currently over 30 known

70

<sup>&</sup>lt;sup>54</sup> Cuckooing is the practice of taking over the home of a vulnerable person in order to establish a base for illegal drug dealing, typically as part of a county lines operation

Organised Crime Groups (OCGs) in Bedfordshire, and they are highly likely to be drug motivated with almost all of them being involved in drugs whether directly or as professional enablers. In addition:

- Two thirds of Bedfordshire's OCGs are based in the Luton.
- Over half of Bedfordshire's drug OCGs can be linked to encrypted devices.
- Complex technologies such as Criminally Dedicated Secure Communications are becoming increasingly available to the wider general public and pose a threat to disruption opportunities.
- The use of cryptocurrency and cyrptoassets are becoming increasingly popular and ensure that criminal proceeds remain untraceable.
- Over a third of Bedfordshire's OCGs use the County Lines business model (see Figure 28).

County Lines is a term used to describe gangs<sup>55</sup> and organised criminal networks involved in exporting illegal drugs into one or more importing areas within the UK, using dedicated mobile phone lines or another form of "deal line". They are likely to exploit children and vulnerable adults to move (and store) the drugs and money and they will often use coercion, intimidation, violence (including sexual violence) and weapons."

In June 2019, Bedfordshire Police adopted a new expanded criteria for county lines which encompassed local groups moving drugs around the county, in comparison to the previous criteria in which the drugs had to be imported into the county from outside or exported outside from the county. As of October 2022, over 20 county lines were identified in Bedfordshire with the vast majority of these being imported county lines and a few are exported county lines, although it is difficult to know the true number of exported lines. County Lines relies heavily on the exploitation of young children and vulnerable adults, with drug crime resulting in the largest number of National Referral Mechanisms in Bedfordshire because of criminal exploitation. In a 12-month period, 346 cuckooed addresses were identified across the county with over half being found in Luton.

71

<sup>&</sup>lt;sup>55</sup> A gang is usually considered to be a group of people who spend time in public places that: 1) see themselves (and are seen by others) as a noticeable group, and 2) engage in a range of criminal activity and violence. They may also identify with or lay claim over territory, and/or may also be in conflict with other, similar gangs.

Organised Crime Group

Other Organised Crime Groups

Running the Drugs

In Conflict

Other Gangs

Figure 28: County Lines Business Model

Source: Bedfordshire Police

#### In addition:

- The drugs market within Bedfordshire is largely facilitated by and reliant upon phones.
- There is a strong link between drugs, OCGs, gangs and youth violence with these issues seemingly going hand in hand with one another.
- There are currently 12 gangs known by Bedfordshire Police, although there is likely more than currently known.
- All but one of Bedfordshire's gangs can be linked to drugs, and some of them are specifically linked to county lines and concerns around child criminal exploitation (CCE).
- 1 in every 4 of those committing youth violence offences have previous convictions for drugs. Almost half of those committing youth violence can be linked to gangs or OCGs by affiliation or membership.
- There is a link between mental health issues and youth violence.

### 3.4.4 Summary from other data

Other data used for the Drug and Alcohol Needs Assessment 2022/23 was derived from a variety of sources such as fingertips from the Office for Health Improvement and Disparities

(OHID), Office of National Statistics (ONS) data, National Drug Treatment Monitoring System (NDTMS), local service data, etc. Some of the key findings from the data analysed are below:

- Whilst local and national data is limited, there is clear international evidence on interventions to prevent the onset of drug and alcohol use.
- The unmet treatment need across all treatment groups is high in Bedfordshire.
- Comparator areas have reduced unmet need for Opiate and Crack users (OCU) and alcohol groups, but these remain high locally.
- Emotional and behavioural disorders are associated with a higher risk of substance misuse in adolescence and adulthood.
- Over half of all adults entering treatment in Bedford Borough and Central Bedfordshire are unemployed. Employment rates for those entering treatment in Luton is 70% for drug clients and 50% for alcohol clients.
- 17% of YP entering treatment in Bedford Borough, and 7% in Central Bedfordshire were NEET. In Luton, 29% of YP entering treatment were NEET.
- Permanent school exclusions negatively impact YP in a range of ways. Drugs and alcohol are cited as a reason for school exclusions across Bedfordshire.
- There is a gap with the number of clients leaving prison with treatment needs, and the number who engage with community treatment.
- Alcohol-specific hospital admissions have fluctuated in Bedford Borough. In Central Bedfordshire, admissions are higher than national average for women. Alcohol-related hospital admissions in Luton are higher than the national average for a number of age specific gendered groups.
- Hospital admissions for substance misuse in 15-24 year-olds is higher than the national average for Bedford Borough and Central Bedfordshire. Substance misuse admissions for 15-24 year-olds in Luton has quadrupled since 2009/10 - 2011/12.
- There are inequalities in drug and alcohol related harm and treatment engagement, particularly related to deprived communities. Drug and alcohol misuse may be underestimated in black and minority ethnic communities. In addition, Drug and/or alcohol misuse appears to be higher among lesbian, gay, bisexual, transgender, and queer (LGBTQ+) groups.
- In Luton, there is a general pattern of wards with a higher level of deprivation having a higher rate of alcohol-related hospital admissions.
- A high proportion of clients entering treatment in Bedford Borough and Central Bedfordshire have an identified mental health treatment need. Some of the clients with a mental health treatment need were not accessing treatment for their mental health.

- 64% of drug clients and 60% of alcohol clients that entered substance misuse treatment in Luton had an identified mental health treatment need. 76% and 85% of these clients were already receiving mental health treatment.
- The percentage of clients successfully completing and not-representing to treatment in Luton has fallen across all drug groups and is forecast to remain low, whereas some comparator areas have recovered to pre-COVID levels.

#### 3.4.5 Combating Drugs Outcomes Framework

Combating Drugs Partnerships (CPDs) are required to track delivery of the drugs strategy locally, setting local plans and targets that demonstrate where investment has gone and how it is making a difference to communities and individuals. The National Combating Drugs Outcomes Framework (NCDOF)<sup>56</sup> sets out three overarching strategic outcomes of reducing drug use, reducing drug-related crime, and reducing drug-related deaths and harm.

The NCDOF identifies a number of headline measures, supporting measures and OHID additional supporting measures to enable partnerships to monitor progress towards the outcomes. The local implementation of the NCDOF (Bedfordshire Combating Drugs Outcomes Framework<sup>57</sup>) includes 13 headline measures, 45 supporting measures and 42 OHID additional supporting measures. Table 13 presents a summary of the trend of the 13 headline measures as of February 2024. It shows that the trend of:

- Estimated prevalence of alcohol dependency is unfavourable in Bedford.
- Rate of deaths related to drug misuse is unfavourable in Bedford and Luton.
- Number of moderate disruptions against OCGs is unfavourable across the 3 local authority areas.
- Total numbers of adults in drug treatment and prison continuity of care is unfavourable in Central Bedfordshire.

For more information, see the Bedfordshire Combating Drugs Outcomes Framework 58.

<sup>56</sup> 

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/11 58290/National\_Combating\_Drugs\_Outcomes\_Framework\_-

\_Supporting\_metrics\_and\_technical\_guidance\_PDF\_\_1\_.pdf

<sup>&</sup>lt;sup>57</sup> Author: Serena Abel, Bedfordshire Combating Drugs Partnership Coordinator

<sup>&</sup>lt;sup>58</sup> Restricted document. Only available to relevant internal stakeholders

Table 13: Summary of performance and trend of Bedfordshire Combating Drugs Outcomes Framework headline measures, as of February 2024

Key: Favourable trend Neutral trend Unfavourable trend

| Outcome                              | NCDOF headline measure  | Data Source                          | Bedford  | Central<br>Bedfordshire | Luton    |
|--------------------------------------|---|--------------------------------------|----------|-------------------------|----------|
| Reducing drug use                    | Estimated prevalence of opiate and crack use                          | NDTMS Prevalence & Unmet Need report |          |                         |          |
| Reducing drug use                    | Estimated prevalence of alcohol dependency                            | NDTMS Prevalence & Unmet Need report | Increase | Similar                 | Similar  |
| Reducing Drug-                       | Number of drug related homicides                                      | Bedfordshire Police                  | Similar  | Similar                 | Decrease |
| Related Crime                        | Number of neighbourhood crimes  | Bedfordshire Police                  | Decrease | Decrease                | Decrease |
|                                      | Rate of deaths related to drug misuse                                 | NDTMS Health and mortality           | Increase | Decrease                | Increase |
| Reducing Drug-<br>Related Deaths and | Rate of opiate poisoning hospital admissions per 100,000 (adults)     | NDTMS Health and mortality           | Decrease | Decrease                | Decrease |
| Harm                                 | Rate of other drug poisoning hospital admissions per 100,000 (adults) | NDTMS Health and mortality           | Decrease | Decrease                | Decrease |
|                                      | Number of county lines closed   | Bedfordshire Police                  | Similar  | Similar                 | Increase |
| Reducing Drug<br>Supply              | Number of moderate disruptions against OCG'S                          | Bedfordshire Police                  | Decrease | Decrease                | Decrease |
|                                      | Number of major disruptions against OCG's                             | Bedfordshire Police                  | Similar  | Similar                 | Similar  |
| Increasing                           | Numbers of adults in treatment (total)                                | NDTMS LOF                            | Similar  | Decrease                | Increase |
| Engagement in Drug                   | Numbers in treatment (YP)   | NDTMS LOF                            | Increase | Increase                | Increase |
| Treatment                            | Prison continuity of care   | NDTMS LOF                            | Increase | Decrease                | Increase |
| Improving Drug<br>Recovery Outcomes  | Substantial treatment progress (all substances)                       | NDTMS LOF                            | Increase | Increase                | Similar  |

Source: Bedfordshire Combating Drugs Outcomes Framework, as of 2<sup>nd</sup> February 2024

#### 3.5 Child exploitation

There are broadly two types of child exploitation – Child Criminal Exploitation (CCE) and Child Sexual Exploitation (CSE). Although there is currently no statutory definition of CCE, it generally occurs when an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity. The criminal activity is usually in exchange for something that the victim needs or wants, results in financial or other advantage of the perpetrator or facilitator and done through violence or the threat of violence. CSE is a form of child sexual abuse, which occurs when an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity in exchange for something the victim needs or wants and/or for the financial advantage or increased status of the perpetrator or facilitator.

A Child Exploitation Needs Assessment (CENA)<sup>59</sup> was produced by the VERU in 2022 under the auspices of the VERU-led Data and Intelligence Group on Violence and Exploitation in Bedfordshire (DIGVERB). The needs assessment was initiated and agreed locally in Bedfordshire by all agencies and services working on reducing and tackling violence and exploitation problem in Bedfordshire. The purpose of the CENA was to generate a baseline assessment that reflects the levels (or 'burden') of child exploitation (CE) in Bedfordshire. The report, which covers children and young people (CYP) up to the age of 25 years, provides an overview of the prevalence of CE across the county, as well insight into how the issue can be suitably tracked and managed in the future.

The CENA was completed by drawing on mostly identifiable data from a range of local partner agencies and services, including Aquarius (a young person's drug and alcohol service for Bedford Borough and Central Bedfordshire), Resolutions (a drug and alcohol service for Luton), Bedford Borough Council's Children Services, Central Bedfordshire Council's Children Services, Luton Borough Council's Children Services, Link to Change (exploitation support service, serving Bedfordshire), Bedfordshire Police Service, and the VERU's Youth Intervention Specialists (YIS) Service. Some non-identifiable data from other sources such as from Education and the two Youth Offending Services in the county.

Overall, based on the data included in the CENA, 1,896 distinct children and young people up to 25 years old (CYP) were found to be victims or at risk of child exploitation in Bedfordshire

<sup>&</sup>lt;sup>59</sup> Authors: Ade Abitoye, Benita Branagan and Lisa Robinson

over the period covered by all the partner agencies that contributed their data to the assessment. This represents a rate of 86 per 10,000 CYP. The breakdown of the cohort by exploitation type, in Bedfordshire and in each of the three boroughs, is presented in Figure 29.

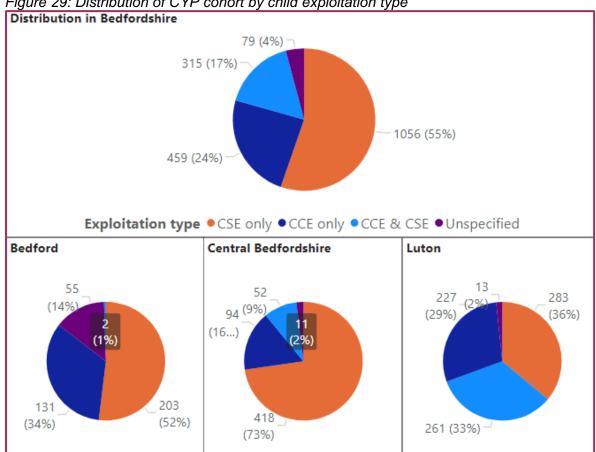


Figure 29: Distribution of CYP cohort by child exploitation type

Source: Child Exploitation Needs Assessment for Bedfordshire, 2022

#### Other findings include the following:

- Luton, with a rate of 100 per 10,000 CYP, has more of the victims or CYP at risk of CE in Bedfordshire than other boroughs - 41% (n=775) of the cohort. Though Bedford Borough has the fewest number by absolute count (n=389; 21% of the total cohort), it has the second highest rate or "burden" of the 3 local areas (70 per 10,000 CYP). Central Bedfordshire, with a count of 573 victims or CYP at risk of CE (30% of the county count), has a rate of 65 per 10,000 CYP.
- An insight into smaller geographical areas than boroughs was not possible because of the poor quality of the postcode data. The postcode was either unknown or unrecorded for 63% of the cohort.

- Overall, in Bedfordshire, the dominant age group of victims or those at risk of CE is 15-19 years old (54% of the total cohort) and evenly divided between males and females though the gender of 10% of the cohort is unknown.
- The vast majority (75%) of the victims or those at risk of CCE are males. 54% of the victims or those at risk of CSE are females, which may be surprising, because a proportion bigger than 54% for females was expected.
- The age group with the second highest count (n=341; 18% of the total CE cohort) is the 10–14-year-olds. This pattern is the same in the local areas except in Bedford Borough where the second highest known age group is the 20-25 year olds.
- Analysis by ethnicity was not possible because ethnicity was unknown or unspecified in 63% of the cases.
- Most of the 1,896 distinct CYP known to individual partner agencies (71%) are known by
  one of the 3 local authorities. The Bedfordshire Police know only 14% of them. Link to
  Change and the VERU know 17% and 12% of them respectively. Expectedly, only a fraction
  of them is known by Aquarius (3%) and Resolutions (1%).
- 57% of the cohort are known only by the local authority, only the police know about 11%, only the VERU know about 8% and only Link to Change know about 7%.
- Overall, in Bedfordshire, about 7 in every 10 CYP in the cohort (72%) were victims or at risk of Child Sexual Exploitation (CSE). Most of the cohort in Central Bedfordshire (73%) were found to be victims or at risk of CSE only. In Bedford Borough, about half of the cohort in Bedford Borough (52%) were found to be victims or at risk of only CSE. However, in Luton, there is almost equal distribution of the cohort in the 3 different categories: CSE only about 4 in every 10; CCE only about 3 in every 10; and both CSE & CCE also about 3 in every 10.
- More than twice the proportion of those who were victims or at risk of CCE only in Central Bedfordshire (16%) was found in Bedford Borough (34%) though the actual numbers are closer (94 and 131 in Central Bedfordshire and Bedford Borough respectively).
- Based on the cohort, the rate of CSE in Bedfordshire is estimated to be 62.2 per 10,000 CYP. The rate is highest in Luton (69.9 per 10,000 CYP) and lowest in Bedford Borough (37.1 per 10,000 CYP). The rate is 53.7 per 10,000 CYP in Central Bedfordshire.
- Based on the cohort, the rate of CCE in Bedfordshire is estimated to be 35.1 per 10,000 CYP. The rate is also highest in Luton (62.7 per 10,000 CYP) and lowest in Central Bedfordshire (16.7 per 10,000 CYP). The rate is 24.1 per 10,000 CYP in Bedford Borough.
- Based on the cohort, the rate of both CCE & CSE in Bedfordshire (i.e. when individuals were flagged as being victims or risk of both CCE and CSE) is estimated to be 14.3 per

- 10,000 CYP. This rate is highest in Luton (33.6 per 10,000 CYP) and lowest in Bedford Borough (0.4 per 10,000 CYP). The rate is 5.9 per 10,000 CYP in Central Bedfordshire.
- In 2020, 163 young people were known to the Luton Youth Offending Service (LYOS) this decreased to 144 young people in 2021. 55% of young people known to the LYOS were vulnerable to criminal exploitation in 2021, which is a slight increase on the previous year where 49% of young people were vulnerable to criminal exploitation. 12% of the young people were flagged as at risk of sexual exploitation in 2020. In 2021, the percentage increases to 18% of young people at risk of sexual exploitation.
- The number of young people known to the Bedfordshire Youth Offending Service (BYOS) also decreased from 261 in 2020 to 205 in 2021. About 50% of the young people had a criminal exploitation vulnerability in both years 52% in 2020 and 48% in 2021. 18% of young persons had a sexual exploitation vulnerability flag in 2020, and this decreased to 14% of young persons flagged to be at risk of sexual exploitation in 2021.
- Vulnerable children who have been excluded from school are more likely to become a victim of child criminal exploitation. Additionally, children who are being exploited may also be more at risk of encountering issues with schooling and permanent or fixed term exclusions. Based on 2019/20 data, Bedford Borough has the highest rate of permanent exclusions in the county and is more than double the national rate of 0.06%. In comparison, Luton has a lower rate of permanent exclusions than the national rate and Central Bedfordshire's rate is similar to the national rate. However, all local authority areas in Bedfordshire have a lower rate of school suspension than the national rate.
- In Bedfordshire, based on 2019/20 data, boys have a higher permanent exclusion and suspension rates when compared with girls; the rate of exclusions increases up to age 14 in line with national figures; and the rates on permanent exclusions and suspensions vary by ethnicity across the three local authority (LA) areas but the lowest rate in all three LA areas was for children from the Asian ethnic group.
- There are many statutory and non-statutory provisions and support services available to support children and young people going through trauma, violence, and exploitation in Bedfordshire. The number of services young people come in contact with may be dependent on the complexity or severity of their case and individual circumstances. But it has been impossible to build the children or young people's journey through these services from the data and it was difficult to agree a definitive picture of relevant services in the county.
- The Data Sharing Agreement (DSA) put in place and signed by partners party to the DIGVERB (which underpinned the request of the data used for this needs assessment) worked but only partially. There were lengthy delays in getting the required datasets and

not all the relevant datasets were available in the required format or granularity. Thus, parts of the original plan and scope of this needs assessment were abandoned, and the completion of this needs assessment was threatened at some point in time.

There were some poor and missing fields in the datasets. In addition, the scope of most of
the datasets provided was limited. Therefore, it was not possible to do certain analyses
such as geographical analysis. In addition, it was not possible to look at the risk factors
because of the limitation of fields in the datasets.

For more information, see the Child Exploitation Needs Assessment 2022<sup>60</sup>.

#### 3.6 Youth Justice System

The Office for Health Improvement and Disparities (OHID) analyses and provides information focused on the rates of entry into the youth justice system in fingertips<sup>61</sup>. The data shows that, compared to England, the rate of first-time entrants into the youth justice system for 10-17-year-olds (i.e., the rate of 10 to 17-year-olds receiving their first reprimand, warning, or conviction per 100,000 population) is statistically lower in Central Bedfordshire and Luton Borough, but similar in Bedford Borough.

In addition, the rate of first-time entrants into the youth justice system for 10-17-year-olds has significantly decreased in about a decade (from 2011 to 2022) in all the three local authorities. The Bedford rate decreased from 635.2 per 100,000 in 2011 to 119.7 in 2022; the rate for Central Bedfordshire decreased from 671.8 per 100,000 in 2011 to 86.1 per 100,000 in 2022; and the Luton rate significantly decreased from 717.5 per 100,000 (in 2011) to 62.7 per 100,000 (in 2022).

Furthermore, OHID's fingertips data shows that the rate of Children and Young people aged 10 to 17 years cautioned or sentenced per 1,000 population is statistically lower in Central Bedfordshire, Bedford Borough and Luton Borough compared to England. The rate has also decreased significantly from 2013/14 to 2020/21 in all the three local areas (from 5.3 per 1,000 to 2 per 1,000 in Bedford Borough and Central Bedfordshire, and from 7.5 per 1,000 to 2 per 1,000 in Luton).

<sup>&</sup>lt;sup>60</sup> Official sensitive document. Only available to relevant internal stakeholders

<sup>&</sup>lt;sup>61</sup> https://fingertips.phe.org.uk/search/youth justice system - page/4/gid/1938133073/pat/6/par/E12000006/ati/402/are/E06000032/iid/10401/age/211/sex/4/cat/-1/ctp/-1/yrr/1/cid/4/tbm/1/page-options/tre-so-0 tre-ao-0

The data above is corroborated and elaborated on by the information provided by the two Youth Offending Services (YOS) in Bedfordshire. The YOS are part of the Youth Justice System developed by the Home Office, which is overseen by the Youth Justice Board. The Bedfordshire Youth Offending Service (BYOS) serves Bedford Borough and Central Bedfordshire boroughs, and the Luton Youth Partnership Service (LYPS) serves Luton borough. Table 18 and Table 19 in Appendix 3 present the information provided by the BYOS and LYPS respectively.

#### 4. PERCEPTIONS OF VIOLENCE AND EXPLOITATION

Each Community Safety Partnership (CSP) conducts a community safety survey and publishes a strategic needs assessment (which reports on public perceptions of community safety) annually. This information has been used within this SNA to provide an overview of local perceptions of violence and exploitation.

It is acknowledged that the individuals from the community who have responded to these surveys may not fully represent the views of each Local Authority's population as a whole. It is likely that individuals completing the survey are more likely to be concerned about crime and dissatisfied with local responses than those who have chosen not to complete it. However, with these limitations taken into account, it can provide a very beneficial source of views and can help to us to understand the community safety issues that are important to residents.

As each Local Authority collects and presents data on public perceptions differently, data is presented for each Local Authority separately. Direct comparisons cannot – and should not – be made between the data for each Local Authority, due to differences in the questions asked, and the survey methodology.

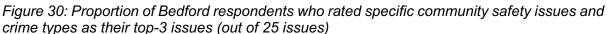
#### 4.1 Perceptions across Bedford Borough

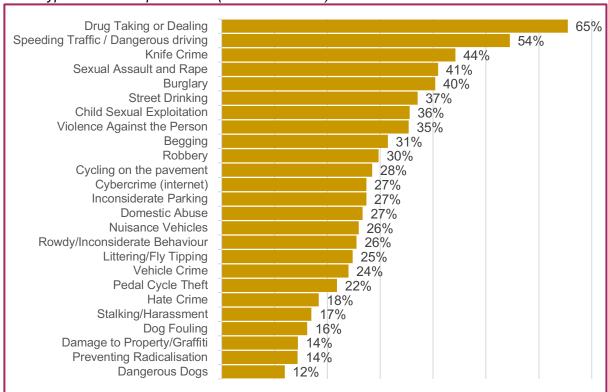
The Bedford Borough Council conducted a Citizen's Survey over a 5-week period (from September to October) in 2023 for the purpose of understanding the needs and aspirations of the residents. The survey was promoted through press releases, social media, bus station advertising, on the council's website and other places such as local groups. The survey was only open to those aged 18 years and above. 1,529 residents responded across a range of Bedfordshire wards. Almost half (44%) were in the 65+ years age range and only 15% were under 45 years old. Below are some of the key reported findings.

- About 8 in every 10 respondents (79.8%) reported felt safe or very safe in their local area during daytime. Only about 8% felt unsafe or very unsafe during the day.
- The night-time factor seems to be apparent because these proportions changed when asked about their local area after dark: only about 4 in 10 (39.4%) reported feeling either safe or very safe and almost similar proportion (37.7%) reported feeling unsafe or very unsafe in their local area after dark.
- 23% of the respondents had a neutral opinion of feeling neither safe nor unsafe.
- Respondents indicated various factors that contribute to feelings of safety in their local neighbourhoods. Some of these included the following:

- Strong community spirit, engagement, and sense of responsibility & community belonging; active community groups, community policing, and neighbourhood watch programs; and awareness & vigilance among neighbours.
- Good street lighting and well-maintained public spaces.
- Low levels of criminal behaviour and anti-social activity.
- Visible policing, quick response times, and efficient reporting mechanisms.
- o Familiarity among residents, as many know each other.
- Low levels of inequality and deprivation, and/or economic prosperity and affluence in the area.
- Safe environments for families and children.
- Access to green spaces and community facilities.
- General respect for the law and use of police force.
- Active and engaged local councillors.
- o Good community venues and events that bring people together.
- Low population density and lack of multi-occupied properties.
- Positive relationships between police and young people.
- Focus on prevention and awareness.
- Some of the relevant factors respondents reported lead to more unsafe feelings included the following:
  - Anti-Social Behaviour: Anti-social neighbours; noisy parties; noise from groups hanging around after dark; and neighbourhood disputes.
  - Crime and Safety: Presence of drug and alcohol users; trouble from local and outsider troublemakers; fear of crime and robberies; and concerns about illegal drug use, drug dealing, and knife crime.
  - Street Lighting and Dark Areas: Poor street lighting; fear of hidden threats in dark areas; areas used for illicit meetups; and fear of being followed or attacked in unlit areas.
  - Mental Health and Social Issues: Mental health issues leading to anti-social behaviour; concerns about social injustice and unemployment; and lack of hope for the future.
  - Drug and Alcohol Problems: Alcohol issues; drug-related problems and concerns; issues related to drug dealing, drug usage, and anti-social behaviour; and fear of drug dealers and users.
  - Youths and Gathering: Bored kids getting into mischief; crowded areas with young people; and concerns about youth gatherings.

- Public Safety: Fear of people jumping out in dark areas; fear of being followed or attacked in unlit areas; and public fear and perceptions of safety.
- o Other and General Concerns: Especially inadequate street lighting; etc.
- About 3 in every 5 people (61.6%) reported feeling safe or very safe in Bedford Town
  Centre during the day. But the reverse is the case after dark, as only about 17% felt
  safe or very safe at night and about 3 in every 5 people (62.9%) reported feeling unsafe
  or very unsafe after dark.
- Respondents specified certain factors that could make the Bedford Town Centre a safe place. They include more visible police presence, CCTV cameras, and street lighting.
- When asked to rate specific safety issues and crime types (out of 25 of them), drug taking or dealing, knife crime, sexual assault and rape, child sexual exploitation, and violence against the person were in the top 10 proportions of respondents who rated them as their top-3 issues (see Figure 30).





Source: Bedford Borough Council

## 4.2 Perceptions across Central Bedfordshire

Central Bedfordshire Community Safety Partnership completed a community survey in 2023. The survey is available for completion online and the link is widely advertised on local social

media through CBC, Safer Central and CSP partners. The survey is available separately for youths<sup>62</sup> and adults<sup>63</sup>.

#### 4.2.1 Central Bedfordshire CSP Youth Survey

There were 265 respondents to the youth survey, which aimed to get the opinions of the local youth on crime in their area. The average age of the respondents was about 16 years old. Below are some of the key highlights from their opinions.

- A majority (75%) said they feel fairly safe or very safe in their local area. About 23% felt unsafe or very unsafe.
- Only 3 in 10 of the respondents (30%) felt fairly safe or very safe walking around the town centre when it is dark but almost two thirds (63%) said they feel fairly unsafe or very unsafe.
- About a third (34%) thought that crime had got worse in their local area in the last 12 months. Only 8% thought things were getting better.
- The majority (77%) had not been a victim of a crime. Of those who had been a victim, half of them did not report it to the police.
- In response to questions about specific safety issues and crime types, about 6 in every 10 young respondents reported that bullying and drugs were a big or moderate problem, more than 2 in every 5 of them reported that violent crime and sexual assault & harassment were a big or moderate problem in their area (see Figure 31).
- Almost a quarter (23%) of respondents said that they had been pressurised into doing something they did not want to do, though 17% opted not to answer the question. 56% reported that they have never been pressurised into doing something they did not want to do.
- Regarding online issues:
  - Only 3 in 10 respondents reported that they have never been bullied. 9% are bullied "all the time", 15% are bullied often, and 42% have been bullied once or twice.
  - 35% reported being trolled on social media at least once and over half (51%)
     reported that they had been body shamed online at least once.
  - 3 in 10 (30%) reported having been asked to send nudes and 36% also reported receiving unwanted photos or cyber-flashing online.
  - 25% have been inappropriately contacted by an adult.

<sup>62</sup> https://safercentral.org/youthsurvey/

<sup>63</sup> https://safercentral.org/community-safety-survey/

o 34% have been offered something illegal online.

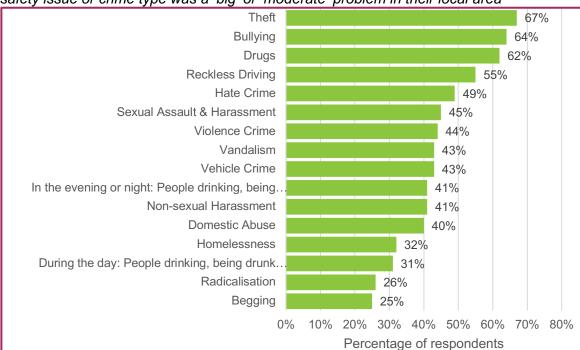


Figure 31: Percentage of Central Bedfordshire young respondents who thought each specified safety issue or crime type was a 'big' or 'moderate' problem in their local area

Data source: Safer Central Community Survey

61% thought that Bedfordshire Fire & Rescue Service were making Bedfordshire safer;
 55% thought that the Bedfordshire Police were making the county safer; and 36% of them thought that Central Bedfordshire Council were making the area a little or a lot safer.

Some of the comments of the young people included:

- More police presence
- Improved and working street lighting
- More CCTV

## 4.2.2 Central Bedfordshire CSP Adult Survey

The survey into Central Bedfordshire adult residents' perceptions of crime in their local area asked about a range of crime types and their general feelings of safety. A total of 3,578 people responded, with an average age of 63 years old and on average, they have lived in Central Bedfordshire for 31 years.

- The majority of respondents (73%) were fairly or very concerned about crime in their local area.
- However, most of the respondents (75%) thought that Central Bedfordshire was overall
  a fairly safe or very safe place to live. 22% thought it was fairly or very unsafe to live
  in the borough.
- 45% of respondents felt fairly or very safe walking at night in Central Bedfordshire but another 45% felt fairly or very unsafe.
- Nearly half (45%) of respondents thought that anti-social behaviour levels had stayed the same in the past 12 months but almost 4 in 10 (39%) thought that these had increased. Only 3% thought they had decreased.
- Similarly, about 4 in 10 (42%) thought that levels of crime have stayed the same over the past 12 months whilst 36% thought they had increased and only 2% thought they had decreased.
- The vast majority (83%) of the respondents reported that they have not been a victim
  of a crime in the past 12 months and 6% of respondents had been a victim but did not
  report it to the police.
- Over a third of respondents (37%) felt that the Bedfordshire Police were making Bedfordshire a safer place, at least to some extent. However, almost half (46%) thought that the Police were making very little or no difference to making Bedfordshire safer.
- Similarly, over a third of respondents (34%) felt that the Central Bedfordshire Council
  were making Bedfordshire a safer place, at least to some extent. And over 4 in 10
  (43%) respondents thought that they were making very little or no difference to making
  Bedfordshire safer.
- Over half (55%) thought that the Bedfordshire Fire & Rescue Service were making the county safer.

When asked about specific community safety issues or crime types, vehicle crime and people using & dealing drugs were the top crimes they thought was the biggest problem in their local area (see Figure 32). In addition:

- Almost 4 in 10 respondents (36%) felt that young people on the street causing a nuisance was a moderate or big problem.
- Nearly 4 in 10 (37%) of respondents thought that violent crime was not a problem in their area; 19% thought it was a slight problem and 15% thought it was a moderate or big problem.

- About 4 in 10 (42%) respondents thought that people drinking, being drunk or rowdy in public places in the evening and night was not a problem in their local area. Even more of them (60%) thought that this was not a problem during the day.
- About 6 in 10 of the respondents reported that they did not know if cybercrime, domestic abuse, exploitation, sexual offences, and terrorism & extremism was a problem in their local area.

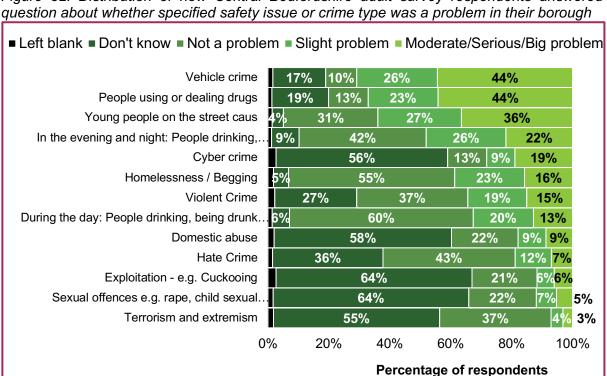


Figure 32: Distribution of how Central Bedfordshire adult survey respondents answered

Data source: Safer Central Community Survey

Most of the comments (free texts) provided by the respondents were about the police, with most respondents calling for more police presence. Some of the comments also asked for more CCTV and improved & working street lighting.

#### 4.3 Perceptions across Luton Borough

Luton Council asked its residents a range of questions about their local area from accessibility of services to crime/safety, infrastructure, and environmental factors. They received 1,000 responses to the survey.

Almost half of the respondents (46%) reported that they felt unsafe or very unsafe. 26% of them had a neutral opinion and about 27% felt safe or very safe.

- 10% reported being dissatisfied with Luton due to the issue of lots of people hanging around, drinking, drug taking, high levels of begging, and homelessness.
- 11% reported dissatisfaction with Luton due to problems relating to a high crime rate, not feeling safe, and not enough police presence.

Furthermore, Luton Public Health commissioned the School Health Education Unit (SHEU) as a health behaviours related survey to improve local data related to the emotional health and wellbeing of children and young people in Luton. The scope of the survey has a "Staying safe" element, which covers safe relationships, internet safety, gangs and knife crime, environment, and safety of the local area.

A total of 2,517 children and young people attending a Luton school completed the survey in the 2020-21 academic year. The following are some of the headline results:

- 17% of pupils responded that there are no adults they can trust.
- 16% responded that they are 'not at all' satisfied with their life at the moment.
- 41% of pupils had a medium to low self-esteem.
- 78% of pupils responded that they worry about at least one of the issues listed 'quite a lot' or 'a lot'.
- 26% of pupils responded that they are 'fairly sure' or 'certain' that they know someone who uses drugs that are not medicines.
- 19% of pupils responded that they have been offered cannabis
- 39% of pupils rated their safety as 'poor' or 'very poor' when going out after dark in the area where they live.
- 16% of pupils responded that they are 'fairly sure' or 'certain' they or their friends carry weapons or other things for protection when going out

In addition, the results show that, since 2015 when the survey has been conducted:

- The proportion of secondary students reporting that there are no adults they can trust is the highest to date.
- There has been an increase in the proportion of secondary students reporting that they were 'not at all' satisfied with their life.
- There has been a decrease in the proportion of female secondary students scoring in the higher brackets of self-esteem scores.
- There has been a decrease in the proportion of male secondary students reporting that they worry about at least one issue at least 'quite a lot'.

- There has been a decrease in the proportion of Year 8 males reporting that they had been offered cannabis.
- There has been a broad decrease in the proportion of secondary students reporting that know a drug user.
- There has been an interesting pattern in the proportions of secondary students reporting that cannabis is safe if used properly; males report this less often than in 2015, while females report in more often.
- There has been a decrease in the proportion of secondary students reporting that they rate the safety when going out after dark as good.
- There has been a decrease in the proportion of secondary students reporting they were 'fairly sure' or 'certain' that they or their friends carried weapons for protection.

Figure 33 shows that 'Serious Violence' was the area that received the highest level of concern, expectation and was a top priority for the communities in Luton Borough. It should however be noted that there may be differing results on public perceptions within the different wards of Luton. For example, 'on street sexual exploitation' is a lower area of concern to the community of Luton in general but to the community of High Town it was an extremely high concern.

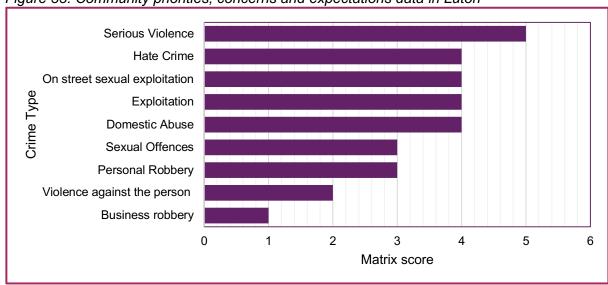


Figure 33: Community priorities, concerns and expectations data in Luton

Source: CSP Strategic Assessment Luton, January 2020

# 5. RISK AND PROTECTIVE FACTORS FOR VIOLENCE AND EXPLOITATION

There is a wide range of factors that could act as "risk" factors, which increase the likelihood of an individual becoming involved in violence and/or exploitation. Conversely, there are also "protective" factors that decrease this likelihood. These factors may be at play at an individual, relationship community or societal level, as outlined by the World Health Organisation in their report "World report on violence and Health," published in 2002<sup>64</sup>. This ecological model highlights that there is not one risk factor, or protective factor that causes someone to be at increased risk of being involved in violence. Risk and/or protective factors at each of these levels interact, which may lead to the outcome of an individual or group of people becoming involved in violence and/or exploitation<sup>65</sup>. Protective factors are often the opposite of risk factors, but they may have a cumulative effect, and could potentially buffer certain risk factors.

#### 5.1 Evidence base

In addition to the WHO World report on violence and Health, several agencies have reviewed the evidence base, and outlined key risk and protective factors for serious violence such as the former Public Health England (now Office for Health Improvement and Disparities)<sup>66</sup> and the Home Office (in the Serious Violence Strategy)<sup>67</sup>. The Serious Violence Strategy highlights that there is some evidence that:

- There is a difference in the risk factors for knife carrying compared to gang-related crime.
- Childhood disadvantage was more strongly associated with gang involvement than knife carrying.
- Young people who carried knives did have other risk factors of vulnerability, such as social isolation and low self-esteem.
- There is an overlap between the risk factors of violence and of sexual abuse and domestic abuse.

https://www.gov.uk/government/publications/serious-violence-strategy

<sup>&</sup>lt;sup>64</sup> World Health Organisation. World report on violence and health. Vol. 51, Journal Medical Libanais. 2002.

<sup>&</sup>lt;sup>65</sup> Public Health England. A whole-system multi-agency approach to serious violence prevention A resource for local system leaders in England About Public Health England. 2019.

<sup>&</sup>lt;sup>66</sup> Home Office UK. Serious Violence Strategy. 2018;(April):111. Available from:

<sup>&</sup>lt;sup>67</sup> Public Health England. Collaborative approaches to preventing offending and re-offending in children ( CAPRICORN ) A resource for local health & justice system leaders to support collaborative working for children and young people with complex needs. 2019; Available from: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/82 8228/CAPRICORN resource.pdf

- There is a complex relationship between the risk factors for serious violence, and the risk factors for substance misuse.
- Substance misuse appears to be a risk factor for involvement in serious violence, both through involvement in a drugs market, and due to the psychoactive impact of drugs, especially stimulants such as crack-cocaine.

As the Serious Violence Strategy highlights, this evidence base has limitations. Many individuals with these risk factors do not become involved in serious violence, therefore these factors are not predictive. The interaction between these factors is extremely complex and cannot be termed as causal factors. This makes it more challenging to identify which factors to target and at which stages during the life-course. Additionally, most of the research comes from the United States rather than from the UK and the evidence base of protective factors is more limited.

Adverse Childhood Experiences (ACEs)<sup>68</sup> refer to sources of stress that children may suffer whilst growing up. Although there is no standardised definition of ACEs, they have historically included multiple forms of physical, sexual, and emotional abuse and neglect, exposure to violence between parents or caregivers, and other serious household stressors such as parental substance abuse or mental illness<sup>69</sup>.

A state-of-the-art report on Tackling Adverse Childhood Experiences (ACEs)<sup>70</sup> was collaboratively produced in 2023 by the WHO Collaborating Centre on Investment for Health and Wellbeing at Public Health Wales, the WHO Collaborating Centre on Violence Prevention at Liverpool John Moores University, and the World Health Organization (WHO) Regional Office for Europe. The report, which is the source of the information in this section, brings together current research on ACEs, their immediate and life-long impacts, and the evidence on how to tackle ACEs through prevention, mitigation and trauma-informed practice (TIP). It is an evidence-based guide for those developing policy, practice, or other interventions to reduce the prevalence and harmful impacts of ACEs.

Building resilience is an important part of work to mitigate the impact of ACEs. Many individuals with ACEs avoid adverse outcomes; a characteristic referred to as resilience (see

<sup>68 &</sup>quot;ACEs" throughout this document are same as "ACEs and trauma"

<sup>&</sup>lt;sup>69</sup> Hughes K, Bellis MA, Hardcastle KA, et al. The effect of multiple 24. adverse childhood experiences on health: a systematic review and meta-analysis. Lancet Public Heal. 2017, 2(8):e356–66.

<sup>70</sup> Source: 2023-01-state-of-the-art-report-eng.pdf (limu.ac.uk)

Figure 34). This is an ability to withstand, cope or recover from the effects of adverse circumstances. Individual resilience is the product of an interaction between internal (child predispositions) and external (social) factors. Types of resilience that can be developed include those relating to:

- Individuals, such as having a sense of control over one's life circumstances, hope, and skills in self- regulation and executive functioning.
- Relationships, such as a trusted, supportive relationship with an adult.
- Communities, such as supportive social networks.
- Cultures, such as mobilisation of cultural traditions.
- Systems, such as the capacity of a system to recover from adverse events and maintain function.

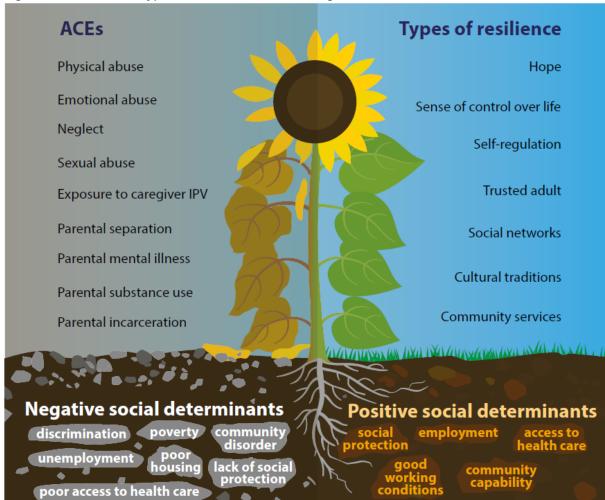
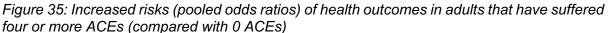


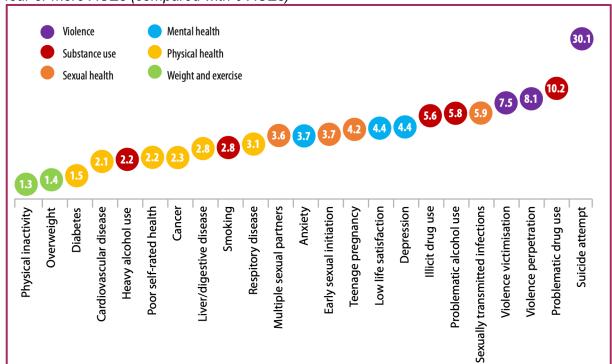
Figure 34: ACEs and types of resilience in avoiding adverse outcomes from ACEs

Source: <u>2023-01-state-of-the-art-report-eng.pdf (ljmu.ac.uk)</u>

Strategies that can help to build resilience are often similar to those used to prevent ACEs from occurring. Examples include parenting programmes, mentoring interventions, school-based programmes that develop life skills, psychological support to deal with the negative impacts of ACEs and community-based programmes that strengthen local resources and relationships. Some of these programmes feature in section 6.2 (Prevention Interventions) below.

Although many people who are exposed to ACEs do not experience any harmful effects, for many others ACEs can have long lasting impacts across the life course, affecting childhood development, education, health, socio-economic outcomes and vulnerability to violence and criminal involvement. Suffering child maltreatment and other ACEs can increase children's risks of being a victim and a perpetrator of violence throughout life. Adverse impact is modest for physical inactivity, obesity and diabetes; moderate for smoking, heavy alcohol use, poor self-rated health, cancer, heart disease and respiratory disease; strong for sexual risk-taking, mental ill health and problematic alcohol use, and strongest for problematic drug use and interpersonal and self-directed violence (see Figure 35).





Source: <u>2023-01-state-of-the-art-report-eng.pdf</u> (<u>ljmu.ac.uk</u>)

Figure 35 shows that those that have suffered from four or more ACEs (compared with those with zero ACEs) are about 8 times more likely to be victims or perpetrators of violence, 10 times more likely to be a problematic drug user and 30 times more likely to attempt to end their lives.

#### 5.2 Risk and protective factors

The Lancashire Violence Reduction Unit (VRU) summarised the evidence base from nationally published documents into a set of risk and protective factors (*Figure* 36 and *Figure* 37).

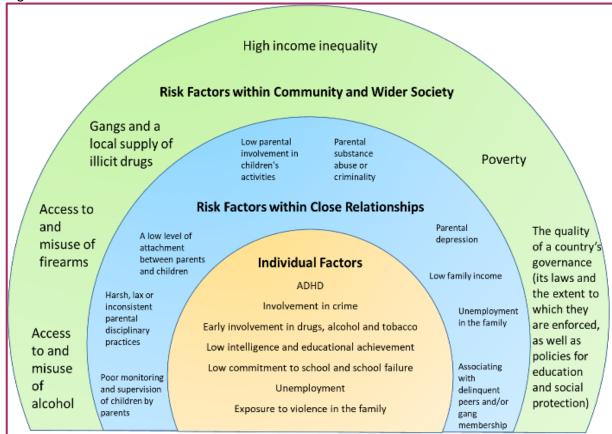


Figure 36: Risk factors for serious violence.

Source: Clare Jackson, Lancashire Violence Reduction Unit

In addition, there was a Collated Violence Indicator (CVI) list that was identified and being developed by multiple national agencies (including Office for Health Improvement & Disparities, NHS England, National Police Chiefs' Council, etc.) through consultation with VRUs and partners. The most recent CVI list of identified risk factors and protective factors for serious violence are respectively placed in Table 20 and Table 21 in Appendix 4.

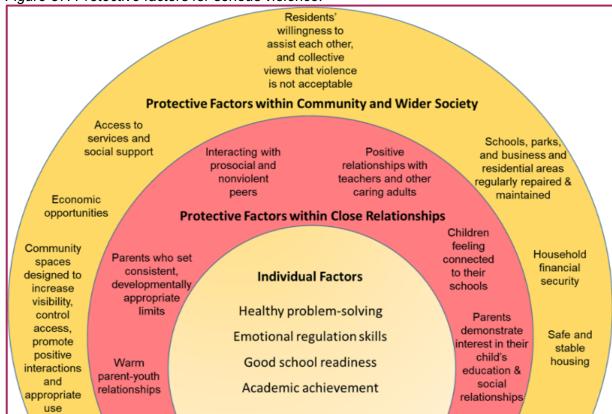


Figure 37: Protective factors for serious violence.

Source: Clare Jackson, Lancashire Violence Reduction Unit

Using the CVI list as a guide and the publicly available OHID's fingertips data, the VERU looked at the risk and protective factors for serious violence in Bedfordshire in November 2023<sup>71</sup>. Data is not available for quite some of the risk factors and more of the protective factors identified in the CVI list. However, based on the data available, the indicators that are significantly worse than the national rate in each of the local authority areas are identified and listed in Table 14, Table 15, Table 16, and Table 17 for individual, family, peer & social, and community risk factors respectively. In addition, the protective factor indicators (for which data is available) and how they compare with the national rate in Bedford, Central Bedfordshire and Luton are respectively presented in Figure 38, Figure 39, and Figure 40.

71 Author: Lucy Perry.

96

Table 14: Individual risk factor indicators worse than the national average in each CSP in Bedfordshire

| Bedford   | Central Bedfordshire  | Luton  |
|---|---|--|
| Adults with substance misuse treatment need who successfully engage in community-based structured treatment following release from prison | % School pupils with social, emotional and mental health needs (school age)                                 | Children under the age of 18 in need because of abuse or neglect: per 10,000   |
| Percentage who have ever tried cannabis at age 15   | Hospital admissions due to substance misuse (15-24yrs)  | Children who started to be looked after because of abuse or neglect: per 10,000  |
| 3. Percentage who have taken cannabis in the last month at age 15   | Percentage with 3 or more risky behaviours at age 15  | prevalence (%) of over 16s with common mental health problems  |
| 4. GCSE achieved 5 A*-C including maths and English of those on free school meals (proportion %)  | Proportion of supported working age adults with learning disabilities living in unsettled accommodation (%) | 4. Successful completion of alcohol treatment %  |
| 5. Emergency admissions (0-4 years) per 1,000   | 5. Emergency admissions (0-4 years) per 1,000   | <ul> <li>5. Prevalence of current over 18 smokers (%) (GPPS)</li> <li>6. Smoking prevalence in adults (18+) - current smokers (APS)</li> </ul> |
|   |   | 7. Hospital admissions due to substance misuse (15-24yrs)  |
|   |   | Children with severe learning difficulties known to schools per 1,000  |
|   |   | Children with profound and multiple learning difficulties known to schools per 1,000   |
|   |   | 10. Emergency admissions (0-4 years) per 1,000   |
|   |   | <ul><li>11. Low birth weight of term babies -proportion %</li><li>12. Reception: Prevalence of underweight Proportion %</li></ul>              |
|   |   | 13. Low birth weight of all babies - proportion %  |
|   |   | 14. Very low birth weight of all babies - proportion %   |

Table 15: Family risk factor indicators worse than the national average in each CSP in Bedfordshire

| Bedford  | Central Bedfordshire           | Luton   |
|--|--------------------------------|---|
| <ol> <li>Homelessness - households with dependent children owed a duty under the Homelessness Reduction Act</li> <li>Homelessness - households owed a duty under the Homelessness Reduction act</li> <li>Homelessness - households owed a duty under the Homelessness Reduction act (main applicant 16-24 years)</li> <li>Homelessness - households in temporary accommodation</li> <li>Marital breakup % of adults</li> </ol> | 1. Marital breakup % of adults | <ol> <li>Children in absolute low-income families (under 16s) proportion (%)</li> <li>Children in low-income families (all dependent children under 20)</li> <li>Free school meals: % uptake among all pupils</li> <li>Free school meals: % uptake among all pupils (Secondary school age)</li> <li>Child poverty, income deprivation affecting children index (IDACI)</li> <li>Homelessness - households with dependent children owed a duty under the Homelessness Reduction Act</li> <li>Homelessness - households owed a duty under the Homelessness Reduction act</li> <li>Homelessness - households owed a duty under the Homelessness Reduction act (main applicant 16-24 years)</li> <li>Homelessness - households in temporary accommodation</li> <li>Households with overcrowding based on overall room occupancy levels</li> </ol> |

Table 16: Peer and social risk factor indicators worse than the national average in each CSP in Bedfordshire

| Bedford  | Central Bedfordshire  | Luton  |
|--|---|--|
| School readiness: percentage of children with free school meal status achieving a good level of development at the end of reception        | School readiness: percentage of children with free school meal status achieving a good level of development at the end of reception | School readiness: % of children<br>achieving a good level of development at<br>the end of reception  |
| School readiness: percentage of children achieving the expected level in phonics screening check in Year 1                                 |   | <ol><li>School readiness: percentage of children<br/>achieving the expected level in phonics<br/>screening check in Year 1</li></ol>                                     |
| 3. School readiness: percentage of children with free school meal status achieving the expected level in phonics screening check in year 1 |   | 3. School readiness: percentage of children achieving at least the expected level in communication and language skills at the end of Reception                           |
| 4. GCSE achieved (5 A*-C including maths and English) of those with free school meal status (proportion %)                                 | Primary School fixed period exclusions rate per 100 pupils  | 4. School readiness: percentage of children achieving at least the expected level of development in communication, language, and literacy skills at the end of Reception |
| 5. Key stage 1 pupils meeting the expected standard in writing   |   | 5. Key stage 1 pupils meeting the expected standard in reading   |
| 6. Key stage 1 pupils meeting the expected standard in science   |   | <ol><li>Key stage 1 pupils meeting the expected<br/>standard in writing</li></ol>  |
| 7. Key stage 2 pupils meeting the expected standard in reading, writing and maths  |   | <ol><li>Key stage 1 pupils meeting the expected<br/>standard in maths</li></ol>  |
|  |   | 8. Key stage 1 pupils meeting the expected standard in science   |
|  |   | 9. Key stage 2 pupils meeting the expected standard in reading, writing and maths  |
|  |   | 10. Persistent absentees - primary school  |
|  |   | 11. Secondary school fixed period exclusions   |
|  | Vouth Violence in Redfordshire 2022, based on the   | rate per 100 pupils  |

Table 17: Community risk factor indicators worse than the national average in each CSP in Bedfordshire

| Bedford  | Central Bedfordshire  | Luton   |
|--|---|---|
| Long-Term Unemployment - rate per     1,000 working age population   | Marital breakup % of adults                                       | 1. % of people in employment aged 16-64   |
| <ol> <li>Long term claimants of jobseeker's allowance per 1,000</li> <li>Unemployment (% of the working age population claiming out of work benefit)</li> <li>Marital breakup % of adults</li> <li>Proportion of New Birth Visits (NBVs) completed within 14 days</li> </ol> | 2. Proportion of New Birth Visits (NBVs) completed within 14 days | <ol> <li>Long-Term Unemployment - rate per 1,000 working age population</li> <li>Long term claimants of jobseeker's allowance per 1,000</li> <li>Economic inactivity rate proportion %</li> <li>Employee and support allowance claimants</li> <li>Unemployment (% of the working age population claiming out of work benefit)</li> <li>Income deprivation proportion %</li> </ol> |

Figure 38: Protective factor indicators in Bedford, compared to the national average

| ■ Worse than the National Average ■ Similar to the National Average             |  |  |       |   |  |                |   |  |  |
|---|--|--|-------|---|--|----------------|---|--|--|
| GCSE achieved 5 A*- C including maths and english of those on free school meals | Key stage 2 pupils<br>meeting the expected<br>standard in reading,<br>writing and maths  | percentages with free status ach                                 |       | readiness: ge of children school meal lieving a good evelopment at of reception | meeting the  |                | y stage 1 pupils<br>meeting the   | School Readiness : % of children achieving a good level of |  |
| (proportion %)  |  |  | Child |   | expected standard in reading   | exp            | ected standard in maths   | development at the end of reception                        |  |
| Key stage 1 pupils<br>meeting the expected<br>standard in writing               | School readiness:     percentage of     children achieving     the expected level         in phonics     screening check in         Year 1 | development: percentage of children achieving the expected level |       | expected level<br>of personal-<br>social skills at<br>2-2 1/2                   | School readiness percentage of childr achieving at least the expected level in communication and language skills at the school of the school o | ren<br>he<br>d | 16-17 year olds<br>not in education,<br>employment or<br>training (NEET)<br>or whose activity<br>is not known |  |  |
|   | School readiness: (p   |  |       |   | end of Reception  School readiness: percentage of childre  |                |   |  |  |
| Key stage 1 pupils<br>meeting the expected<br>standard in science               | children with free<br>school meal status<br>achieving the<br>expected level in<br>phonics screening<br>check in year 1                     |  |       | % of adults   | achieving at least the expected level of development in communication, language and literacy skills at the end of Reception  |                | Utilisation of out exercise or he   |  |  |

Figure 39: Protective factor indicators in Central Bedfordshire, compared to the national average

| ■ Worse than the National Average ■ Similar to the National Average ■ Better than the National Average |  |   |   |  |   |   |
|--|--|---|---|--|---|---|
| GCSE achieved 5 A including maths ar english of those on f school meals (proportion)                   | d<br>ee Key stage 1 pupils   |   | Key stage 2 pupils<br>meeting the expected<br>standard in reading,                        | School readiness:     percentage of     children with free     school meal status     achieving a good level of development     at the end of              | Key stage 1 pupils meeting  | Key stage 1 pupils meeting                            |
|  |  | School readiness: percentage of                               | writing and maths  School readiness:  | reception  | the expected<br>standard in<br>reading  | the expected standard in science                      |
| Key stage 1 pupils meeting the expected standard in maths  | School readiness: percentage of children achieving the expected level in phonics screening | children achieving at least the expected level of development | percentage of children with free school meal status achieving the expected level in       | Child development:     percentage of     children achieving     the expected level of     communication skills         at age 2-2.5         (proportion %) | School readiness: percentage of children achieving at least the expected level in | 16-17 year olds<br>not in education,<br>employment or |
| School Readiness :   | check in Year  | literacy skills at<br>the end of<br>Reception                 | Child development: percentage of  |  | communication<br>and language<br>skills at the end of<br>Reception                | training (NEET) or whose activity is not known        |
| % of children achieving a good level of development at the end of reception                            |  | utdoor space for<br>ealth reasons                             | children achieving the expected level of personal-social skills at 2-2 1/2 (proportion %) | Marital breakup % of adults  | % of people in emp  | ployment aged 16-<br>4                                |

Source: Risk and Protective Factors for Serious Youth Violence in Bedfordshire 2023, based on the Office for Health Improvement and Disparities' (OHID's) fingertip data

Figure 40: Protective factor indicators in Luton, compared to the national average

| ■ Worse than the National Average ■ Similar to the National Average ■ Better than the National Average |   |                                   |  |  |   |                        |   |   |
|--|---|-----------------------------------|--|--|---|------------------------|---|---|
| Key stage 1 pupils meeting the expected  | Key stage 1 pupils<br>meeting the expected<br>standard in science                                       |                                   | meeting the standard   | ge 2 pupils<br>ne expected<br>in reading,<br>and maths                         | GCSE achieved 5 AC including maths a english of those or free school meals (proportion %)       | nd<br>า                | Child development: percentage of children achieving the expected level of                                     | _   |
| standard in reading  | School Readiness :<br>% of children<br>achieving a good   | rea<br>perce<br>ch<br>achi<br>lea | ichool<br>idiness:<br>entage of<br>nildren<br>ieving at<br>ast the<br>cted level | School readiness: percentage of children achieving at least the expected level | 16-17 year olds not education, employment or train  |                        | skills at age 2-<br>2.5 (proportion<br>%)   | personal-social<br>skills at 2-2 1/2<br>(proportion %)      |
| Key stage 1 pupils meeting the expected  | level of development at the end of reception  | comn                              | in<br>nunication<br>language   | of development in communication,   | (NEET) or whose activity is not know  | )                      | Marital breakup   | % of adults   |
| standard in writing  | School readiness:   | skil<br>e                         | Is at the end of ception   | language and<br>literacy skills at<br>the end of<br>Reception                  | School readiness:<br>percentage of<br>children with free  |                        | hool readiness:   |   |
| Key stage 1 pupils<br>meeting the expected<br>standard in maths  | percentage of<br>children achieving<br>the expected level<br>in phonics<br>screening check in<br>Year 1 | % of                              | people in o  | employment<br>3-64   | school meal status<br>achieving a good<br>level of<br>development at<br>the end of<br>reception | ch<br>sch<br>ex<br>pho | ildren with free<br>nool meal status<br>achieving the<br>pected level in<br>onics screening<br>heck in year 1 | Utilisation of outdoor space for exercise or health reasons |

Source: Risk and Protective Factors for Serious Youth Violence in Bedfordshire 2023, based on the Office for Health Improvement and Disparities' (OHID's) fingertip data

# 6. PREVENTING VIOLENCE AND EXPLOITATION

# 6.1 Whole systems multi-agency approach

Taking a "whole systems multi-agency approach" to reducing violence and exploitation, refers to how we view the issue and how we can work together to prevent violence and exploitation across Bedfordshire. Multiple organisations have defined what taking this approach means to them, but ultimately the key features of such an approach are outlined in *Figure 41 and Figure 42*.

PROPERTY OF THE CAUEST OF THE

Figure 41: Taking a public health approach to violence and exploitation reduction across Bedfordshire

Source: Public Health Approaches in policing<sup>72</sup>

At the core of this, is partnership working- we need to work across organisational boundaries to tackle this problem, working as a whole system at a place level. We need to know what is driving the problem – that is, the "causes of the causes" and address the wider determinants

<sup>&</sup>lt;sup>72</sup> Christmas H, Srivastava J. Public health approaches in policing: A discussion paper. 2019;1–24. Available from: https://www.college.police.uk/What-we-do/Support/uniformed-policing-faculty/Documents/Public Health Approaches.pdf

(such as housing, education, employment) which have an impact on violence and exploitation (see section 5). We need to focus on how we can *prevent* people in our community from being involved, or at risk of, violence and exploitation before it starts or detect it early. We should take a "proportionate universalism" approach, described by Sir Michael Marmot, where services should ideally be available to all but weighted more heavily to those with the greatest need. Finally, the approach we take, the decisions we make, need to be driven by high quality data. We need to consider how we can best maximise the data that we have in the system, and how we can work across agencies to have a greater impact through the sharing of information.

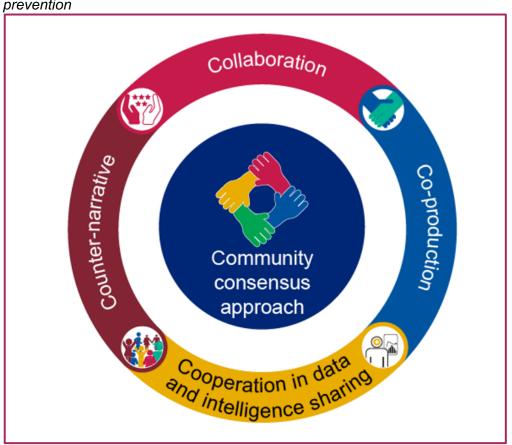


Figure 42: The 5Cs: a place-based taking a whole-systems multi-agency to serious violence prevention

Source: A whole-system multi-agency approach to serious violence prevention<sup>73</sup>

For long term, meaningful, sustainable change, we need a shift in the way we work, how our community perceives violence and how well our interventions suit their needs. Therefore, our community needs to co-design our solutions with us, so we are tailoring the approach at "place

<sup>73</sup> Public Health England. A whole-system multi-agency approach to serious violence prevention A resource for local system leaders in England About Public Health England. 2019.

level." Co-production can build trust within our community, and we need to ensure that communities feel empowered to make a difference. Additionally, we need to acknowledge the fact that this change will be complex and that it may take time to become embedded.

# 6.2 Prevention Interventions

The Serious Violence Strategy reports that there is evidence from systematic reviews that prevention interventions are cost-effective, impacting on a wide variety of outcomes including crime, health, education, and employment.

Interventions to prevent serious violence and/or exploitation may target different aspects of prevention. They may be applied at a "universal" level, to a wider population or a "targeted" approach may be taken, specifically aiming to support those who are at increased risk of being involved. The three prevention types are as follows:

- 1. *Primary prevention*: This is aimed at stopping violence and exploitation before it begins. It refers to universal programmes that aim to support positive development and prevent the circumstances and behaviours associated with later involvement in violence.
- Secondary prevention: This is aimed at early detection and intervention for those at higher
  risk of being involved in violence and exploitation. It entails targeted interventions that
  work with those who are vulnerable to exploitation or starting to display behaviour
  associated with involvement in violence.
- 3. Tertiary prevention: This is aimed at managing the risks and reducing harm in those already involved in violence and exploitation. It requires targeted interventions that aim to protect those who are already involved in crime and violence against further involvement.

The Youth Endowment Fund (YEF) has developed a Toolkit<sup>74</sup> that summarises the best available research evidence about different approaches to preventing serious youth violence. The YEF Toolkit draws on the best available research in our Evidence and Gap Map<sup>75</sup> – a database of over 2,000 studies from across the world, on the effectiveness of different interventions to preventing serious violence. It is based on real life data about what has happened when these approaches have been used before. For each approach, the YEF

\_

<sup>74</sup> Youth Endowment Fund Toolkit

<sup>&</sup>lt;sup>75</sup> Programmes Evidence and Gap Map - Youth Endowment Fund

Toolkit explains what it is, how effective it is likely to be, how confident you can be in the evidence of its impact, as well as indicative costs and links to related resources and programmes.

Figure 43 is a summary of various approaches in terms of their impact, quality of the evidence underpinning the impact measure, and the average cost per participant, arranged by their prevention type.

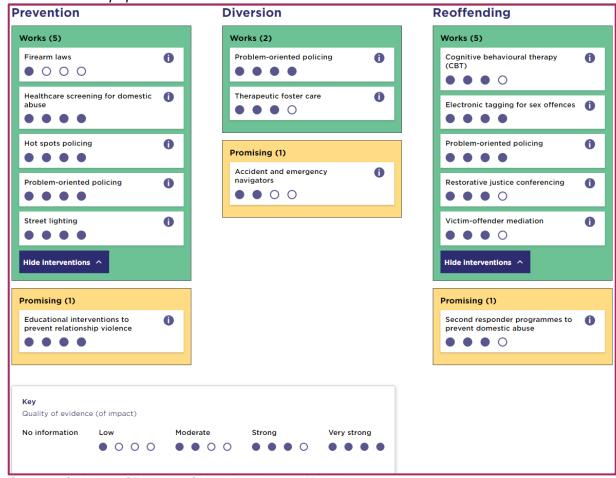
Figure 43: Summary of Youth Endowment Fund (YEF) Framework **Evidence Quality** Average Cost (No. of included studies) Per Participant £0-£500 High (8-11 studies) ● Moderate (5-7 studies) £500-£1,500 ① Low (2-4 studies) £1,500+ ■ Not enough information • Very low (1-2 studies) O Insufficient (0 studies) Impact No Harmful No effect Moderate High Prevention Type Low Approach evidence Primary Bystander interventions to prevent sexual assault Media campaigns Street lighting Primary/Secondary After-school programmes Anti-bullying programmes CCTV (Closed-circuit television) Interventions to prevent school exclusion Police in schools Prison awareness programmes Relationship violence prevention lessons and activities Social skills training Secondary A and E navigators Parenting programmes Secondary/Tertiary Adventure and Wilderness Therapy Cognitive Behavioural Therapy Functional Family Therapy (FFT) Knife surrender schemes Mentoring Multi-Systemic Therapy Sports programmes Trauma-specific therapies Tertiary Boot camps Focused deterrence Hot spots policing Pre-court diversion Restorative justice **Primary/Secondary/** Knife crime education programmes Tertiary Trauma-informed training and service redesign

Data source: Youth Endowment Fund (YEF) Toolkit

In addition, the College of Policing has also created a crime reduction toolkit<sup>76</sup>, which summarises the best available research evidence on what works to reduce crime. It uses the EMMIE framework (effect, mechanism, moderators, implementation, and economic cost) to present evidence from systematic reviews. The toolkit allows for a relatively quick assessment of the impact of different interventions on reducing crime and the strength of the evidence. It can be used by crime reduction practitioners and decision-makers.

Figure 44 summarises the interventions that currently offer overall or some reduction in violent crime and sex offences for children, young people, and location-based populations.

Figure 44: Summary of interventions with evidence that they work or are promising in overall or some reduction in violent crime and sex offences for children, young people, and location-based populations



Source: College of Policing Crime Reduction Toolkit

Using the YEF Toolkit as the primary tool, and combining it with the College of Policing Crime Reduction Toolkit (CPCRT), it shows that:

<sup>&</sup>lt;sup>76</sup> Crime reduction toolkit | College of Policing

# For primary prevention only:

- There is currently no evidence for media campaigns. This does not necessarily mean that media campaigns do not work.
- Whilst the YEF Toolkit suggests that street lighting does not have an effect, the CPCRT shows that it works with very strong evidence.
- Bystander interventions to prevent sexual assault has moderate impact.

# For primary or secondary prevention:

- There is high evidence that relationship violence prevention lessons & activities and social skills training approaches currently have moderate and high impacts respectively.
   But the former (relationship violence prevention lessons & activities) costs less than the latter and is also found as promising in the CPCRT.
- The CPCRT also found very strong evidence that healthcare screening for domestic abuse, hotspots policing and street lighting work.
- After-school programmes, anti-bullying programmes, interventions to prevent school exclusion and closed-circuit television (CCTV) have relatively low impact based on current evidence. But they are relatively inexpensive to implement, except CCTV.
- There is currently no evidence that 'police in schools' programmes work. This does not necessarily mean that they do not work.
- Prison awareness programmes are harmful.

# For secondary prevention only:

- There is some evidence that A&E navigators programmes have high impact. The CPCRT also found that A&E navigators programmes are promising.
- o Parenting programmes also work but with low impact based on the current evidence.
- The CPCRT additionally found that therapeutic foster care works.

# For secondary or tertiary prevention:

- The most impactful approaches are cognitive behavioural therapy, sports programmes, and trauma-specific therapies.
- Functional family therapy (FFT), mentoring, and multi-systemic therapy interventions have moderate impact.
- o Adventure and wilderness therapy programmes have relatively low impact.
- There is currently no evidence that knife surrender schemes work. This does not necessarily mean that they do not work.

- For tertiary prevention only:
  - o Focused deterrence offers the greatest impact, based on current evidence.
  - Hotspots policing, pre-court diversion and restorative justice have moderate impact. In addition, pre-court diversion and restorative justice cost relatively less than other interventions. The CPCRT also found that hot spots policing, restorative justice, and victim-offender mediation programmes work.
  - o Boot camps are harmful.
- For primary, secondary, or tertiary prevention:
  - There is currently no evidence that knife crime education programmes and traumainformed training & service redesign programmes work. However, this does not necessarily mean that they do not work.
  - o The CPCRT also found very strong evidence that problem-oriented policing works.

# 7. RECOMMENDATIONS

This needs assessment provides the scale of violence and exploitation across Bedfordshire, and identified the cohorts, time/months and locations affected. It outlines some of the risk and protective factors and provides a rapid review of the evidence base behind primary, secondary, and tertiary prevention approaches. Below are the key recommendations that have arisen from this review, highlighting areas for consideration, action, further research, and/or further engagement with partners.

#### Recommendation 1: Refreshing the SNA annually

It is recommended that this SNA is a "live document," which considers new and emerging trends and patterns and is refreshed annually. This does not necessarily mean a wholesale change every year but an update where necessary. As part of this ongoing annual update, ways of further simplifying the SNA should be sought and implemented.

# **Recommendation 2: Prioritising identified hotspots**

The VERU, SVD specified authorities and partners should consider the hotspots identified in this SNA (throughout section 3) as high priority areas for future focus when planning local and country-wide violence reduction and prevention strategies, interventions, and activities. It is acknowledged that partners and stakeholders may already have a presence and be active and engaged in many of these areas. Reduction of violent crime in these hotspot areas will have significant impact on the violence reduction aims of the VERU, SVD specified authorities and partners.

#### Recommendation 3: Joining up interventions and approaches

Further to Recommendation 2, partners should constantly seek joining up interventions and approaches in the identified hotspot areas for potential deduplication and amplification of efforts. They are areas that are mostly the same high priority areas for most – if not all – indicators and services. For instance, these hotspot areas are typically the most deprived areas that are also the main focus of Public Health teams across the county in terms of the inequality reduction aims and agenda of Public Health.

#### Recommendation 4: Prioritising young male violence against females

The peculiarities of the offenders and victims of violent crime in Bedfordshire, identified in this SNA (and other problem profiles and needs assessments referenced in this SNA) should guide

priorities for action and intervention. This is broadly young male violence against females. But this does not mean neglecting other categories of violence and exploitation.

# Recommendation 5: Gaining better local understanding of specific risk factors

It would be useful to gain better local understanding of the role of specific risk factors in being involved in violence and/or exploitation (including the role of absent fathers and gang membership). This may involve Public Health Services in the local councils supporting the local development of the Collated Violence Indicator (CVI) list as a standalone or as part of their Joint Strategic Needs Assessments. This may also involve working with academic partners, OHID and other partners to undertake a structured evidence review of the risk factors associated with specific types of violence and exploitation. Perhaps detailed multi-service profiles of current offenders and victims to help improve understanding of the risk factors associated with involvement in violence and exploitation may be useful. In the future, with the right data, there may be potential to develop algorithms using modelling techniques to identify those who are at increased risk of being involved in violence and exploitation and therefore targeting interventions. This would however need to be approached carefully and ethically.

# Recommendation 6: Refreshing shared understanding of whole systems approach

Partners may want to review, refresh, and gain greater shared understanding of what a "whole systems approach" could or should look like across Bedfordshire. This may include undertaking a stakeholder event (or events) to help map risk and protective factors, services, and assets across the system.

# Recommendation 7: Mapping of existing interventions

Either as part of Recommendation 6 or as a standalone, it is recommended that the VERU and partners undertake a mapping of interventions aimed at addressing, reducing, or preventing serious violence and exploitation across Bedfordshire. These should be mapped into primary, secondary, and tertiary prevention and by geographical area using the Youth Endowment Fund (YEF) Toolkit principally but combined with the College of Policing Crime Reduction Toolkit (reference section 6.2). This piece of work should be useful in underpinning a gap analysis between need and service provision across the county. This can also be used to guide future allocation of community project funding.

# Recommendation 8: Commissioning and/or creating evidence-based interventions

The Youth Endowment Fund (YEF) Toolkit combined with the College of Policing Crime Reduction Toolkit (reference section 6.2) should help guide future interventions

commissioned through the Bedfordshire VERU and other partners. Thus, before any new community intervention is commissioned, the VERU and partners should map it to prevention type (primary, secondary, and tertiary prevention) and the type of approach that works, using the toolkits. However, innovation and trying new things that could work should not be stifled. Where a new community intervention to be commissioned is a new type of approach or an approach with low/no evidence of its impact, then a robust evaluation should be a requirement for that intervention.

#### Recommendation 9: Commissioning high-impact interventions before May

Further to Recommendation 8, the VERU and/or partners should consider commissioning some of the prevention interventions that have been shown to work (see section 6.2) but yet to be implemented locally in Bedfordshire. Specific reference was made to implementing A&E navigators programme in Bedfordshire in last year's SNA as a key example of a high impact intervention for secondary prevention approach — this is now being implemented in Bedfordshire. Given that violence and sexual offences generally occur more in May, June and July than other months of the year, the VERU and/or partners should consider wrapping the commissioning process in/by April.

# Recommendation 10: Evaluating funded interventions and projects

As part of Recommendation 8, Recommendation 9, and other related recommendations, the VERU, SVD specified authorities and partners should aim to implement rigorous, evidence-based impact evaluations of funded community projects aimed at reducing or preventing violence and exploitation. This could include both qualitative and quantitative evaluation. Evaluating community interventions within the UK is extremely important, to add to the evidence base. Evaluating prevention interventions could also improve our knowledge and understanding of the role of specific risk and protective factors.

## Recommendation 11: More hotspot policing

Further to Recommendation 2 and Recommendation 9, the Police should do more hotspot policing. It is acknowledged that hotspot policing is already happening. However, more of police presence in hotspots identified in this SNA, especially in the town centres and during the night, is recommended. This is based on the evidence that hotspot policing has been shown to have high impact on violence (reference section 6.2) and residents' feedback (from some of the results of the community surveys – see section 4) show their near universal call for more police presence in the identified hotspots (especially the town centres) to feel safe.

#### **Recommendation 12: More street lighting and CCTVs**

The local councils should investigate and, where needed, provide more street lighting and CCTVs. This is based on the premise that, according to the College of Policing Crime Reduction Toolkit, there is very strong evidence that street lighting works as one of the prevention approaches to violence (see section 6.2) and residents feel unsafe in certain areas because of lack of street lighting (see section 4). In addition, the residents (based on the survey results discussed in section 4) feel more CCTVs will help keep their areas safer though the Youth Endowment Fund toolkit currently rates CCTVs as being relatively low impact and more expensive to implement (based on current evidence).

## Recommendation 13: Better use of geodemographic data resources

Partners should consider acquiring and/or using geodemographic data resources for better targeted work. Some references were made to Experian's Mosaic in this SNA. But the Bedfordshire Fire & Rescue Service and the Bedfordshire Police currently now have the CACI's Acorn geodemographic data resources and can be deployed collaboratively for better analytical insights and targeted interventions. For instance, though there seems to be no current evidence for media campaigns as a prevention intervention (see section 6.2), a well-designed and targeted media campaign (with the aid of the geodemographic resource) could work (without contravening Recommendation 8).

# Recommendation 14: Moving towards an integrated data infrastructure

There are multiple individual sources of data providing a glimpse of violence and exploitation across Bedfordshire from individual services' purview. However, linked data is required to triangulate the information and gain a deeper understanding of hotspot areas and the cohorts affected (victims and offenders). Therefore, it is recommended that the VERU and partners should move closer to developing an integrated data infrastructure akin to the "Thames Valley Together" solution implemented in the Thames Valley Police Force area by their VRU.

# Recommendation 15: DIGVERB and data sharing

Pending the implementation of Recommendation 14, the Data and Intelligence Group on Violence and Exploitation Reduction in Bedfordshire (DIGVERB) should be strengthened. The convener of the SVD in Bedfordshire has strengthened DIGVERB with the use of the powers granted by the SVD to improve prompt data sharing across relevant partner agencies in Bedfordshire. The existing Data Sharing Agreement (DSA) for the group and a separate Information Sharing Agreement (with the Ambulance Service and the local hospitals for the A&E data) should be reviewed, strengthened, and (where appropriate) expanded to (and/or

signed by) other partners to gain more local insight. A single DSA that covers sharing of all relevant data is preferable, more efficient and should be pursued.

# Recommendation 16: Routine use and appreciation of multi-service data

As part of Recommendation 14 and/or Recommendation 15, partners should embed the use of intelligence and analytical insights into everyday work, and support and value linking various datasets between multiple agencies for a more holistic insight. These should include (but not limited to): social care services, acute healthcare, mental health services (including community mental health services), police, probation, youth offending services, education, adult care, and safeguarding team.

# Recommendation 17: Community safety survey co-ordination

The three local CSPs should aim to co-ordinate and conduct their community safety surveys together. This will allow for the possibility of having the same set of survey questions for comparison and benchmarking purposes, better standardisation of their approaches, reduced susceptibility to any staff absences in any of the local CSPs and getting more value for potentially reduced costs. The community surveys are an important source of information regarding public perceptions of violence and exploitation, but they currently appear dissimilar from place to place. Preliminary talks have started regarding this recommendation in the last year, and this should be progressed to a good and logical conclusion.

#### Recommendation 18: Strategy refresh/development

The VERU and SVD specified authorities should consider the key findings from this SNA to refresh the strategic objectives for the Bedfordshire VERU, as necessary. The current VERU strategy is for 5/6 years (2020 – 2025) and may not substantially change. However, a refresh or redevelopment of the strategy is due within the next year and this SNA should form the basis for refreshing or redeveloping the strategy, which is also required under the Serious Violence Duty. It is recommended that the VERU strategy and the SVD strategy should also be a combined strategy, like the approach of having just this SNA to fulfil both requirements of the VERU and SVD. In addition, partners may also want to refresh/develop their own strategies based on the findings in this report.

#### **Recommendation 19: Other recommendations**

Quite a few problem profiles and needs assessments have been completed in recent years by the VERU and partners (Bedfordshire Police, Public Health, etc.) covering different aspects and drivers of violence and exploitation in Bedfordshire. These have all been referenced in

this SNA. Each of them has multiple recommendations. The key recommendations from that body of knowledge have been adopted by this SNA and appropriate partners should implement them. See some of these recommendations from Appendix 5 to Appendix 7.

# Recommendation 20: More in-depth recording for attempted murder crimes

As an example of Recommendation 19, one of the recommendations from other relevant partners' pieces of work is for the Police to consider recording Attempted Murders in the same depth as Homicides. This will help to further understand how drugs and alcohol influence these crimes.

# **AUTHOR AND ACKNOWLEDGEMENTS**

Author: Ade Abitoye

Data & Analytics Lead, Bedfordshire VERU/OPCC

Profound thanks to the following individuals, colleagues, and partner agencies for providing assistance, information and data for the production of this report (listed in no particular order):

- Bedfordshire Violence and Exploitation Reduction Unit (VERU) Past and present staff.
- Bedfordshire Police Service Analytical Team and others.
- Office of Police and Crime Commissioner (OPCC)
- Bedfordshire Youth Offending Service Donna Anslow (Information Manager) and Pat Jennings (Team Manager)
- Luton Youth Offending Service Troy Hutchinson (Performance, Systems & Information Manager) and David Collins (Head of Service)
- Public Health Bedford Borough, Central Bedfordshire, and Milton Keynes Alice McGushin, Lilli Peters (Public Health Practitioner), and others
- Public Health Luton Borough Council Mark Sheldon, Jolene Jefferson, Elizabeth Bailey (Public Health Manager), and others
- Bedford Borough Community Safety Partnership Sarah Stevens (Manager for Community Safety & Resilience)
- Central Bedfordshire Community Safety Partnership Lisa Scott (Safer Communities & Partnership Manager)
- Luton Borough Community Safety Partnership Sophie Langston (Senior Intelligence Analyst)
- Benita Branagan (Performance Analyst, YouTurn Futures) and Lisa Robinson (Strategic Lead – Exploitation & Missing, Bedfordshire Police)
- Lucy Perry (Intern at the VERU and the Mental Health Hub)
- Francoise Julian (Criminal Justice and Victims Project Manager, OPCC)
- Serena Abel (Bedfordshire Combating Drugs Partnership Coordinator)
- All organisational and individual members of DIGVERB
- Other colleagues and stakeholders

If you have any questions or comments about this SNA or related issues, please send an email to: <u>VERU@beds.police.uk</u>.

# **GLOSSARY**

ACEs - Adverse Childhood Experiences

**APS** – Annual Population Survey

ASB - Anti-social Behaviour

**BAME** – Black, Asian and Minority Ethnic

**BFRS** – Bedfordshire Fire and Rescue Service

**BTP** – British Transport Police

**BYOS** – Bedford Youth Offending Service

**CBC** – Central Bedfordshire Council

**CE** – Child Exploitation

**CENA** – Child Exploitation Needs Assessment

**CCE** – Child Criminal Exploitation

**CCTV** - Closed Circuit Television

**CDPs** – Combatting Drugs Partnerships

**CI** – Confidence Interval

**CIV** – Collated Violence Indicators

**CPCRT** – College of Policing Crime Reduction Toolkit

**CRIP** – Common Recognised Information Picture

**CSE** – Child Sexual Exploitation

**CSP** – Community Safety Partnership

**CYP** – Children and Young People (aged up to 25)

**DA** – Domestic Abuse

**DIGVERB** – Data and Intelligence Group on Violence and Exploitation Reduction in Bedfordshire

**DSA** – Data Sharing Agreement

**DSR** – Directly Age Standardised Rates

**DTOA** – Drug Testing on Arrest

**FGM** – Female Genital Mutilation

FFT – Functional Family Therapy

**GPPS** – GP Patient Survey

**HES** – Hospital Episode Statistics

**IMD** – Index of Multiple Deprivation

JSNA – Joint Strategic Needs Assessment

**LA** – Local Authority

LSOAs - Lower Super Output Areas

LYOS - Luton Youth Offending Service

LYPS - Luton Youth Partnership Service

MARAC – Multi-agency Risk Assessment Conference

**NCDOF** – National Combating Drugs Outcome Framework

**NDTMS** – National Drug Treatment Monitoring System

NDTMS LOF - National Drug Treatment Monitoring System Local Outcomes Framework

**NEET** – Not in Education, Employment or Training

NHS - National Health Service

**NTE** – Night-time economy

**OCGs** – Organised Crime Groups

**OCU** – Opiate and crack users

**OHID** – Office for Health Improvement and Disparities

**ONS** – Office for National Statistics

**OPCC** – Office for Police and Crime Commissioner

**PWITS** – Possession with Intent to Supply

RUI - Released under Investigation

**SDG** – Sustainable Development Goal

**SNA** – Strategic Needs Assessment

SHEU - Schools Health Education Unit

SUS - Secondary Uses Service

**SVD** – Serious Violence Duty

**TIP** – Trauma-Informed Practice

VAWG - Violence against Women and Girls

**VERU** – Violence and Exploitation Reduction Unit

**VRU** – Violence Reduction Unit

WHO – World Health Organisation

YEF - Youth Endowment Fund

**YIS** – Youth Intervention Specialists

YOS - Youth Offending Service

**YP** – Young People

Appendix 1: Top 5 Mosaic groups for violence and sexual offences

| Group –  | Key Features  |
|--|---|
| Name   | itey i catules  |
| Group G:<br>Young, well-<br>educated<br>city<br>dwellers               | <ul> <li>Young, professional, well-educated people, cosmopolitan in their tastes, liberal in their views, who enjoy the vibrancy and diversity of inner city living.</li> <li>These neighbourhoods also contain a high proportion of the country's students living in term-time accommodation, whether in halls of residence or shared accommodation.</li> <li>Popular occupations include jobs in journalism, politics, entertainment, and the arts, as well as fashion and design, university education and the internet.</li> <li>People in this group are characterised by a tendency to postpone making permanent commitments to partners or to having children. This results in a very high proportion of young, childless, single people, which reflects itself in a high demand for small but smart rented flats, many of which experience a rapid turnover of tenants.</li> <li>Such neighbourhoods also attract foreign-born students, which further contributes to the diversity of these areas. This diversity and transience in turn further contributes to the lack of community cohesion and community spirit.</li> <li>These people demand a high degree of ethical and environmental responsibility from commercial organisations and public bodies they engage with. They are well read, have a keen interest in environmental and humanitarian issues and enjoy the arts.</li> <li>Quality national newspapers are popular, and the internet is an important source of information as well as a popular method of transacting.</li> <li>Those yet to embark on their career may face financial hardship and thus require some support.</li> <li>As young people without children their reliance on the health and education services is limited, and they will tend to adopt a "live for today" attitude with regards to planning for their future.</li> </ul> |
| Group I: Lower income workers in urban terraces in often diverse areas | <ul> <li>These people work in relatively menial, routine occupations and generally are poorly educated.</li> <li>The majority are young, some still single, others living with a partner with children of nursery and primary school age.</li> <li>They live close to the centres of small towns or in areas developed prior to 1914.</li> <li>A key advantage for many residents in this group is being part of a community of people of similar ethnic or religious origin.</li> <li>The neighbourhoods tend to be densely packed terraced housing, some of which is owner occupied, the rest rented, sometimes from a private landlord. Such houses were traditionally built for the workforce of nineteenth century mines, mills and factories and today provide a relatively cheap entry point into the housing market</li> </ul>  |

- for those who do not qualify for social housing. Despite their small size, homes can often be poorly maintained. Convenient though many of these houses may be, residents have to contend with a variety of environmental problems such as noise and pollution.
- Many residents in these neighbourhoods belong to groups that have recently arrived in the UK, and local shops provide access to products and services important to particular minorities.
- Providers of public services need to be particularly aware of the language barriers when promoting or providing services.
- Communication is often by informal networks whereby newcomers learn from more established residents where to obtain the best products and services, and what their entitlements are. In addition, many recent migrants come from communities in which buying from owners of local business is as much a social activity as an economic transaction and much more natural than using remote channels such as mail, telephone hotlines or internet web sites.
- The leisure activities that are favoured by people in this group centre on social networking.

# Group E: Middle income families living in moderate suburban semis

- These are mostly married people of middle age, living together with their children in family houses.
- These homes are typically semi- detached houses that were popular during the inter-war years or during the period between 1945 and 1960.
- These people are predominantly middle class or skilled workingclass individuals looking for a comfortable house in which to bring up a family, one which is affordable, accessible to where they work and relatively free of social problems.
- Some commute to city office jobs from quite affluent suburbs whilst others earn good wages from manufacturing jobs working in large assembly plants located close to where they live.
- The most common feature of these people is their industriousness.
   Whilst some of this group have modest incomes, very few people are without a job, suffer long term sickness or claim benefit.
- They value their independence, rely on their own judgement rather than social or community attitudes, and do not necessarily get involved with their local community.
- Much of this group's personal wealth is tied up in their property, of which they are justly proud and many of them are likely to rely on their own skills rather than those of local tradesmen to maintain their homes and gardens.
- They are financially stable and like to plan ahead both to minimise their exposure to financial uncertainty and to secure their future.
- Few are sufficiently affluent to rely on private education or health insurance and so rely on public provision of these services. However, in general they are sufficiently secure not to need public support with their finances and homes.
- Readership of mid-market national tabloid newspapers is popular amongst this group.
- They are also more likely to respond to advertisements in regional newspapers, direct marketing and door-to-door campaigns.

# Group K: Residents with sufficient incomes in right-to-buy social housing

- These are people who are practical and enterprising, rather than well-educated, who have created a comfortable lifestyle for themselves through their own hard work.
- Many live on pleasant well-built social housing estates where, although some residents remain tenants of the council, a large number are owner occupiers.
- They are a mix of original tenants who have exercised their right-tobuy and more recently arrived freehold purchasers.
- People live in communities with a fair mix of incomes and occupations where there is a mutual respect for each other and very little anti-social behaviour.
- Residents tend to live in the more economically successful regions of the country where wage rates are high and workers are less vulnerable to redundancy.
- These people value the concepts of self- reliance and responsibility and are confident in their ability to manage their affairs without support from the state, the wider community or from immediate family.
- Neighbourhoods of this sort are characterised by informal community networks, often centred around family and former school friends.
- Within this group you will find a range of attitudes towards finance between older residents, who are cautious and careful savers, and younger residents, who are more prone to maximise their exposure to credit.
- At both extremes these people tend to seek value for money retailers and discount brands.
- Significant amounts of time are spent in household improvements, and where greater technical expertise is required it is often sourced from within the informal economy.
- Television and the home computer are seen as primary sources of entertainment, rather than channels with which to research information or transact. Relatively few people bank or purchase over the internet.

# Group H: Couples and young singles in small modern starter homes

- These people live in homes which are to have been built more recently. These homes can take a variety of forms: small well-appointed flats in new brown field inner city locations suitable for young, single people, many of whom rent from private landlords; small starter homes designed for people on average incomes; mixes of flats and houses in larger new developments where local councils have required developers to include some affordable housing alongside more luxurious homes. Such developments cater for the growing number of single person households.
- Some residents are young single professionals who prefer living in a well-equipped, purpose built flat to sharing an older divided house; young people on middle incomes who rent a flat whilst subletting the second bedroom to a friend; older people downsizing into modern accommodation and young couples just starting a family.
- Most residents have a ready income from a secure position working for a large private or public sector organisation.

- Most residents own a car which is used for visits to the gym or the local cinema.
- Time is also spent at local pubs and clubs, especially where this neighbourhood occurs close to the centres of large provincial cities.
- People in this group rely on searching the internet for information and advice about products and services.
- For many who lack local knowledge it is often simpler to transact over the telephone or via the internet.
- This is a generation that is increasingly influenced by the growth of 'viral' marketing and for which there is an increasing demand for information to be sent via text messaging rather than direct mail. There is an expectation that services should be available 24/7.
- Learning how to use financial products, surviving on a budget and managing debts are concerns for many.
- Some find themselves requiring support, at least in the short term, in the form of benefits.

Data Source: Experian's Mosaic Public Sector (Online:

https://sp.ukdataservice.ac.uk/doc/5738/mrdoc/pdf/5738 mosaicpublicsector info 2010.pdf)

# Appendix 2: Victims' and Offenders' Demographic Summary by hotspot and key recommendations from the Night-Time Economy Profile

Source: Night-Time Economy (NTE) Profile for Bedfordshire.

# **Luton victims and offenders**



# **Dunstable victims and offenders**



# **Leighton Buzzard victims and offenders**



# **Bedford victims and offenders**



# **Key Recommendations**

 Direct resources to hotspot areas focussing on visible policing at key location during peak days and times.

- Improve partnership work in communities with BID etc and utilise sources of intel e.g., street
  pastors. These can be used to better direct resources such as CCTV in areas identified as
  problem areas, at Pub watch meetings that currently do not have surveillance.
- Work in conjunction with door security for better information sharing, support, and training.
- Support and encourage initiatives being rolled out by BID e.g., Best Bar None and My Local Bobby schemes.
- Support and produce media campaigns to prevent drink driving and underage drinking partnership work would also be beneficial.
- Review and utilise benchmarking responses particularly suggestions from Hampshire Police:
   Traffic light system for resourcing based on events calendar (demand mapping). Dispersal orders for every amber and red weekend
  - Home Office funding for knife arches or itemisers to better detect / prevent criminality.
     GRIP funding may be able to be utilised here.
  - Weekly meetings with all partners to keep up to date on key concerns and improve partnerships.
  - Daily grading matrix and specific recording of NTE offences on Niche
- A national increase in spiking has been identified, requiring further media campaigns and education to protect victims and prevent offending.
- The use of fake citizenship cards for ID has been identified and so is no longer accepted.

# Appendix 3: Summary of Information from Bedfordshire Youth Offending Service and Luton Youth Partnership Service

Table 18: Tabular summary of more details from Bedfordshire Youth Offending Service

| Theme | Bedford Borough (BBC)   | Central Bedfordshire (CBC)   |
|-------|---|--|
|       | FTE data supplied by the Youth Justice Board (YJB) using Bedfordshire YOS (BYOS) covers.  The data covered in latest Youth Justice Plan is covering shows a 112 rate per 100,000. There has been a consecutive reduction since 2017/18 are this entire time.  The continued reduction in FTEs could be attributed to ear identification and assessment at Triage stage, whether the receipt of a PENY (Police Electronic Notification to YOT) in  | Central Bedfordshire (CBC)  g PNC data does not separate the 2 local authorities that  the period Oct 2021 – Sep 2022 for both BBC/CBC and  nd BYOS have out-performed Family, Eastern and National  arly intervention work within BYOS including earlier is is triggered by an arrest or Triage assessment following  |
|       | <ul> <li>Average age of FTE C&amp;YP is 16</li> <li>8% were female (2/25)</li> <li>40% were not classified as white.</li> <li>12% were current or previous LAC status at time of the offence.</li> <li>56% were current or previous CIN status at the time of the offence.</li> <li>8% were current or previous CP status at the time of the offence.</li> <li>8% have or had an EHCP.</li> <li>56% of C&amp;YP entering as a FTE were for a main offence of Violence against the person (14/25)</li> </ul> | <ul> <li>Average age of FTE C&amp;YP is 15</li> <li>24.3% were female (10/41)</li> <li>14.7% were not classified as white.</li> <li>5% were current or previous LAC status at time of the offence.</li> <li>32% were current or previous CIN status at the time of the offence.</li> <li>10% were current or previous CP status at the time of the offence.</li> <li>22% have or had an EHCP.</li> <li>46% of C&amp;YP entering as a FTE were for a main offence of Violence against the person (19/41)</li> </ul> |

| Theme  | Bedford Borough (BBC)  | Central Bedfordshire (CBC)  |
|--|--|---|
| National Indicator: Proven Re- offending of young people in the Youth Justice System. The proportion of young people re- | in this cohort.  | means BYOS do not know exactly who these C&YP that are<br>ring the period April 2020 – March 2021 cohort. The binary re-<br>statistical family, region and national rates.  |
| offending within 12 months, following receipt of a substantive outcome.  | <ul> <li>April 2021 – March 2022 cohort</li> <li>47 C&amp;YP were in the latest cohort.</li> <li>14.9% have proven re-offending (7/47)</li> <li>71.4% that have proven re-offending have or had an EHCP (5/7)</li> <li>42.8% that have proven re-offending are or were LAC at time of entering the cohort (3/7)</li> <li>85.7% that have proven re-offending are or were CIN at time of entering the cohort (6/7)</li> <li>100% that have proven re-offending were previously CP at time of entering cohort</li> </ul> | <ul> <li>April 2021 – March 2022 cohort</li> <li>42 C&amp;YP were in the latest cohort.</li> <li>28.6% have proven re-offending (12/42)</li> <li>25% that have proven re-offending have or had an EHCP (3/12)</li> <li>8.3% that have proven re-offending are or were LAC at time of entering the cohort (1/12)</li> <li>25% that have proven re-offending are or were CIN at time of entering the cohort (3/12)</li> <li>41.6% that have proven re-offending are or were CP at time of entering cohort (5/12)</li> </ul> |
| National Indicator: Use of Secure Estate. Young people receiving a conviction in court who are sentenced to custody      | The data covered in latest Youth Justice Plan is covering shows a 0.13 rate per 1,000 which is 6 C&YP This rate per 1,000 remains higher than statistical family, with a rate of 0.45 which accounts for 19 C&YP   | the period Jan 2022 – Dec 2022 for both BBC/CBC and region and national rates. The highest peak was in 2018/19 2022 – June 2023 with a 0.15 rate per 1,000 which accounts stical family, region and national rates.   |
|  | July 2022 – June 2023 There were a total 4 custodial sentencing episodes – but in fact related to 3 C&YP. Custodial Sentencing on separate court hearings is counted separately.  • All were male  • There were classified a white or white and Indian   | July 2022 – June 2023 There were a total 3 custodial sentencing episodes - but in fact related to 2 C&YP. Custodial Sentencing on separate court hearings is counted separately.  • All were male  • They were classified as white or black African   |

| Theme                                 | Bedford Borough (BBC)   | Central Bedfordshire (CBC)   |
|---------------------------------------|---|--|
|                                       | <ul> <li>All had or have an EHCP</li> <li>All were previous CIN or CP prior to the custodial sentencing</li> <li>All bar 1 were previous or current LAC at time of the custodial sentence</li> <li>Custodial sentencing ranged from 4 – 24 months in length</li> <li>All were Detention and Training Orders</li> <li>The main offence that attracted a custodial sentence were:</li> <li>Burglary dwelling and theft – no violence (6 YJB seriousness score)</li> <li>Assault by beating of an emergency worker (3 YJB seriousness score)</li> <li>Possess with intent to supply a controlled drug of Class A – Heroin (6 YJB seriousness score)</li> <li>Section 18 – wounding with intent (7 YJB seriousness score)</li> <li>1 custodial sentence was under 18 at their first court hearing and was sentenced when over 18</li> </ul> | <ul> <li>1 did not have an EHCP</li> <li>All were previous CP prior to the custodial sentencing</li> <li>All were previous LAC prior to the custodial sentence</li> <li>Custodial sentencing ranged from 4 – 133 months in length</li> <li>1 was a Detention and Training Order</li> <li>The main offence that attracted a custodial sentence were:</li> <li>Burglary dwelling and theft – no violence (6 YJB seriousness score)</li> <li>Burglary other than dwelling – theft (3 YJB seriousness score)</li> <li>Section 18 – attempt wounding with intent (7 YJB seriousness score)</li> </ul> |
|                                       | meaning and was senioned when ever re   | court hearing and was sentenced when over 18   |
| Remands and remand bed nights (Local) | April 2022 – March 2023  There was a total of 210 bed nights relating to 5 young people, of which 3 went on to receive a custodial sentence  Remand bed nights are at their lowest since 2018/19 where they peaked at 767   | April 2022 – March 2023  There was a total of 172 bed nights relating to 2 young people – they were both went on to receive a custodial sentence  Remand bed nights are at their lowest since 2017/18 where they peaked at 1125  |

Source: Bedfordshire Youth Offending Service

Table 19: Tabular summary of more details from Luton Youth Partnership Service

| Theme   | Luton  |
|---|--|
| National Indicator: First time entrants (FTE) to the Youth Justice System The number of young people who receive their first substantive outcome. | <ul> <li>Luton has sustained its outstanding level of performance achieving reductions versus the annual period for the fifth successive year, we continue to outperform statistical family, national and critically regional comparators.</li> <li>The 12-month period ending March 2023 yielded just 24 children receiving a first conviction or Youth Caution, therefore Luton achieved a further 17% reduction during this period.</li> <li>This is the 4th consecutive reduction and 67% variance reduction versus 87 new entrants recorded in 2018, which was the most recent peak for new entrants, and notably a 12% reduction versus the last 'normal' year 12-month period of 2019/20.</li> <li>These sustained reductions are based on early intervention arrangements for Luton where early identification and engagement of approximate 167 at-risk children identified in 2023 that present with offending and antisocial behaviour.</li> <li>Luton annual throughput included no Looked after children amongst its cohort, which is significant given this is a group with major disproportionality issues nationally.</li> <li>Performance represents success versus a growing number of cases identified immediately at risk having been mapped by local MAGPan.</li> <li>Engagement: Luton's performance in preventing first time convictions has been based on use of diversionary</li> </ul>   |
|   | programmes and this approach has consistently yielded strong outcomes versus re-offending measures 21% across past 2 years.  • Diversionary engagement monitoring: showed a significant decline this year with just 59% completing programmes. The previous 5 years have established a 70-75% completion baseline. Reduced engagement, which includes 15% of cases refusing programme, may present an immediate risk to 2023/24 performance.  • Identification: Monitoring of the FTE's population indicates the YPS worked with just 38% of the cohort on early intervention programmes prior to the first conviction, this is a significant 14% decline in comparison to 2021/22 outturn.  • Offending Behaviour: Local system wide analysis identifies violence against the person category as the most prevalent route into the youth justice system, 60% of the FTE cohort enter via this category.  • Exploration of the violence against the person category spotlights that half of these episodes feature the presence of knife and weapons possession offences.  • Diversity monitoring: Ethnicity of FTE/Early Intervention Cohorts has seen a significant shift amongst new entrant populations with South Asian and White comprise the largest single groups and Dual Heritage (Mixed) the third largest group.  • This reflects change as recent as 5 years ago the Black group had the highest representation amongst minority groups and were also disproportionate to population share. |

| Theme   | Luton  |
|---|--|
|   | <ul> <li>Age Analysis: 2022/23 throughput compared to the past three-year period, highlights developments amongst two transition cohorts, 17-year-olds are the most prevalent age groups across YPS new entrants and those being actively diverted replacing the 16 years of age group.</li> <li>20% of new entrants were aged 14 years and under, triangulation of arrest and early Intervention cohorts' spotlight that around 10% of children now at risk of entering the justice system are aged 10-13 years, this outturn has doubled compared to 2019/20.</li> <li>The SMB has identified partnership focus for 2023/24 the upcoming LAM to identify what maybe going on for children across all local stakeholder services.</li> </ul>  |
| National Indicator: Proven Re- offending of young people in the Youth Justice System. The proportion of young people re- offending within 12 months, following receipt of a substantive | <ul> <li>YJB data from April 2022 compared to Luton's local 2022/23 data shows a decline in outcomes compared to local annual performance position from 12 months prior. Further local analysis of themes of the secondary measures of Frequency and Seriousness also demonstrates a higher rate of further proven offending.</li> <li>Examination of the period spotlights the impact on performance identified of a highly vulnerable core of children that were frequent flyers during this period.</li> <li>The national measure is based on the number of episodes so a small number of children who were subject to a number of reconvictions had a disproportionate impact on Luton's performance.</li> <li>These individuals are characterised as having significant social care footprint, multiple care placements that may not have been suitable, undiagnosed SEND and numerous missing episodes with disengagement from education demonstrating the wider challenge to services.</li> <li>The following provides analysis of early intervention and statutory cohorts using the national indicator tracking and data collection timeframes used within the national methodology.</li> </ul>   |
| outcome.  | <ul> <li>Key outcomes from this 2020-2022 cohort study:</li> <li>Overall complexion of results is this is a positive set of results for Luton 79% of cases across the Service domains desist their offending behaviour and over a 2-year period broadly 4 out of 5 children will not receive new conviction following original identification across vs full service domains.</li> <li>Outturn of the most recent 12-month period ending March 2023 puts into context a rise in reoffending as 74% desisted there offending behaviour, the majority for whom had been identified following a prior statutory outcome.</li> <li>In terms of statutory cases less than 36% of children receive a further youth justice outcome versus the latest national indicator cohort, averaging 5.5 further offences in the tracking period.</li> <li>Offending outcomes versus early intervention cohorts versus a 2-year cohort from 2020-22 identifies a 21% offending rate for early intervention cases whilst there was a slight rise vs most recent 12-month period this is very stable and successful vindicating the sustained investment in early intervention.</li> <li>There is a significant disparity when analysing the 3 early intervention pathways. The further offending of cases given to a 12-week Diversion programme have the lowest level of further offending averaging a 10% further</li> </ul> |

| Theme | Luton  |
|-------|--|
|       | <ul> <li>offending across the 2-year cohort. Prevention cases are at 20% which reflects the challenge of engaging children identified largely from MAGPan pathways.</li> <li>In stark contrast, 38% of the Drugs and Alcohol cohort went onto commit further proven offences, the highest rate of further offending across all interventions in the period.</li> <li>Inspection of this cohort indicate many of the children went onto escalate significantly, which should lead to an examination regarding initial allocation and suitability then the focus of delivery regarding the risk of reoffending.</li> <li>Seriousness Monitor:</li> <li>When analysing the full statutory cohort, just 16% of all children identified go onto re-offend at a higher gravity compared to original identification episode. However, the core recidivist group results in a significant decline in performance whereby 48% escalate the gravity of their behaviour.</li> <li>This is further magnified when considering outcomes of those on early intervention programmes during this period. Whilst there has been some improvement versus the most recent 12-month cohort, 68% escalate their behaviour when receiving a conviction. It is important to consider cohort sizes this escalation applies to 31 children overall escalating their offending behaviour over 2 year period. In 2022/2/3 this applies to just 8 children holding on statutory.</li> </ul>  |
|       | <ul> <li>escalating their offending behaviour over 2-year period. In 2022/23 this applies to just 8 children holding on statutory orders.</li> <li>Engagement levels with YPS interventions:</li> <li>Just 1 in 5 children (20%) of children who fully complete their Intervention go onto re-offend, this accounts for around 69% of 266 episodes. Spotlighting those 'Not Completing' on statutory programmes have a 70% reoffending rate, which rises to 67% when looking at just 2020/21 cohort. When combining those not completing with those referred elsewhere those cases average 56% further offending.</li> <li>There is a premium on early engagement as analysis of the Time till Further offending; 52% of all statutory cases that went onto re-offend did so within the first 3 months and 86% within 6 months; highlighting the need to scrutinise how timely assessment and the effectiveness of the intervention plan for those highly vulnerable cases.</li> <li>Closer examination is required at understanding disengagement as the link between further offending is clear. There were 7 children who completed their programmes that went onto offend, 5 of the 7 were receiving their first statutory programme. Interesting they came from communities for whom English is a second language which should form dimension of feedback to practice particularly where involvement of family is linked to a panel.</li> <li>YPS Intervention vs standalone convictions: (analyses the impact of service involvement and delivery of intervention and those receiving a Conditional discharge, youth caution or financial penalty)</li> <li>Analysis of all YPS programmes across each domain is positive indicator of YPS delivery 77% of children record no further conviction, whereas compared to 65% on a standalone disposal.</li> </ul> |

| Theme | Luton  |
|-------|--|
|       | <ul> <li>Drilling down to the statutory cohort highlights a notable milestone when comparing further proven offending. There was a 31% rate of children reoffending for children subject to YPS programmes compared to the higher level of recidivism of 47% of children who received no intervention.</li> </ul>  |
|       | <ul> <li>This performance has been relayed to the local judiciary in terms of the success rates of early intervention cohorts<br/>and should form part of system wide feedback to local judiciary and internally to service court officers regarding<br/>suitability of current cases.</li> </ul>  |
| ,     | <ul> <li>Disproportionality and Diversity Monitoring (Analysis of the statutory cohort: Outturn during a 2-year period can be<br/>skewed both by small cohort sizes and prolific individuals whom reach the 16/17 year old milestones when they are<br/>likely at peak of offending behaviour)</li> </ul>  |
|       | <ul> <li>This year particularly highlights both Black and Dual Heritage (Mixed) categories as the most prominent cohorts with<br/>high levels of proven reoffending outcomes.</li> </ul>   |
| ,     | The latest 12- and 24-month periods spotlight Black children with 50% further offending and 38% for Dual heritage with White children scored at 32%. A clear representation of disproportionality within local youth justice system given the relatively small sizing of population amongst wider borough community.   |
| ,     | <ul> <li>Perhaps most disappointing is that further offending patterns were this year applied across the early intervention<br/>cohort, whereas the output of past years analysis have shown a significant decline in convictions of Black and Dual<br/>Heritage groups when successfully engaged in these cohorts.</li> </ul>   |
| ,     | <ul> <li>The South Asian group remains on the surface under-represented but this changes when you focus on the<br/>Pakistani group and remove the other groups. The issues signposted in last year's study have become established<br/>in terms of visibility amongst the entrenched cohorts in the Service.</li> </ul>  |
| .     | Other notable Risks to Performance include:  |
|       | <ul> <li>Age analysis identifies children aged 16/17 with highest levels of reoffending versus each Service domain, these<br/>children have now largely transitioned to adulthood.</li> </ul>  |
|       | <ul> <li>However, the 14/15-year-old category had the highest level of further offending for statutory outcomes alone, this cohort have significantly impact service caseloads as current 16/17 group.</li> </ul>  |
|       | A significant number of 12–13-year-olds were identified from receiving a first conviction in the qualifying period whilst there has been little further convictions these are the children now approaching peak age for further offending behaviour. Previous research has highlighted those identified early who continue to present over a longer period tend to be those prolific frequent flyers as they approach 17 years of age. |
|       | Analysis of YPS Community programmes that are alternatives to custodial orders, 36% of Youth Rehabilitation Orders reoffending rate compared to 27% of Referral Order, a significant narrowing of the gap that have characterised recent contextual analysis.  |

| Theme   | Luton  |
|---|--|
|   | <ul> <li>The use of Youth Caution and Youth Conditional Caution is also under scrutiny given higher levels of further offending 27% and 33% that appear to have become an entrenched characterisation of local youth justice cohorts. Comparable cohorts in the past normally featured lower levels of reoffending.</li> <li>Offence Gateway:</li> <li>Drugs offences (38%) and Violence against the Person (24%) are identified as main offence categories from which the identified children are most likely to go onto receive further convictions, this is applied across all domains of Service.</li> <li>When analysing the throughput of children on statutory outcomes Violence against the Person (VAP) matches the Drugs offences group both recording 41% further offending. Both categories combined account for 7 out of every 10 children identified for the full reoffending cohort study; emphasising the prevalence of both offence categories amongst our early intervention cohorts, for whom may have had a possession or low-level VAP offence.</li> <li>Previously Robbery and Theft and Handling offence categories, were staples of a contextual analysis involving 10–17-year-old activity in Luton, they no longer remain as prominent gateway categories for Luton's cohort during the period of 2020-22.</li> <li>Vulnerabilities and needs: YPS has completed extensive analysis of assessment, which has consistently identified Education Training and Employment, (62%) Significant Relationships (61%), and Substance Misuse (60%) as most likely factors amongst those children that go onto re-offend.</li> <li>Greater visibility across Emotional and Mental Health and Neighborhoods tensions (54%) as well as Speech and Language concerns, which has risen sharply (55%)</li> <li>This year further analysis will measure the impact of assessment to delivery with a selected group of cases characterised by the key identified vulnerabilities. The objective will be to apply what was delivered to those cases i.e. ETE opportunities or health concerns.</li> <li>Rather than le</li></ul> |
| National Indicator: Use of Secure Estate. Young people receiving a conviction in court who are sentenced to custody | <ul> <li>During 2022/23 Luton recorded just 1 custodial order for children, producing a rate per thousand population of 0.04, this is the lowest level of custodial convictions recorded for Luton since the creation of national indicator. Luton's sustained low levels of custody compares favorably to the statistical family and national outturn, current national comparative data places Luton even below the Eastern region for the first annual period in terms of rates per 1000 population.</li> <li>Performance gains and steep reductions in the use of custody are further illustrated by the Service average of 2.3 custodial orders per 12-month period achieved during the past 3 years.</li> <li>Between the years 2017 and 2020, Luton was typically characterised as an area of high custody amongst its 10-17 youth population averaging 15 custodial orders per year with a custodial rate nearly trebling the national averages. The use of custody has been a priority area of focus since 2017 and we are seeing the results of that work.</li> </ul>  |

| Theme                                 | Luton  |
|---------------------------------------|--|
|                                       | <ul> <li>Whilst the Service has been able to sustain these reductions, this has been despite a further 12-month period with a significant number of custodial remand episodes. Usually for Luton the increased use of custodial remands corresponds to rise in custodial convictions at the conclusion of the episodes.</li> <li>Analysis of the full local custodial population indicates that a child's likelihood of custody is via custodial remand episode rather than the imposition of a community order at conclusion of case. Custodial remands account for 78% of secure estate episodes imposed involving Luton children. (Remand and Conviction populations combined)</li> </ul>   |
|                                       | <ul> <li>Causes of Custody</li> <li>The 5-year trend in Luton spotlights the prevalence of serious violence as the main cause of a custodial conviction for children and offending behaviour continues to revolve around two main categories of Violence Against the person (46% of cases) and Robbery (23% of cases).</li> <li>Analysis of the past 5 years of custodial cases illustrate the detrimental impact of criminal exploitation on our children with 72% of custodial orders cohort active MAGPan cases. In all cases the offences that led to custodial</li> </ul>   |
| Remands and remand bed nights (Local) | <ul> <li>outcomes were typical of those categories characterising the criminal exploitation of children.</li> <li>Custodial Remands performance is headlined by 33% reduction in the number of children entering custody from 9 episodes in 2022/23 to 6 as at 31/03/2023. Luton was able to record a year-on-year reduction across each key indicator of custodial remands, custodial population, bed nights and new episodes.</li> <li>Bed nights accrued during these episodes are reduced from 528 to 460 (15%) and a near 20% reduction in local authority remand costs incurred between April 2022 and March 2023. There is a slight rise in the average time a child spends in custody, but this is largely attributed to one case accounting for 55% of all bed nights for Luton.</li> <li>Annual reduction should not mask concern regarding the make-up of the cohort in terms of entry causes. Two cases were initially for Attempt Murder and 85% of new custodial remands were attributed to high gravity violence against the person category. This is 11% above the 5-year local average versus offences leading to youth detention.</li> <li>Since April 2021, there has been a notable rise in secure remand episodes for children entering the Youth Justice system for their first offence. Whilst that is also linked to 2022/23 analysis of first-time entrants, the impact on the secure remands measure is highly significant. In each instance the child has committed high gravity offences that result in life changing injuries or in fact the loss of life as a first-time offence.</li> </ul> |
|                                       | <ul> <li>Since April 2021 half of all 16 Custodial remands were made on children from our South Asian community, this is<br/>significant because in the 3 years prior there had been just 1 case. There continues to be greater visibility of this<br/>community across all YPS cohorts.</li> </ul>  |

Source: Luton Youth Partnership Service

# Appendix 4: Collated Violence Indicator list of identified risk factors and protective factors for serious violence

| Risk Factors Theme of Indicators  Individual Risk Childhood Abuse and Neglect |  |
|---|--|
| Individual Risk Childhood Abuse and Neglect                                   |  |
|   |  |
| Factors Mental Health Issues  |  |
| History of Violent Victimisation  |  |
| Aggressive Behaviour  |  |
| Antisocial Behaviour, beliefs, and attitudes                                  |  |
| Substance use (Drugs/Alcohol/Tobacco)   |  |
| Impulsivity/Poor behavioural control  |  |
| Exposure to violence and conflict in the family                               |  |
| Gang Membership   |  |
| High emotional distress   |  |
| Low intelligence  |  |
| Attention Deficits, Hyperactivity or Learning Disorders                       |  |
| Low self-esteem   |  |
| Head Injury   |  |
| Perinatal trauma  |  |
| Early malnutrition  |  |
| Personal Wellbeing  |  |
| Community Risk Diminished economic opportunities                              |  |
| Factors Local deprivation   |  |
| High crime levels   |  |
| High level of family disruption   |  |
| High level of transiency/people moving  |  |
| Low levels of community participation   |  |
| Socially disorganized neighbourhoods  |  |
| Urban areas   |  |
| Difficulties accessing services   |  |
| Family Risk Factors Family Socioeconomic Status                               |  |
| Authoritarian childrearing attitudes  |  |
| Poor family functioning   |  |
| Low parental involvement  |  |
| Harsh, lax, or inconsistent disciplinary practices                            |  |
| Low emotional attachment to parents or caregivers                             |  |
| Low parental education and income   |  |
| Antisocial parents (including substance abuse)                                |  |
| Household offending behaviour & parental criminality                          |  |
| Homelessness or poor housing  |  |
| Family size   |  |

| Risk Factors                  | Theme of Indicators   |
|-------------------------------|---|
|                               | Family breakdown  |
| Peer & Social Risk<br>Factors | Association with delinquent peers                                 |
|                               | Bullying others   |
|                               | Involvement in gangs  |
|                               | Lack of involvement in conventional activities                    |
|                               | Low school/academic performance                                   |
|                               | Low commitment to school, Truancy, exclusions, and school failure |
|                               | Social rejection by peers   |

Source: Collated Violence Indicator (CVI) list

Table 21: Identified protective factors from the Collated Violence Indicator (CVI) List

| Protective Factors                  | Theme of Indicators   |
|-------------------------------------|---|
| Individual Protective<br>Factors    | Intolerant attitude toward deviance   |
|                                     | High academic performance/High IQ   |
|                                     | School Readiness  |
|                                     | High educational aspirations/School dedication  |
|                                     | Positive social orientation   |
|                                     | Popularity acknowledged by peers  |
|                                     | Highly developed social skills/competencies   |
|                                     | Highly developed skills for realistic planning  |
|                                     | Religious beliefs   |
| Family & Community                  | Connectedness to family or adults outside the family  |
| Protective Factors                  | Stable home environments  |
|                                     | Good housing  |
|                                     | Ability to discuss problems with parents  |
|                                     | Perceived parental expectations about school performance are high   |
|                                     | Frequent shared activities with parents   |
|                                     | Consistent presence of parent during at least one of the following: when awakening, when arriving home from school, at evening mealtime, or when going to bed               |
|                                     | Parental/family use of constructive strategies for coping with problems (provision of models of constructive coping)  |
|                                     | Involvement in social activities  |
| Peer & Social<br>Protective Factors | Possession of affective relationships with those at school that are strong, close, and prosocially oriented   |
|                                     | Commitment to school  |
|                                     | Close relationships with non-deviant peers  |
|                                     | Membership in peer groups that do not condone antisocial behaviour  |
|                                     | Involvement in prosocial activities   |
|                                     | Exposure to school climates with the following characteristics: Intensive supervision, Clear behaviour rules, Firm disciplinary methods, engagement of parents and teachers |
|                                     | Safeguarding and Protection   |

Source: Collated Violence Indicator (CVI) list

# Appendix 5: Recommendations from the Rape and Serious Sexual Offences Problem Profile

#### Awareness/Education:

- In conjunction with partners consider visits to places of education to deliver sessions to increase awareness regarding healthy relationships, concerning patterns of behaviour in relationships and the issue of consent. Particularly in the schools with the highest number of reports of sexual offences.
- Consider social media campaigns aimed at under 18-year-olds covering the aforementioned subjects due to the most common victim age category being under 18. Four out of the five most harmful offenders identified based on crime severity were also under 18.
- Continue with successful social media campaigns, such as the recent 16 Days of Action, to highlight the support available and police initiatives regarding domestic abuse/perpetrators.
- For media campaigns regarding domestic abuse/violence consider other mediums of communication, specifically post and text, to ensure that messages are successfully communicated to more of the community.
- Consider aligning campaigns regarding sexual offending and domestic abuse/violence with peak months of offending – March, May, and December.

#### **Hotspots:**

- In line with Operation Firefly, liaise with popular venues and hotels in town centres to review whether their staff have received awareness training to help them recognise signs that someone may be vulnerable to sexual exploitation, and when to alert police. Particularly top repeat locations including Vogue Nightclub (Bedford), The Old Sugar Loaf (Dunstable) and Flame Nightclub (Luton).
- Consider routine analysis to identify high harm locations and ensure they are included in patrol areas for Operation Firefly. Also, compare hotspots with those identified for Operation Rowan to prioritise resources.
- Review security protocols, particularly CCTV, in popular venues and hotels to deter offending and assist with identification of offenders.
- Consider working with the Bedfordshire Students' Union to help them publish up to date guidance on subjects including sexual assault and spiking, and signpost support available.

#### Data use and quality:

- Consider a routine review of the top repeat victims of sexual offences to ensure that they are receiving sufficient support and are being safeguarded appropriately.
- Consider carrying out a routine review of the most harmful offenders of sexual offences and send to OMU for review/referral if appropriate.
- Consider reviewing how sexual offences are recorded and provide training refreshers to officers and Crime Recording specifically in terms of recording vulnerability factors, the relationship between the victim and offender and flagging repeat victimisation. Better quality data would result in more accurate analysis and subsequently, a better understanding of the nature of sexual offences.
- Similarly, specific locations and premises type were largely missing from crime reports, and/or the offence location was incorrectly recorded as the victim's home address. Therefore, how offences are recorded needs to be reviewed in order to improve the accuracy of crime reports, and to identify repeat locations and hotspots.
- Consider encouraging officers to use what3words when recording the location of an offence committed in a public place (where known), to enable them to record a more specific location.
- Review the Operation Lester data in six- and twelve-months' time to determine if there are any repeat locations, offenders, or victims for spiking offences.

• Review data from the Flare smartphone app to identify hotspots or patterns of behaviour in specific areas/venues which are problematic and require police action.

# **Disruption:**

Refer The White House pub in Luton to the Licensing team due to a recent report (11/08/2022) of a 16-year-old getting intoxicated on alcohol on the premises. The same young person reported that they had been spiked, but this was not forensically confirmed.

# Appendix 6: Recommendations and Intelligence Gaps from Bedfordshire VAWG Problem Profile

#### **RECOMMENDATIONS**

## PURSUE – protect and disrupt VAWG

- Continue partnerships to help identify further victims, offenders and locations of concern to tackle VAWG earlier on.
- Develop awareness and intelligence on FGM within communities for both males and females.
   Break down barriers around FGM and HBA to encourage reporting
- Contact more charities and partners for next report without tight time restraints to understand how partnerships could assist in the future.
- Set up VAWG analysts within force to review data. Continue partnerships to keep up to date with VAWG issues. Consider basing priorities on strategic threat scores to identify highest risk areas.
- Raise awareness of Safestreets anonymous reporting and encourage reporting of VAWG crimes to increase the amount of data obtained and make it more reliable.
- Do in depth work (i.e. problem profiles) on areas that we don't know much about such as HBA and those most harmful crime types.
- Further educate people on what is classified as an offence
- NTE has been identified as a strong driver for public space VAWG and so work should continue to increase patrols and efforts of Project Firefly to disrupt and reduce offending at these peak times of activity.
- Increase Police presence to deter and disrupt crime during peak days and times across public and educational establishments respectively.
- Increase security measures at schools during leaving hours when VAWG offending in educational establishments peaks.
- Target highest risk and repeat offenders to implement rehabilitative measures and reduce offending.
- Review Bedford consultation data and VAWG pop up events for the summer of 2022, requested by CSP analyst and determine best ways to collate pop up event data and public experience to better inform the Police moving forward and supplement crime data.
- Direct resources and Police to highest risk factors in high priority hotspots as identified by RTM analysis to determine what makes these areas most high-risk and implement preventative measures.
- Re-run RTM analysis in the future to determine if resourcing has effectively reduced crime and determine whether high priority and high-risk areas and factors affecting VAWG have changed.
- Review why those schools that you would expect to be showing on high harm locations (Bedford Girls School and Samuel Whitbread School) are not appearing on the data as high harm schools.
- It is recommended to further engage with parents as well as school staff to encourage reporting.
- Develop work around hotspot LSOA to determine why offending is peaked here such as
  effects of events and locations of offending within each hotspot, particularly offending around

Yarlswood Immigration centre and whether offending if happening at the centre, outside the centre or at unknown locations.

- Increase patrols in Town Centres around peak times 0000-0100hrs and peak times and days
  as identified in other hotspots. Complete further analysis in each high harm LSOA to determine
  key locations within each LSOA to focus resources.
- Develop processes to identify and tackle emerging trends and threats within Bedfordshire through increased force education on VAWG concerns and regular review of trends.
- Share VAWG hotspots, high-risk places and high-risk offenders at TTCGS to better tackle VAWG.
- Build partnerships across other teams to collaboratively tackle high harm offenders who are criminally diverse and represent offenders of interest in different crime areas also.
- Recommendation for cyber analyst to identify new emerging trends.

# PROTECT – increase protection against VAWG

- Implement visible patrols in most harmful public areas to deter crime and create community reassurance.
- Build more relationships and partnerships with NTE locations where highest risk areas have been identified.
- Work closely with health services to identify FGM and introduce intervention to safeguard victims or females at risk and educate them.
- Develop partnerships with more online platforms to encourage reporting and sharing of information to identify more offenders and provide victims with justice.
- Continue use of safety apps such as Flare and Hollie Guard to promote safety of victim. A bid
  was submitted in May 2022 and responded to in July 2022 to have the Flare app up and
  running in August 2022
  - Make use of resources Use the 500 memberships for safety apps for most vulnerable victims to promote safety, and assist in data collection for Police particularly for those offences not often reported e.g. cat calling.
  - Review the effectiveness of these apps at a future date to determine the success rate and put in a bid for more memberships for those vulnerable victims.
  - Liaise with universities, Colleges, schools and social services to support funding for these apps for vulnerable persons and raise awareness.
- Utilise You Turn Futures for rehabilitation of VAWG offenders and further input and encouragement of reporting by exploited women. Extend this resource to implement a unit to cover Bedford also.
- Re-run RTM analysis to determine if there are any further risk factors and whether interventions have led to a reduction in crime.
- Develop VAWG safeguarding units to be trained on specific issues such as FGM to understand how to deal with crimes in a sensitive manner, better engage with victims and educate the community on these types of abuse.
- Review or carry out results analysis of Op Octans work following 6 month patrol period
- It is recommended these highest harm schools as listed be focussed on for preventative measures. – All Saints Academy, Stockwood Park Academy, Harlington Upper School, The School House and Icknield High School.
- It is recommended this partnership work be built upon to further support further action where outcomes do not result in Police investigation.

 Identify highest risk victims across all aspects of VAWG to safeguard appropriately (consider use of Vulnerability Assessment Tool).

# PREVENT – prevent people engaging in VAWG

- Raise awareness both on social media and in schools and communities of VAWG and where
  to seek help such as the ask Angela initiative in nightclubs and pubs and Safestreet initiatives
  in order to prevent future repeat victimisation and offending and protect persons at risk.
- Media campaigns to be developed and those in place continued. It is recommended these be
  extended to radio and workplace posters as well as targeted towards predominant offender
  and victim demographics particularly online through social media.
- Develop further awareness for online safety.
- Domestic abuse data is shared between partners with a pan approach being taken between the Police and three local authorities. This approach should be continued with any additional partners incorporated to get the best picture of domestic abuse across the force.
- Work closely with highest harm schools to increase reporting and reduce offending.
- Temporal analysis of public space offences shows that summer months are predominantly when offences peak. Additionally, offences peak during the weekend and Mondays.
   Therefore, increase patrol on hotspots during peak days and months.
- Intercept vulnerabilities early to help prevent future victimisation or exploitation.
- Increase security measures in most harmful schools such as CCTV, teacher or Police presence during school finishing times when crime peaks in educational establishments.
- Carry out a separate piece of work to identify why offenders commit crimes specifically looking
  at reasons why and methods to prevent victims of crime such as exploitation then becoming
  offenders themselves. This may be most productive as case studies of highest severity
  nominals.
- Direct resources and Police to highest risk factors in high priority hotspots as identified by RTM analysis to determine what makes these areas most high-risk and implement preventative measures. Carry out further analysis of those high-risk locations to further understand the problems around them.
- Keep a central calendar of high profile VAWG cases both locally and nationally to better inform analysis of VAWG offending and reporting and assist in identification and prevention of emerging trends.

# PREPARE – reduce or mitigate impact of VAWG

- Obtain further health data to gain a better picture of all offences encompassed within VAWG within a health setting.
- Set up information sharing agreements with partners and other agencies to get more in depth data in the future.
- Code / categorise crime and intelligence data into a specific VAWG category for ease of access to data in the future to review VAWG within the force
- Complete results analysis on Operation Firefly.
- Develop understanding and educate public, partners and the force further around legislation particularly cross overs and confusion between stalking and harassment.
- Address data quality issues by consolidating the ways VAWG crimes are reported and have a long term running VAWG database.

- Liaise with Children's Services to obtain data from them to get a better picture of VAWG within Children's services and whether this is representative of Police Data.
- Liaise with Victim Care services to better understand VAWG from victim perspectives and how better to support and encourage victims of crime to come forward and report offending.
- Surveys have inferred that further education needs to be carried out in schools to educate
  young people about safe relationships and provide a safe environment where young people
  feel they have adults they can trust and turn to for help to increase reporting and engagement
  where a crime has been committed.
- Improve data quality and collation.
- Develop a joint communications strategy between partners to increase awareness of VAWG, with a particular focus on educating young people about healthy relationships and consent, and ensuring victims can recognise abuse and sexual offending and feel comfortable reporting this, as well as promoting how people can access support for a pan approach to VAWG.
- Improve standardisation between surveys to tackle data quality issues with both drop down
  option as well as an 'other free text' option if required to assist with coding and analysis of
  data and allow for better comparison to highlight key issues or gaps in knowledge.
- Build partnerships with children's services and adult social services who were unable to
  provide data in time for analysis despite communication so this perspective can be
  incorporated into future profiles.
- Build relations with YOS services to implement VAWG as an outcome to better monitor within services.
- It is recommended that more work be done to identify highest harm VAWG offenders overall
  and carry out more in-depth analysis to understand offender diversity within criminality,
  offending history and any common characteristics such as previous exploitation or
  vulnerabilities.
- Develop methods and policy for prioritising aspects of VAWG within the force.
- A greater focus on data input is required to enable further analysis and a better understanding of victim and offender demographics in the VAWG arena.
- Further educate people on platforms used and development of technologies.

#### **INTELLIGENCE GAPS**

- The facilitation methods and routes of FGM are a nationwide intelligence gap.
- What is the extent of VAWG online?
- How can the Police better identify online VAWG offenders?
- Why are some online platforms unwilling to report or share information with Police?
- Why are certain schools more susceptible to VAWG offending?
- Are there key vulnerabilities for offenders? This data is not captured on Athena and so would require extra work without time restraints to look into further.
- Have education and talks in schools led to increased reporting of offences?
- Why are some victims unwilling to report to Police? How can increased reporting be encouraged in the future?
- Why are our highest harm locations identified through RTM such high-risk? How can this risk be reduced?
- Is there correlation between increased offending and events in Bedfordshire? If so, which events?

- Does Children's Services Data identify victims that the Police are unaware? How can they better represent and protect these victims?
- What are the main drivers for online VAWG offending?
- Due to a large number of offenders being unknown, large intelligence gaps remain regarding offender demographics as only around half of offenders are represented.
- Why do offenders offend? Were they victims of exploitation themselves? Is there a transition from victim to offender?
- Why are supermarkets and banks/building societies flagging as high-risk factors affecting VAWG crimes? Is there something about the environment around these factors that is affecting VAWG?
- Is reported offending higher identified high harm schools because the processes/support is better from schools/staff?
- Why are those schools that you would expect to be showing on high harm locations (Bedford Girls School and Samuel Whitbread School) not appearing on the data as high harm schools?
   Are offences going unreported?
- Are the lower age bracket victims (18-25 years old) underreporting crimes in public spaces?
   They represented a higher proportion of victims in health data that does not replicate that seen on crime data.
- FGM, HBA and forced marriage remain low level reported crimes and little is known about them – intelligence needs to be developed around these crimes to better determine if they are underreported or just not as common compared to other VAWG offences and therefore do not require as much police focus.
- How can we better intercept repeat offenders particularly within domestic violence to prevent repeat offending and victimisation?
- Why does mental health not appear to flag as a common vulnerability for victims unlike that seen in partner data?
- What are the main causes of crime in each high harm LSOA?
- Who are our highest risk victims?
- Who are our highest risk offenders? How does the force plan to identify highest harm offenders for VAWG or will they retain focus on individual crime types?
- What other criminality and vulnerabilities are common with VAWG offenders that maybe could be tackled at an earlier stage?
- Are there particular vulnerabilities common across offenders of private space VAWG such as substance misuse identified in intelligence?
- What emerging trends do we face in Bedfordshire?
- How will aspects of VAWG be prioritised in Bedfordshire?

# Appendix 7: Recommendations from Child Exploitation Needs Assessment

Recommendations from the CENA are as follows:

- Individual partner agencies need to improve data quality and completeness. A proper Information
  Technology & Data system is recommended, instead of relying on common tools (such as
  spreadsheets) to collect and manage data.
- A more joined-up & standardised approach, underpinned by data and insight, to dealing with those
  affected by CE needs to be introduced. This should include a more streamlined pathway through
  relevant services in the county and the three local authority areas.
- Ideally, violence and exploitation data across all relevant partner agencies should be integrated for on-demand but ethical access. This will enable agile generation of actionable insight for prevention and intervention purposes and activities. A current national exemplar of this approach is the Thames Valley Together data model.
- The Vulnerability Assessment Tracker (VAT) should be introduced as the standard for recording, monitoring, and evaluating both vulnerability and risk. This will generate a single vulnerability repository that can be used to inform resourcing, as well as both reactive and proactive responses for all partner agencies. The introduction of VAT or a Pan-Bedfordshire Tool will help to monitor children travelling across the local authority areas.
- Work on flagging CCE in a clear and consistent way across partner agencies, akin to the CSE work previously done, is needed. The rationale for why this marker is on there also needs to be promoted.
- More attention should be directed towards intercepting children and young people exhibiting CCE
  risk indicators/vulnerabilities at an earlier stage to prevent their long-term engagement in criminal
  activities/criminally exploited. A proactive approach is needed across the partnership to reduce or
  close the gap for children entering risk.
- All partner agencies should be encouraged to add an Adverse Child Experiences (ACEs)
  identification form to their safeguarding procedure. The ACEs identification form would consist of
  simple multiple-choice forms that can be used to capture information relating to the young person's
  domestic context, upbringing, and home-life in one place.
- The Pan-Bedfordshire Child Exploitation Tool should be electronically available on all partner data systems and used in a multi-Agency way to avoid duplication of the tool being used with the child.
- Local authorities should indicate and make links within their data the risk factor of school exclusions
  and those who are flagged as victims and at risk of CE. This data could provide a clear, identifiable,
  and significant link between exploitation and school exclusions for Bedfordshire. The
  recommended VAT tool should do this.
- A separate piece of work that looks at transition as a whole and across the partnership should be commissioned and/or undertaken. This work should consider the following as part of its remit or

recommendations: bespoke transition plans should start at around age 14 and be fully in place when children turn 18; Adult Services need to be aware most CYP will not have additional support needs and therefore not fit within their current criteria; and a separate category will be needed to ensure safeguarding provision is continued and consideration that independent living provision is not always suitable for the CYP and hence, longer term foster provision/care home may be required.